



# COASTAL INTERNATIONAL Labor Order Form

Entered Date: \_\_\_\_\_  
Edit Date: \_\_\_\_\_

**Exhibitor Information**

Exhibitor: \_\_\_\_\_  
 Show: \_\_\_\_\_  
 Dates: \_\_\_\_\_  
 City: \_\_\_\_\_  
 Facility: \_\_\_\_\_  
 Booth#: \_\_\_\_\_ Size: \_\_\_\_\_

**Client Info**

Order by: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_  
 Email: \_\_\_\_\_

**Booth Information**

Type: \_\_\_\_\_ Floor: \_\_\_\_\_  
 Crated: \_\_\_\_\_ Prints: \_\_\_\_\_  
 Carpet: \_\_\_\_\_ Hang sign: \_\_\_\_\_  
 Pad: \_\_\_\_\_ Carpt Elec: \_\_\_\_\_  
 Visquine: \_\_\_\_\_ Net Cable: \_\_\_\_\_  
 Forklift: \_\_\_\_\_ Genie: \_\_\_\_\_  
 Scaffold: \_\_\_\_\_ Bth Height: \_\_\_\_\_  
 Ladder Sizes: \_\_\_\_\_  
 Other: \_\_\_\_\_

**Freight**

Inbound: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Carrier: \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone: \_\_\_\_\_  
 Pieces: \_\_\_\_\_ Weight: \_\_\_\_\_  
 Outbound: \_\_\_\_\_  
 Bill: \_\_\_\_\_ Carrier: \_\_\_\_\_  
 Ship to: \_\_\_\_\_ Split: \_\_\_\_\_  
 \_\_\_\_\_

Display Hse: \_\_\_\_\_ Acct Exec: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 \_\_\_\_\_ Cell: \_\_\_\_\_

Labor Type	Day	Date	Time	# Workers	# Hours

**Supervision**

Installation Arrives: \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Co.: \_\_\_\_\_  
 Cell: \_\_\_\_\_  
 Dismantle  
 Name: \_\_\_\_\_  
 Co.: \_\_\_\_\_  
 Cell: \_\_\_\_\_

**Show Management** EAC Submitted? \_\_\_\_\_

Company: \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

**General Contractor**

Company: \_\_\_\_\_  
 Contact \_\_\_\_\_  
 Ph/Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Billing Info** Ph: \_\_\_\_\_

Company: \_\_\_\_\_  
 Contact \_\_\_\_\_  
 PO: \_\_\_\_\_ Email: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_