



87th Annual Conference & State Board of Accounts School

**2024 ILMCT Annual Conference & State Board of Accounts School
EXHIBITOR AGREEMENT**

Please return this completed form with payment no later than **Thursday, May 23, 2024** to ILMCT, 125 W. Market Street, Suite 100, Indianapolis, IN 46204. Booths reserved after May 23 may not be listed in the conference program. The tradeshow will take place at the Century Center Convention Center in Convention Hall, Tuesday, June 25 and Wednesday, June 26, 2024. You will be notified of your booth confirmation via email. **BOOTH PREFERENCES ARE NOT GUARANTEED.**

Company/Organization Name (please state as you prefer to be listed in conference program)

Contact Name & Title

Billing Address

City

State

Zip Code

Telephone

Fax

Email

EXHIBIT HALL BOOTH

Includes 10'X10' booth space, pipe and drape, skirted 8' table, two chairs, wastebasket, booth identification sign, carpet, complimentary wireless access, and two exhibitor name badges with access to the Tuesday Welcome Reception and Wednesday continental breakfast and lunch in the Exhibit Hall.

DOOR PRIZES

Door prizes will be given away in the Exhibit Hall at approximately 12:45 p.m. Exhibitors may also give any individual door prizes at this time, if desired.

FEES

Exhibit Booth

Number of Booths _____ X \$600.00 = \$_____

Company Representatives (limited to two per booth)

Name & Title

Name & Title

BOOTH PREFERENCES – PREFERENCES ARE NOT GUARANTEED.

Booth # _____ (1st choice)

Booth # _____ (2nd choice)

Booth # _____ (3rd choice)

Booth # _____ (4th choice)

Booth # _____ (5th choice)

ADDITIONAL TICKETS

Welcome Event

Number Attending _____ X \$50.00 = \$_____

Name & Title

Name & Title

President's Reception & Annual Banquet Only

Number Attending _____ X 175.00 = \$_____

After May 25 _____ X 225.00 = \$_____

Name & Title

Name & Title

PAYMENT

Total Amount

Pay by Check - Mail to ILMCT, 125 W. Market Street, Suite 100, Indianapolis, Indiana 46204

Pay by Credit Card

Credit Card Number

Verification Code

Name on Credit Card

Expiration Date

Credit Card Billing Address

Authorized Signature