## **Electrical Order Form** Spring Home Show

February 24 & 25, 2024 SUFFOLK COUNTY COMMUNITY COLLEGE Sports & Exhibition Complex 1001 Crooked Hill Rd.• Brentwood, NY 11717 Complete this form and return to: Gordon L. Seaman, Inc. Alford Electric, Inc. 29 Old Dock Road Yaphank, NY 11980

PH: 631.567.8000 FAX: 631.567.8273 Email: maria@GordonLSeaman.com

Company Name	Booth #
Address	
Phone #	
Representative (print your name)	
Signature	

Qty	Booth Power Devices (See page 2)	*Advance Order Price (before 2/11/23)	Show Order Price	Total Price
	Single 120 volt receptacle 500 watts	\$119.00 + Tax (\$10.27 =\$129.26)	\$196.35 + Tax	
	Single 120 volt receptacle 2000 watts	\$134.00 + Tax (\$11.56 =\$145.56)	\$221.10 + Tax	
	4-Plug 120 volt receptacle 500 watts	\$164.00 + Tax (\$14.15=\$178.15)	\$270.60 + Tax	
	4-Plug 120 volt receptacle 2000 watts	\$185.00 + Tax (\$15.96=\$200.96)	\$305.25 + Tax	
	Dedicated 20 amp service	\$236.00 + Tax (\$20.36 = \$256.36)	\$389.40 + Tax	
	Special Requirements	Call for price	Priced Accordingly	
			Subtotal	
		(All orders are taxable)	Sales Tax 8.625 %	
			Total	

All orders must be accompanied by a check in full including sales tax or complete the credit card information sheet attached. Make checks payable to Alford Electric, Inc.

All items must be paid-in-full before electric service will be installed.

No refunds on unused or undelivered service reported after the show opens.

\*In order to receive the Advance Order Price, payment and form must be received by

February 9, 2024 (No Exceptions)

Any order received after, February 9, 2024 must pay the Show Order Price

## CREDIT CARD AUTHORIZATION FORM FAX OR E-MAIL COMPLETED FORM TO: 631.567.8273 OR maria@GordonLSeaman.com

COMPANY		
CARDHOLDER'S NAME		
CARDHOLDER'S ADDRESS		
CITY	STATE	ZIP CODE

Please charge my:					
UVISA UMASTERCARD AMERICAN EXPRESS					
Card #: Exp. Date: Sec. Code					
I hereby authorize a charge in the amount of \$+ 5% Processing fee as payment for electrical services from Alford Electric, Inc. / Gordon L. Seaman, Inc.					
I agree to pay the stated amount in full when billed, or in extended payments in accordance with the standard policy of the issuing credit card company.					
Signature of Cardholder:Date:					

FOR GLS/ALFORD USE ONLY						
Show	Booth #	Approval #	Processed			