



Business Development Day Exhibitor Packet

Dear Business Development Day Exhibitor,

Thank you for exhibiting at the Business Development Day during Federated Group's 56th National Retail Selling Show taking place on Tuesday, July 29, 2008 from 3:30 PM – 6:30 PM at the Drake Hotel in Chicago, Illinois.

Please carefully read and complete the information attached regarding your exhibit needs. This form captures your booth's requests and information in the following areas:

1. Telecom and Electric needs
2. Cooking Equipment
3. Cooking Instructions
4. Dry Non-Perishable, Frozen and Refrigerated Food shipping labels
5. Exhibit / Material shipping labels
6. Shipping Instructions

Federated Group has chosen Sargon Productions to serve as the official decorator.

To ensure a smooth move in, please refer to the following critical dates and times:

June 20	Deadline to submit all order forms
July 14 – 25	Shipments to arrive for all non-perishable and booth display materials to Sargon warehouse
July 23 – 25	Shipments to arrive for all frozen and refrigerated items to the Drake Hotel
July 29	Move in hours: 9:00 am – 3:30 pm

Federated Group will accept all orders and communicate them directly to the Drake Hotel and Sargon Productions.

I look forward to meeting you at the show. Please don't hesitate to contact me with any questions or concerns.

Wishing you a successful and terrific show!

Eva Sitek
Director of Meeting and Event Planning
Federated Group
Phone: 847-632-8319
Fax: 847-632-8276
Email: eva.sitek@fedgroup.com



Federated Group
56th National Retail Selling Show
Tuesday, July 29, 2008

Vendor Exhibitor Kit

PLEASE COMPLETE AND FAX PAGES 3 – 7 OF THIS PACKET BY
FRIDAY, June 20, 2008
TO INDICATE WHETHER OR NOT YOU'RE REQUESTING THE SERVICES LISTED.

COMPLETE AND FAX PAGE 9 UPON SHIPMENT OF YOUR FOOD ITEMS

FAX: 847-632-8276



Sargon Productions has been selected by Show Management to serve as your official Show Decorator.

Schedule

Exhibitor move-in:	Tuesday, July 29	9:00am – 3:30pm
Show Hours:	Tuesday, July 29	3:30pm – 6:30pm
Dismantle:	Tuesday, July 29	6:30pm – 9:30pm

Your Booth

Show Management has made arrangements for your booth to have the following:

- One (1) 8' high backwall drape
- Two (2) 3' high sidewall drapes
- Two (2) 6' covered and draped tables
- Two (2) chairs
- One (1) booth id sign
- Facility is carpeted

Exhibitor Order Forms /Credit and Payment Policy Form

Attached are Exhibitor Order Forms that you must complete whether or not you are requesting the services listed. If ordering services, full payment must accompany orders by Friday, June 20.

7. Telephone and data (Internet) service request form
8. Electrical service request form
9. Cooking equipment needs and cooking instructions form
10. Shipping form
11. Material handling services order form

Fax pages 3 – 7 to Yolanda Powers' attention at 847-632-8276 no later than **Friday, June 20 to indicate whether or not you require these services.**



CREDIT CARD AUTHORIZATION

Please note that your credit card payment information is required in order to process requests with associated costs as listed. Credit card information is only required if you request services with applicable charges. Your credit card information is secure and strictly confidential.

=====
CREDIT CARD: VISA MasterCard AMEX
ACCOUNT NUMBER: _____
EXPIRATION DATE: _____
CARDHOLDER'S NAME: _____
CARDHOLDER'S SIGNATURE: _____ **DATE:** _____
=====

Company Name: _____ Booth #: _____
Address: _____ Authorized by: _____
City/State/Zip: _____ Signature: _____
Phone: _____ FAX: _____ Date: _____
Email Address: _____
=====

CREDIT AND PAYMENT POLICY

In addition to cash, company check or money order, VISA, MasterCard, and AMEX are accepted. The Credit Card Authorization section above is required and must accompany all credit card orders. Please notify your company representative of the following:

- All orders must be paid in full and/or credit card authorization (above) be on file with your order(s) before any services are rendered. There will be no invoicing; purchase orders are not a form of payment.
- Payment for orders mailed to Sargon in advance can be made by company check, money order, or credit card.
- Event site orders can be paid by cash or charged to a Credit Card Account.
- Items ordered, delivered to booth, then canceled, will not be refunded.
- Other refund requests will not be considered unless Exhibitor makes request of Sargon prior to the close of the event.

PAYMENT MUST BE INCLUDED WITH ALL ORDERS

Fax pages 3 – 7 to Yolanda Powers' attention at 847-632-8276 no later than **Friday, June 20 to indicate **whether or not** you require these services.**



TELEPHONE/DATA REQUEST FORM

I DO NOT HAVE ANY PHONE/DATA REQUEST

<u>Quantity</u>	<u>Description</u>	<u>Price</u>	<u>Total</u>
_____	Phone Set (dial "9" Line)	\$60.00	\$ _____
_____	Direct Dial Line	\$130.00	\$ _____
_____	Speaker Phone Set	\$150.00	\$ _____
_____	Speaker Phone Line	\$100.00	\$ _____
_____	Internet DSL	\$275.00	\$ _____
TOTAL DUE			\$ _____

All phone lines are set for local and 800 calling. Prices do not include cost of calls and taxes.

Payment must be received with your order by: Friday, June 20, 2008.

Payment by: Credit Card Authorization only

Company Name: _____ Booth #: _____

Address: _____ Authorized By: _____

City/State/Zip: _____ Signature: _____

Phone: _____ FAX: _____ DATE: _____

E-Mail: _____

Fax pages 3 – 7 to Yolanda Powers' attention at 847-632-8276 no later than **Friday, June 20 to indicate whether or not you require these services.**



ELECTRICAL SERVICE REQUEST FORM

I do not have any electrical service requests

Electrical Charges

Charges below include installation, electrical consumption and event disconnect. Exhibitors must clearly identify equipment power. If in doubt please refer to the plate on your appliances/equipment which includes volts/amps/watts required for operation. Be sure to double check the AMP requirements on your equipment before selecting appropriate electrical service as we are not able to adjust the electrical circuits once the show has been setup. Please list below each piece of equipment requiring AC.

<u>Electrical Description</u>	<u># Lines</u>	<u>Rate</u>	<u>Total</u>
110 Volts, Single outlet 0-1000 watts	_____	\$50.00 each	_____
110 Volts, Quad Box	_____	\$100.00 each	_____

<u>Electrical Accessories</u>	<u>Electrical Aids</u>		<u>Total</u>
	<u>#</u>	<u>Rate</u>	
Extension Cords	_____	\$25 each	_____
Power Strips	_____	\$50 each	_____
		TOTAL	\$ _____

Payment must be received with your order by Friday, June 20, 2008.

Payment by: Credit Card Authorization only

Company Name: _____ Booth #: _____

Address: _____ Authorized By: _____

City/State/Zip: _____ Signature: _____

Phone: _____ FAX: _____ Date: _____

Email: _____

Fax pages 3 – 7 to Yolanda Powers' attention at 847-632-8276 no later than **Friday, June 20 to indicate **whether or not** you require these services.**



Cooking Instructions and Equipment Form

1. Microwave and toaster ovens are permitted in the ballroom but not provided by the hotel.
2. Please bring your own napkins, eating utensils, serving plates, cups, etc.
3. **Booth setup time: Tuesday, July 29 9:00am - 3:30pm.**

I DO NOT HAVE ANY FOOD EQUIPMENT/COOKING NEEDS

- | | Round | Rectangle |
|--|----------------------|----------------------|
| <input type="checkbox"/> Heating lamp – quantity: _____ (max. of 2) | ___ Full
___ Half | ___ Full
___ Half |
| <input type="checkbox"/> Chafing dish with sternos – quantity: _____ (max. of 3) | ___ Full
___ Half | ___ Full
___ Half |
| <input type="checkbox"/> Soup Tureen – quantity: _____ (max. of 2) | ___ Full
___ Half | ___ Full
___ Half |
| <input type="checkbox"/> Large serving spoon(s) – quantity: _____ | | |
| <input type="checkbox"/> Large serving fork(s) – quantity: _____ | | |
| <input type="checkbox"/> Ice – quantity: _____ | | |
| <input type="checkbox"/> Other – please specify: _____ | | |

Food Preparation:

Hotel staff will prepare food items according to your instructions below. Be sure to provide your **CONFIDENTIAL** credit card information on page 2 of this document to ensure worry-free onsite event execution.

Fax pages 3 – 7 to Yolanda Powers' attention at 847-632-8276 no later than **Friday, June 20 to indicate **whether or not** you require these services.**



ITEM #1

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

ITEM #2

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

ITEM #3

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

ITEM #4

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

ITEM #5

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

ITEM #6

Food / Dish Name: _____

Ingredients: _____

Preparation Instructions and Notes: _____

Fax pages 3 – 7 to Yolanda Powers' attention | at 847-632-8276 no later than **Friday, June 20 to indicate **whether or not** you require these services.**



IMPORTANT SHIPPING AND MATERIAL HANDLING INFORMATION

If you are shipping Exhibit Materials and Non-Perishable Food Items, please send to the following address **TO ARRIVE BETWEEN JULY 14 – JULY 25, 2008:**

Non-Perishables Shipping Address:

TO: Sargon Productions
Event: Federated Group NRSS Show – Booth # _____
4 Lake Marian Rd.
Carpentersville IL, 60110
847-426-4329
8 AM – 5 PM Monday – Friday

If you are shipping Refrigerated / Frozen Perishable Items, please send to the following address **TO ARRIVE BETWEEN JULY 23 AND JULY 25, 2008:**

Perishables Shipping Address

TO: [Your company name]
Event: Federated Group NRSS Show- Booth# _____
The Drake Hotel - Kitchen
140 East Walton Place
Chicago IL, 60611

Please coordinate the shipment of your product with the enclosed color-coded shipping labels and the designated shipping date schedule:

DRY GROCERY PRODUCT
AND / OR
BOOTH DISPLAY MATERIALS
SHIP TO ARRIVE BETWEEN

July 14 – 25, 2008

**FROZEN
PRODUCT**

SHIP TO ARRIVE
BETWEEN:

July 23 – 25, 2008

**REFRIGERATED
PRODUCT**

SHIP TO ARRIVE BETWEEN:

July 23 - 25, 2008



SHIPPING INSTRUCTIONS

1. You will be sending items into the **Business Development** area of the show.
2. Place **TWO** shipping labels (provided in this packet) on the outside of each box and include a label with your return address.
3. Labels are provided below and are color-coded based on product type (there are two labels per sheet – please cut the sheet and securely tape the labels onto your boxes).
4. **Complete the boxes below and fax this sheet to Yolanda Powers 847-632-8276 upon shipment of your boxes.**

COMPANY NAME:	
Boxes Ship Date:	

Content Type (Circle One):	Contents Description:	Case Pack:
Box (1) <input type="checkbox"/> Non-perishable / dry <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen		
Box (2) <input type="checkbox"/> Non-perishable / dry <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen		
Box (3) <input type="checkbox"/> Non-perishable / dry <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen		
Box (4) <input type="checkbox"/> Non-perishable / dry <input type="checkbox"/> Refrigerated <input type="checkbox"/> Frozen		

FAX THIS PAGE TO Yolanda Powers at 847-632-8276



MATERIAL HANDLING INSTRUCTIONS

All inbound material handling and drayage charges will be paid by Federated Group. Any additional outbound material handling and drayage charges will be the responsibility of the exhibitor. Contact Kristen Magoon from Sargon at 847-414-4319 for rates.

Crated, boxed or skidded material will be received at the warehouse in advance and delivered to respective booths at show site. Empty containers will be removed from the booth, placed in storage and returned to the booth at the close of the show. Materials will be removed from the booth to the dock and reloaded on designated carriers during move-out.

SARGON PRODUCTIONS is not responsible for loss, damage, either concealed or otherwise, of movement of freight if consigned directly to the facility prior to set-up day.

ALL SHIPMENTS SHOULD BE INSURED BY THE EXHIBITOR FOR THE TIME THE SHIPMENT IS OUT OF THEIR CARE AND CUSTODY. SARGON PRODUCTIONS and the Drake Hotel will not be responsible for damages to uncrated materials, materials improperly packed, concealed damage, count loss or theft of exhibitor materials after same have been delivered to the booth during installation nor before materials have been picked up and signed for by the outbound carrier at the close of the show.

All exhibits or exhibit material handled by SARGON PRODUCTIONS are insured at a value not to exceed twenty-five cents (\$.25) per pound and not to exceed a maximum of fifty dollars (\$50.00) per claim. CLAIMS MUST BE FILED BY THE EXHIBITOR BEFORE THE CLOSE OF THE SHOW.

SARGON PRODUCTIONS, as official drayage contractor, shall have control over all freight docks, doors, elevators, crate storage areas, alleys and marshaling area.

For liability reasons any freight moved over the dock will be under the direct control of SARGON.

REFRIGERATED

Shipments to arrive between July 23 -25, 2008

To: _____
Exhibiting Company

**c/o Drake Hotel - Kitchen
140 East Walton Place
Chicago, IL 60611
Tel# 312-932-4333**

Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel - Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

REFRIGERATED

REFRIGERATED

Shipments to arrive between July 23 -25, 2008

To: _____
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**c/o Drake Hotel - Kitchen
140 East Walton Place
Chicago, IL 60611
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Chicago, IL 60611
Tel# 312-932-4333**

Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel - Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

REFRIGERATED

FROZEN

Shipments to arrive between July 23 -25, 2008

To: _____

Exhibiting Company

c/o Drake Hotel - Kitchen
140 East Walton Place
Chicago, IL 60611
Tel# 312-932-4333

Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel - Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

FROZEN

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Name of Event: *Business Development Day*
Location: *The Drake Hotel - Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

FROZEN

NON-PERISHABLE

Shipments to arrive between July 14-25, 2008

To: _____
Exhibiting Company

c/o **Sargon Productions**
4 Lake Marian Rd.
Carpentersville IL, 60110
Tel: 847-426-4329

Deliveries only: 8 AM – 5 PM Monday – Friday

Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel-Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

DRY / NON PERISHABLE

NON-PERISHABLE

Shipments to arrive between July 14-25, 2008

To: _____
Exhibiting Company

c/o **Sargon Productions**
4 Lake Marian Rd.
Carpentersville IL, 60110
Tel: 847-426-4329

Deliveries only: 8 AM – 5 PM Monday – Friday

Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel-Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

DRY / NON PERISHABLE

NON-PERISHABLE

Shipments to arrive between July 14-25, 2008

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Name of Show: *Federated Group NRSS Show*
Name of Event: *Business Development Day*
Location: *The Drake Hotel-Grand Ballroom*

Booth Number: _____

Carrier: _____

Number: ____ of ____ pieces

DRY / NON PERISHABLE

NON-PERISHABLE

Shipments to arrive between July 14-25, 2008

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