



Exhibitor Reference Form

THE GENERAL COUNCIL OF THE ASSEMBLIES OF GOD

1445 North Boonville Avenue . Springfield, Missouri 65802-1894 . www.ag.org



CONVENTION SERVICES GROUP

- Sharon L. Lee, *Director*
- Lori K. Lawley, *Housing Manager*
- Sheila R. Mixer, *Registration Coordinator*
- Trina A. Russell, *Events Coordinator*
- Paula A. Smallwood, *Exhibits Coordinator*

Exhibitor Name: _____
 Address: _____
 Address: _____
 Contact Name/position: _____
 Contact Phone number: _____ Fax number: _____
 Contact Email address: _____

The above named company has requested to be an exhibitor at the General Council of the Assemblies of God convention. Your business has been listed as a reference for the above named exhibitor.
 Please provide the information listed below and return this form to the exhibitor.

Name of reference: _____
 Address: _____
 Address: _____
 Phone number: _____ Fax number: _____
 Email address _____

Length of experience with this business/individual? _____

Please list the type of products or services you received from this business:

Would you do business again with them? _____ if no, please explain:

Do you have any other comments you think would be helpful to us?

Name and Title of person giving reference

Date