47th Annual Course in Electrodiagnostic Medicine:
Clinical and Electrical Evaluation of the Peripheral Nervous System
Wednesday-Friday, January 29-31, 2020

Don’t miss this Exhibit Opportunity - Register Today!

Dear Exhibitor:

On behalf of the Department of Rehabilitation Medicine at Thomas Jefferson University, we cordially invite you to exhibit at the 47th Annual Course in Electrodiagnostic Medicine to be held Wednesday-Friday, January 29-31, 2020 on the Center City campus of Thomas Jefferson University in Philadelphia, Pennsylvania.

This conference presents an opportunity for you to share your products directly with over 125 attendees from the tristate Philadelphia area, specializing in rehabilitation and physical medicine and neurology.

This annual conference is specifically designed for medical practitioners involved in the diagnosis, treatment and prognosis of complex patients with peripheral nervous system diseases and injuries. The goal of this year’s course is to improve the integration of both the clinical and electrical findings in generating a comprehensive diagnosis for individual patients. Participants will improve the following essential skills in: their understanding of basic concepts of membrane conduction, voluntary motor unit identification, identifying spontaneous waveforms and recruitment patterns; localizing sites of nerve pathology, differentiating axonal from demyelinating neuropathies; identifying anterior horn cell and neuromuscular junction diseases and myopathies.

Exhibit opportunities for this conference include:

- **Gold Level** - Three exhibit days & full page company advertisement in conference materials at $3,000
- **Silver Level** - Two exhibit days & half page company advertisement in conference materials at $2,000
- **Bronze Level** - One exhibit day for $1,000

For additional detail, please review the exhibitor information packet accompanying this letter.

We hope that you will exhibit at this exceptional course and networking event. Please contact me at 215-955-6993 or bao.tram@jefferson.edu if you have any questions. Thank you for your attention and consideration!

Sincerely,

Bao Tram
CME Planner
Office of Continuing Professional Development
Thomas Jefferson University

*Please note that Sidney Kimmel Medical College/Thomas Jefferson University is not listed as a covered recipient on the CMS/Sunshine Act list. Contact us with any questions regarding status.*
### Conference Dates

<table>
<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wednesday, January 29</td>
<td>7:30AM-8:00AM</td>
<td>Registration, Continental Breakfast &amp; Exhibits</td>
</tr>
<tr>
<td></td>
<td>9:30AM-10:00AM</td>
<td>Break &amp; Exhibits</td>
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<tr>
<td></td>
<td>12:00PM-1:00PM</td>
<td>Lunch (not provided) &amp; Exhibits</td>
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<tr>
<td></td>
<td>2:30PM-3:00PM</td>
<td>Break &amp; Exhibits</td>
</tr>
<tr>
<td>Thursday, January 30</td>
<td>7:30AM-8:00AM</td>
<td>Registration, Continental Breakfast &amp; Exhibits</td>
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<tr>
<td></td>
<td>10:00AM-10:30AM</td>
<td>Break &amp; Exhibits</td>
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<tr>
<td></td>
<td>11:30AM-12:30PM</td>
<td>Lunch (not provided) &amp; Exhibits</td>
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<tr>
<td></td>
<td>2:30PM-3:00PM</td>
<td>Break &amp; Exhibits</td>
</tr>
<tr>
<td>Friday, January 31</td>
<td>7:30AM-8:00AM</td>
<td>Registration, Continental Breakfast &amp; Exhibits</td>
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<td></td>
<td>10:00AM-10:30AM</td>
<td>Break &amp; Exhibits</td>
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<tr>
<td></td>
<td>12:00PM-1:00PM</td>
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</tr>
<tr>
<td></td>
<td>3:00PM-3:30PM</td>
<td>Break &amp; Exhibits</td>
</tr>
</tbody>
</table>

### Conference Location

Jefferson Alumni Hall  
1020 Locust Street  
Philadelphia, PA 19107

### Set-Up & Breakdown

All exhibits must be tabletop or portable in nature. Exhibit set-up can begin at 7:00AM and must be broken down by 4:00PM daily.

### Exhibit Recognition & Booth Size

#### Gold Level - Three Exhibit Days - $3,000
- Exhibit all three days, Wednesday-Friday
- One skirted 6 foot table for your exhibit display
- Up to two company representatives
- One black & white, full-page company advertisement  
  - Ad Specs: PDF format, letter size (8.5x11 inches), no bleed, with a border
- Company acknowledgement included on course signage and in slideshow
- Complimentary electrical services (if required)

#### Silver Level - Two Exhibit Days - $2,000
- Exhibit two days, Wednesday or Thursday or Friday
- One skirted 6 foot table for your exhibit display
- Up to two company representatives
- One black & white, half-page company advertisement  
  - Ad Specs: PDF format, letter size (8.5x5.5 inches), no bleed, with a border
- Company acknowledgement included on course signage and in slideshow
- Complimentary electrical services (if required)

#### Bronze Level - One Exhibit Day for $1,000
- Select one exhibit day, Wednesday, Thursday or Friday
- One skirted 6 foot table for your exhibit display
- Up to two company representatives
- Company acknowledgement included on course signage and in slideshow
- Complimentary electrical services (if required)
<table>
<thead>
<tr>
<th>ELECTRICAL NEEDS</th>
<th>Electrical services are included in the exhibit fee. Each company is responsible for communicating their electrical needs to Bao Tram via email to <a href="mailto:bao.tram@jefferson.edu">bao.tram@jefferson.edu</a>.</th>
</tr>
</thead>
</table>
| SHIPPING         | Please notify Bao Tram prior to shipping. Shipments will be accepted at the Jefferson Alumni Hall loading dock 2 days prior to conference, no earlier than Monday, January 27, 2020. Be sure to label them accordingly.  
Jefferson Alumni Hall  
1020 Locust Street, Philadelphia, PA 19107  
Attn: Bao Tram  
47th Annual Course in Electrodiagnostic Medicine  
January 29-31, 2020  
Package ___ of ___  
Jefferson does not accept any liability for equipment, goods, displays, or other materials which arrive unmarked or fail to arrive at the conference location. Each exhibiting company is responsible for insuring its property for loss or damage. Please note that all company representatives are solely responsible for coordinating return shipping at the conclusion of the conference with loading dock representatives. |
| EXHIBITOR RULES | • Exhibitor is NOT furnishing commercial support for this conference, Exhibitor is buying exhibit space.  
• All exhibits must be tabletop or portable in nature.  
• Exhibitor activities are restricted to the allocated space at the conference. Distribution of educational/promotional materials by exhibitors is limited to their booth space in the exhibit area. It is not permitted anywhere else in the hall, in conference meeting space, or at the entrances to the conference meeting space.  
• Exhibits are intended for informational purposes, products should not be sold on site.  
• Photography by exhibitors that includes pictures of the overall conference and/or its attendees is prohibited.  
• The purpose of the exhibit is to further the education of meeting attendees through product and service displays and demonstrations. Exhibitor personnel may observe, but must refrain from any participation or recording of any scientific sessions on that company’s behalf.  
• The conference is not responsible for the security of exhibitors’ materials. We suggest that exhibitors leave nothing of value (e.g., laptop computer, audio visual equipment, etc.) unattended at any time in the exhibit hall.  
Sunshine Act  
The Parties acknowledge and agree that Exhibiting Company may be subject to Section 6002 of the Affordable Care Act, which added Section 1128G to the Social Security Act, and its implementing regulations codified in 42 CFR 402 & 403 (collectively the “Sunshine Act”).  
Exhibiting companies are solely responsible for collecting any information about actions within their exhibit space that constitutes a payment or transfer of value to a Covered Recipient that is required to be reported under the Sunshine Act. |
| REGISTRATION | All exhibitors must complete the online registration by visiting: [http://jeffline.jefferson.edu/jeffcme/RehabMedCME/exhibitors.cfm](http://jeffline.jefferson.edu/jeffcme/RehabMedCME/exhibitors.cfm) |
| PAYMENT | *Payment is due by January 29, 2020.*  
**CREDIT CARD**  
Visa, MasterCard and American Express are accepted (see credit card form).  
**CHECK**  
Please make check payable to: Sidney Kimmel Medical College at Thomas Jefferson University  
Mail payment to: Office of CPD, Jefferson Alumni Hall, 1020 Locust Street, Suite M-5, Philadelphia, PA 19107. |
| CANCELLATION & REFUND POLICY | Requests for exhibitor fee refunds must be submitted in writing and received by the Office of CPD two weeks prior to the start date of the course. There will be no refunds after this period. Cancellations notified before the two-week period will incur a 10% administration fee. Exhibitors who fail to attend the conference are responsible for the entire fee. All refunds will be processed after the conference. The University reserves the right to cancel or postpone this course due to unforeseen circumstances. In the event of cancellation or postponement, the University will refund exhibit fees, but is not responsible for related costs or expenses to exhibitors, including cancellation fees assessed by hotels, airlines or travel agencies.  
*Submit refund requests to Bao Tram at bao.tram@jefferson.edu by January 15, 2020.* |
EXHIBITOR CREDIT CARD PAYMENT FORM

47th Annual Course in Electrodiagnostic Medicine
January 29-31, 2020
Jefferson Alumni Hall, 1020 Locust Street, Philadelphia, PA 19107

☐ Gold - $3,000  ☐ Silver - $2,000  ☐ Bronze - $1,000

Payment is due on or before January 29, 2020

Company Name: ______________________________________________________
Company Representative (to contact with questions): _____________________________
Phone Number: ________________________________
Email Address: ___________________________________________________________________

I hereby authorized use of my: ☐ Visa  ☐ Mastercard  ☐ American Express Amount $ _________
Account Number: Expiration Date:
Cardholder’s Name: Signature:
Credit Card Billing Address:
(include City, State and Zip)
Email Address:
A copy of the receipt will be sent upon processing
Fax
You may fax your application with Credit Card payment to 215-923-3212

E-Mail
Send completed form bao.tram@jefferson.edu

PLEASE COMPLETE ONLINE EXHIBITOR REGISTRATION AT:
http://jeffline.jefferson.edu/jeffcme/RehabMedCME/exhibitors.cfm
Form W-9
(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

THOMAS JEFFERSON UNIVERSITY

2 Business name/disregarded entity name, if different from above.

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

   □ Individual/sole proprietor or single-member LLC
   □ C Corporation
   □ S Corporation
   □ Partnership
   □ Trust/estate
   □ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership). □
   Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

   □ Other (see instructions)

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3).

   Exempt payee code (if any) 1

   Exemption from FATCA reporting code (if any) A

   (Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

1020 WALNUT STREET

6 City, state, and ZIP code

PHILADELPHIA, PA 19107

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I  Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Number To Give the Requester for guidelines on whose number to enter.

Social security number

or

Employer identification number

2 3 - 1 5 2 6 5 1

Part II  Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person

Mark Lelache, Asst. Controller

Date

1/2/2019

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.