

SIGNIFICANTLY INCREASE YOUR POST-SHOW SALES OPPORTUNITIES WITH FOLLOW-UP PROMOTIONS

**THE NAB
RADIO
SHOW**
September 26-28, 2007
Charlotte, NC



Order the post show attendee list and increase your sales potential with additional leads.

Post-show attendee list - \$400 \$_____

(Shipped immediately upon receipt of prepaid order and contingent on data availability and quality control)

Total \$_____

Shipping \$ **20** _____

Total with Shipping \$_____

Select a Format:

Mailing labels (please choose)

- Cheshire
 Pressure-sensitive (Peel & Stick)

Disk*

Email*

*Please indicate fixed field delimited.

Select from the following subsets:

Primary Job

- | | |
|-------------------------------------|-----------------------|
| 1. Owner/Chairman/President/CEO/COO | 7. Sales/Marketing |
| 2. Corporate Management | 8. On-Air Personality |
| 3. Station Management | 9. Consultant |
| 4. Programming | 10. Financial Analyst |
| 5. Production/Editor | 11. Other |
| 6. Engineering | |

Primary Business

- | | |
|---|---------------------------------------|
| 1. Radio | 7. Research & Development |
| 2. Audio Recording/Production | 8. Law Firm/Legal Organization |
| 3. Streaming Media | 9. Not for Profit/Government |
| Technology/Products/Services | Agency/Educational Institute/Military |
| 4. Advertising/Marketing/Public Relations | 10. Other |
| 5. Financial/Investment Services | |
| 6. Consulting Firm | |

Payment:

Orders cannot be processed unless received with a payment. Purchase orders are not accepted. Send check or credit card information with order form. Data Sales and Mailing Services orders are non-refundable after the order is processed.

- Check Payment: Check VISA
 MC AMEX DISC

Signature (REQUIRED) _____

Card # _____

Exp. Date ____/____/____

Note: Credit card orders may be faxed to 301.694.3549.

Make checks payable and mail to:

Experient
1888 North Market Street
Frederick, Maryland 21701
Please call Georgia Martin
your marketing representative at
866.297.5246 or email at
georgia.martin@experient-inc.com
fax 301.694.3549



Name _____ Booth _____

Company _____

Street/Address _____

City _____ State _____ Zip _____

Telephone (____) _____ Fax (____) _____

Email _____