



**CONVENTIONS, EXPOSITIONS, INDUSTRIAL,  
SHOWS, MEETINGS AND TRADE SHOWS**  
*2018 Rate Schedule and Statement of Licensee's Operating Policy*

Account Number: \_\_\_\_\_ Premise Name: \_\_\_\_\_

| Number of Attendees | Fee Per Event |
|---------------------|---------------|
| Less than 1,500     | \$128.00      |
| 1,501 - 3,000       | \$448.00      |
| 3,001 - 5,000       | \$747.00      |
| 5,001 - 10,000      | \$1,387.00    |
| 10,001 - 20,000     | \$2,558.00    |
| 20,001 - 50,000     | \$5,118.00    |
| 50,001 - 100,000    | \$7,678.00    |
| More than 100,000   | \$10,132.00   |

|    | Name of Event | Event Date | # of Attendees | Rate |
|----|---------------|------------|----------------|------|
| 1. |               |            |                |      |
| 2. |               |            |                |      |
| 3. |               |            |                |      |
| 4. |               |            |                |      |
| 5. |               |            |                |      |
| 6. |               |            |                |      |
| 7. |               |            |                |      |
| 8. |               |            |                |      |
| 9. |               |            |                |      |

Total Annual Rate: \_\_\_\_\_

**ANNUAL LICENSE FEE FOR CALENDAR YEAR 2019 AND THEREAFTER**

The annual license fee for each contract year commencing 2019 shall be the license fee for the preceding calendar year, adjusted in accordance with the increase in Consumer Price Index, All Urban Consumers - (CPI-U) between the preceding October and the next preceding October.

|  |  |                               |  |                                |  |
|--|--|-------------------------------|--|--------------------------------|--|
| Contact Person: _____                                |  | (Please print Contact's Name) |  | (Please print Contact's Title) |  |
| Phone Number:  | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> | -                             | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> | -                              | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |
| Ext:   | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |                               | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |                                | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |
| Fax Number:  | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> | -                             | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> | -                              | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |
| Email:   | _____  |                               | Website:   | _____                          |  |
| I certify the above information is true and correct. |  |                               |  |                                |  |
| Dated:   | <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> | /                             | <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> | /                              | <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> |
| Signature:   | <div style="border: 1px solid black; height: 30px; width: 100%;"></div>          |                               |  |                                |  |