



454 E. Carson Plaza Dr. Suite 204

310.512.6443 phone 310.366.6889 prayer line 310.366.5906 fax

www.coverthechildren.org

August 4, 2008

Dear Prospective Vendor:

It is our pleasure to invite you to our 1st Annual Christian Business Expo presented by Cover the Children Ministries, Inc. (CTCM) at the Carson Doubletree Hotel 2 Civic Plaza Drive Carson, CA 90745. The Business Expo is a catalyst to assist CTCM in helping families that are socially, economically, and spiritually disadvantaged to become self-sufficient, it is also to help assist in continued support for our free food and clothing distribution program and to provide blankets to the children who are in shelters, homeless, and in the hospitals. The need is great; in view of the parable quoted by Jesus in the book of Matthew 25:35;40 “*for I was hungry and you gave Me food; I was thirsty and you gave Me drink; I was a stranger and you took Me in; I was naked and you clothed Me; I was sick and you visited Me; I was in prison and you came to Me. V40 and the King will answer and say to them, assuredly, I say to you, inasmuch as you did it to one of the least of these My brethren, you did it to Me*”.

We are excited and expecting at least 3,000 participants at our 1st Annual Christian Business Expo. With high anticipation we invite your participation in what is sure to be a memorable experience. The exhibit booths will be located in a high traffic area to maximize visibility. You will be able to set up on Saturday, September 27, 2008 as early as 6:30 a.m. Booths will measure 8’ x 10’ and will include drapes, 6’ table, chairs, and access to power. (You must bring your own long extension cords). A business card listing in our Commemorative Journal and a ticket for two to the Evening of Elegance Dinner on Friday, September 26, 2008 is included in the cost; for an additional cost advertising space is also available on the website.

To secure your space, complete the enclosed vendor application agreement. Please return it with your 50% deposit of **\$150.00** or the full payment of **\$300.00** all payments must be paid in full by August 30, 2008. Please make all checks or money orders payable to **Cover the Children Ministries (CTCM)**. You can also mail your payment to CTCM at **454 E. Carson Plaza Dr. Suite 204**. All deposits are non-refundable.

Prime exhibit space (i.e., spaces near entrances or high traffic areas) is limited to the first 75 paid commitments with priority given to those who are able to make credit card payments through the Website: www.coverthechildren.org. Vendor applications are accepted through August 30, 2008. You will be notified by phone or via e-mail of your acceptance.

If you have any question or concerns; please contact Sis. Gail Stewart Program Coordinator by e-mail gstewart@coverthechildren.org or call (310) 512-6443.

Blessed to be a blessing,

Pastor Amanda Williams, MPA, CEO

Enclosure: Vendor Letter and Agreement



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1st Annual Christian Business Expo

Carson DoubleTree Hotel
 2 Civic Plaza Drive
 Carson, CA 90745
 September 26 – 27, 2008

VENDOR AGREEMENT

COMPANY DETAILS	Company/Organization Name:		Contact Name:																	
	Address:		City:	State: Zip Code:																
	Home Phone: ()		Work Phone: ()	EIN#: _____-_____-_____																
	Cell Phone: ()		E-Mail:	Web Address:																
	<p><i>Check your business type:</i></p> <table border="1"> <tr><td>Ministry</td><td><input type="checkbox"/></td></tr> <tr><td>Small Business</td><td><input type="checkbox"/></td></tr> <tr><td>Fashion/Beauty</td><td><input type="checkbox"/></td></tr> <tr><td>Financial Institution</td><td><input type="checkbox"/></td></tr> <tr><td>Book/Music Retailer</td><td><input type="checkbox"/></td></tr> <tr><td>Non-profit</td><td><input type="checkbox"/></td></tr> <tr><td>Art</td><td><input type="checkbox"/></td></tr> <tr><td>Other _____</td><td><input type="checkbox"/></td></tr> </table> <p>Company listing for use in convention printed promotional material, badges and on our Web site, if different from above. <input type="checkbox"/> Check here if same as above.</p> <p>Company/OrganizationName: _____ Address: _____ City/St/Zip: _____ Phone: _____ Fax _____ E-Mail: _____ Web Address _____</p>					Ministry	<input type="checkbox"/>	Small Business	<input type="checkbox"/>	Fashion/Beauty	<input type="checkbox"/>	Financial Institution	<input type="checkbox"/>	Book/Music Retailer	<input type="checkbox"/>	Non-profit	<input type="checkbox"/>	Art	<input type="checkbox"/>	Other _____
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Non-profit	<input type="checkbox"/>																			
Art	<input type="checkbox"/>																			
Other _____	<input type="checkbox"/>																			

PRODUCT DETAILS	What are your Products or Services? _____ Are you willing to offer a discount during our "Midnight Madness" sale on Saturday night of the Expo? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, how much? _____% _____ For an additional fee, you may enhance your exhibit listing on the CTCM Web site with preferred placement and the inclusion of your logo, Web site address and e-mail address. <input type="checkbox"/> Yes, please enhance my listing for an additional \$75. URL to use for the Web-site link: _____ E-mail address: _____ (E-mail a company logo with a size of at least 350 pixels square in JPEG format to aupcs1@sbcglobal.net)	EXHIBIT OPTIONS	Booth Fee \$300.00 <input type="checkbox"/> I am sharing the space with another company (s). (A separate form will be faxed to obtain shared booth details.) \$150 per each additional company _____ Number of other companies
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PAYMENT INFO	Payment Requirements Applications for space must be signed and accompanied with the required payment. Failure to comply with appropriate payment will delay the application process and space assignment. Payment Schedule <ul style="list-style-type: none"> • Time of Application: 50% of total booth cost due. • August 30, 2008: Full payment due. Applications received after September 1, must include full payment Amount Due: Deposit \$ _____ +Premium Web Listing \$ _____ + Shared Booth Fee \$ _____ = Amount Enclosed \$ _____ Check/Card# _____ Name on Card _____ Exp. Date _____ Verification Code (listed on back of card) _____	TERMS OF AGREEMENT	By submitting this application, you understand you are entering into an agreement to adhere to the policies that govern vendor practices. You understand space is available on a first come, first served basis and must be secured with a 50% deposit before August 20, 2008 and must be paid in full thereafter. Cancellations will be permitted up two weeks before the event with a 50% refund. Applicant: _____ Date: _____ Coordinator: _____ Date: _____ FOR OFFICE USE ONLY: Approved? Y/N
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