*CAPTASA* Conference

PO BOX 6663

# Louisville, KY 40206

# (502) 548-7244

##### INVOICE

October 5, 2018

TO: CAPTASA Exhibitor

RE: *C A P T A S A* Conference

Clinical Applications of the Treatment of Addictions and Substance Abuse

Conference, January 25-26, 2019

Exhibit Fee: $600.00

#### ***­­­­­­------------------------------------------------------------------------------------------------------------***

#### Please return this portion with your payment no later than ***November 15, 2018***. *Thank you!*

#### 

#### Name of Organization: ***\_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#### Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electrical hook-up needed? YES \_\_\_\_\_ NO \_\_\_\_\_

Other special requests: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAMES OF ATTENDEE(S) AND CREDENTIALS:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **($600)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(add $200)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(add $200)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(add $200)**

Copy of Presentation Handouts ($35): \_\_\_\_\_ Yes \_\_\_\_\_ No How Many Paper:\_\_\_\_ How many: Thumb Drive \_\_\_\_\_ Total: $\_\_\_\_\_

(not available for purchase at the conference) Handouts will be available online at no charge.

Number attending Banquet: ($35 each) \_\_\_\_\_\_\_\_ ) – MUST BE MARKED

#### ***TOTAL DUE FOR EXHIBITOR FEE: $ \_\_\_\_\_\_\_\_***

*\*\*Please make check payable to CAPTASA Conference.* ***Thank You!***