



**IEEE AUTOTESTCON 2017  
September 11-14, 2017  
Renaissance Schaumburg, Schaumburg, IL**

**Sales Lead Capture System Order Form**

RATES ARE FOR THE ENTIRE SHOW & INCLUDE ONSITE USAGE TRAINING & SUPPORT!				
	Before August 12	After August 12	QTY	TOTAL
<b>Lead System (1 concurrent user)</b>	\$250.00	\$275.00		
<b>Additional User</b>	\$50.00	\$60.00		
<b>Customized Qualifying Question (Each)</b>	\$25.00	\$30.00		

**Standard Qualifying Questions**

- |                        |                    |
|------------------------|--------------------|
| 1) Have Sales Rep Call | 6) Recommends      |
| 2) Schedule a Demo     | 7) Provide Quote   |
| 3) Schedule Follow Up  | 8) Has Final Say   |
| 4) Email Catalog       | 9) Provide Samples |
| 5) Email Quote         | 10) Immediate Need |

The Conference Catalysts, LLC lead retrieval system provides the latest scanning technology, giving you the ability to easily scan, view and qualify attendee information, take notes and edit information quickly, on your own smart phone! There is no need to purchase or rent additional hardware. You simply tell us how many users you want to have access, what Qualifying Questions you want to include, and we will provide instructions for setting everything up on your phone.

All data collected is uploaded and stored in real-time on a secure server. We simply provide you with a web-link, username and password that will provide you access to download your leads whenever you want!

All orders are subject to Conference Catalysts standard terms and conditions. 100% cancellation fee will apply (no refunds) for orders canceled up to 3 business days before the show load in. Prices subject to availability.

NOTE THAT ALL LEAD RETRIEVAL ATTENDEE INFORMATION PROVIDED IS AT THE DISCRETION OF SHOW MANAGEMENT

## CUSTOMER ORDER INFORMATION

Company:		Booth Number:
Current address:		
City:	State:	ZIP Code:
Phone:	Fax:	
Ordered By:	Email:	
Onsite Contact:	Email:	
Onsite Cell:		
Alternate Contact:	Email:	

\*The onsite contact email will be used for the main system login unless otherwise indicated.  
 Please return by fax: 352 872 5545 or by email: ccovert@conferencecatalysts.com

### PAYMENT INFORMATION

Visa    Mastercard    Check# _____				
Cardholder:		Credit Card Billing Address:    Same as above		
Credit Card #:		Address:		
Exp Date:	Security Code:	City:	State:	ZIP Code:
Security code is the last 3 digits found on the back of Visa & MasterCard.		Cardholder Signature:		
<b>ALL LEAD RETRIEVAL ATTENDEE INFORMATION PROVIDED IS AT THE DISCRETION OF SHOW MANAGEMENT</b>				
<b>Show Name:</b> IEEE AUTOTESTCON 2017		<b>Show Venue:</b> Renaissance Schaumburg Convention Center		

Comments/Special Instructions: \_\_\_\_\_

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