**TRICORD**

**The Foodservice Conference**
INTERNATIONAL FRESH PRODUCE ASSOCIATION

*IFPA - The Foodservice Conference*
*July 31 - August 1, 2025*
*Monterey Conference Center*
*Monterey, CA*

Discount Deadline: Wednesday, July 9, 2025

## Labor Form

| Company Name | Booth # |
|---|---|
|  |  |

**Straight Time -** $120.00/per man/per hour
8:00am - 4:30pm, Monday to Friday

**Overtime -** $180.00/per man/per hour
Before 8:00am & after 4:30pm weekdays and
all Saturday, Sunday and Holidays

## Service A - TriCord Supervised Labor

☐ **INSTALLATION**

We would like our display unpacked and installed  under TriCord supervision prior to our arrival at the exhibit site. We are forwarding blue prints, a photo or instructions and shipping information to you shortly and you will immediately contact our representative for instructions in the event of shortages in shipment or damage. We understand that all work will be done on straight time when possible. We understand a 25 % service charge will be added to our bill of labor for TriCord's supervision of labor. Supervision service charge **(25% of total installation and dismantling)**.

☐ **DISMANTLING**

We would like our display dismantled and packed under TriCord supervision. We will leave instructions for shipping, address and waybill at the Service Center before the end of the show. We understand the supervision service charge will apply. An additional surcharge will be applicable when displays are dismantled under TriCord supervision when no installation labor was provided by TriCord supervision. Supervision service charge **(25% of total installation and dismantling)**.

## Service B - Exhibitor Supervised Labor

☐ **INSTALLATION -** *Exhibitor must visit service desk to start labor*

We would like _____ man (men) available to unpack and install our display under the supervision of our

representative on (date) _____ at _____ (time) am/pm for approximately _____ hour(s).

☐ **DISMANTLING**

We would like _____ man (men) available to pack and dismantle our display under the supervision of

our representative on (date) _____ at _____ (time) am/pm for approximately _____ hour(s).

## Labor Estimate

| DATE & TIME | # OF MEN | # HOURS | HOURLY RATE | TOTAL |
|---|---|---|---|---|
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total Labor Estimate + *(25% if TriCord Supervised Labor)* | | | | |

**REMINDER:** *If you're ordering TriCord Supervised Labor, you must include booth building instructions with order form*
*\*ONE HOUR MINIMUM CALL ON LABOR ORDERS*

**ADDITIONAL NOTES:**

Need more help?  Please email us with any questions or concerns, orders@tricord.net or call (831) 883-8600