

**VENDOR SAMPLE REQUEST FORM**

<b>EVENT</b>	<b>BOOTH #</b>	<b>ONSITE CONTACT</b>
<b>DATE</b>		<b>CELL PHONE</b>
<b>BUSINESS NAME</b>		<b>ORDER COMPLETED BY</b>
<b>ADDRESS</b>		<b>PHONE</b>
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
		<b>EMAIL</b>

**SAMPLE INFORMATION**

Sample sizes are limited to 2 oz. of beverages and 2 oz. of food. Sampling is only permitted by an exhibitor if the exhibitor manufactures, distributes or produces the requested sampling item. Sampling is permitted only in the Exhibition Hall. Absolutely no sampling may take place in any other space at the MassMutual Center. The sampling of alcoholic beverages is not permitted

Description of Sample	
Distribution Method	
Distribution Sample Temperature	
How do you plan to maintain sample temperature?	

**SUBMIT THIS FORM**

VIA EMAIL TO [SMANZOOR@MASSCONVENTION.COM](mailto:SMANZOOR@MASSCONVENTION.COM) / Fax: 413.271.3211

OR

Spectra Food Services – MassMutual Center  
1277 Main Street, Springfield MA 01103

_____	_____	_____
<b>PRINT VENDOR NAME</b>	<b>VENDOR SIGNATURE</b>	<b>DATE SIGNED</b>
_____	_____	_____
<b>APPROVED BY</b>	<b>TITLE</b>	<b>DATE SIGNED</b>