



PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS

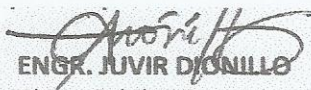
3rd Mindanao Regional Conference
May 22-24, 2014 * FB Hotel and Convention Center
Alunan Avenue, City of Koronadal, South Cotabato
Telefax: (083) 228 2446 * Email: psmeallahvalleychapter@yahoo.com
Host: Allah Valley Chapter


No. 03-008

Sir/Madam:

The 3rd Mindanao Regional Conference will be held on May 22-24, 2014 at the FB Hotel and Convention Center, City of Koronadal, South Cotabato with the theme: "PSME....Geared towards Global Recognition". Around 200 to 300 Mechanical Engineers are expected to attend the said conference.

Among the highlights of the conference are exhibit booths. In line with this, we invite your company to showcase your respective products and services to serve as an avenue of promoting your opportunities to gain a direct market.


ENGR. JUVIR DIONILLO
Chair, Exhibit Group


ENGR. REY JINON
Co-Chair, Exhibit Group

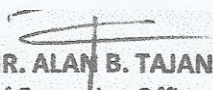

ENGR. ALAN B. TAJANLANGIT
Chief Executive Officer

EXHIBIT CONTRACT

No. _____

PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS

3rd PSME MINDANAO REGIONAL CONFERENCE

EXHIBIT RATE
P 15,000.00

Package:

- 1 set Convention Kit with meal ticket good for One (1) person
- 30 minutes Product Presentation

BOOTH SPECIFICATIONS

2 meters x 2 meters x 2.5 MH
Inclusive of One (1) unit Information Table and Two (2) chairs

PAYMENT ARRANGEMENTS:

- Please make payments payable to the Philippine Society of Mechanical Engineers, Allah Valley Chapter
- 50% deposit shall accompany the exhibit contract to be submitted on or before April 15, 2014.
- The balance shall be made payable not later than May 5, 2014.
- Cancellation of contract shall be made on or before April 15, 2014 which is subject to 50% fee.
- No refund of deposit for cancellation of contract after April 15, 2014

Date: _____

TO: **THE PHILIPPINE SOCIETY OF MECHANICAL ENGINEERS**

Please reserve ___ unit/s booths for our company for which we agree to pay the amount of _____

(P _____).

Note: Subject to final confirmation of availability by PSME.

EXHIBITOR'S INFORMATION

Name of Firm: _____

Address: _____

Contact Name & Nos:
Name: _____
Tel No: _____
Fax: _____

Main Product Lines _____

(Signature over printer name of authorized representative)