



INVOICE AND PAYMENT FORM

Include this form with your order

Please invoice to:

Company _____

Contact Person _____

Address _____

State: _____ Postcode _____ Country _____

Tel. _____ Fax. _____

Email _____

ENTER TOTALS HERE:

- MANDATORY INSURANCE ATCE 2010 **€ 96,00**
- ELECTRICITY EQUIPMENT _____
- CLEANING SERVICE _____
- HOSTESS/STEWARD _____
- WATER SUPPLY _____
- TELECOMMUNICATION _____

GRAND TOTAL _____



INVOICE AND PAYMENT FORM

METHOD OF PAYMENT:

Credit card:

Visa Amexco Mastercard

Cardholders' name _____

Number: _____ Expir. Date _____

Signature of authorization of debit of credit card _____

Bank transfer

Bank name: BNL (BANCA NAZIONALE DEL LAVORO)

Bank Address: Piazza della Repubblica, 21/22 - 50100 Florence - Italy

Account holder name: Newtours S.p.A.

Account number: 000000033863

IBAN/Bank number: IT52 S 01005 02800 00000 0033 863

Swift code: BNLITRRFIX

Important: When making the payment, exhibitors need to always specify "ATCE 2010 exhibition" and the descriptive of the payment (i.e. "Cleaning, Electricity, etc.")

Date

Signature

Please send this form by July 19th, 2010, to:

Newtours S.p.A. – Via Augusto Righi 8 – 50019 Sesto Fiorentino, Florence, Italy

Phone +39 055 33611 / Fax +39 055 3033895 / Email: expoatce@newtours.it