

EVENT AUDIT



DATES OF EVENT:

Conference: March 22 – March 25, 2007
Exhibits: March 23 – March 25, 2007

LOCATION:

Jacob J. Javits Convention Center, New York, NY

EVENT PRODUCER/MANAGER:

Company Name: Reed Exhibitions
Address: 383 Main Avenue, Norwalk, CT 06851
Phone: (203) 840-4800
Website (Show): www.visionexpoeast.com

REGISTRATION COMPANY:

ARI, Inc.

YEAR EVENT ESTABLISHED:

1986

FREQUENCY:

Annual

DATES OF NEXT EVENT:

Conference: April 10 – 13, 2008
Exhibits: April 11 – 13, 2008
LOCATION: Jacob J. Javits Convention Center, New York, NY

1. STATEMENT OF MARKET SERVED

International Vision Expo East serves the eyecare and eyewear professionals and related fields.

Qualified attendees are optometrists, dispensing opticians, ophthalmologists, ophthalmic medical personnel, optometric residents and students, optometric technicians, practice and business managers, optical outlet managers, chain executives, frame buyers, vision assistants, optical laboratory managers and technicians, product buyers at chain headquarters, and others allied to the field.

2. STATEMENT OF VERIFICATION METHODOLOGY:

Advance registrants who received a badge in the mail had their badges scanned when they picked up their badge holder onsite. The registrant was then entered into the system as verified. In addition, scanning guns were used to scan attendees' badges as they entered the exhibit hall, special feature areas, and the conference sessions. Downloaded leads captured by exhibitors were also entered into the system as verified.

3. AUDITED ATTENDEE ANALYSIS

Year which Event was Held	Event Location	Conference Attendees	Exhibit Only Attendees	Media	Sub-Total: Attendees	Verified Exhibitors, Non-Exhibiting Sponsors and their Support Staff*	Total
2007	New York	3,016	12,230	128	15,374	6,726	22,100
2006	New York	2,966	12,185	129	15,280	6,323	21,603

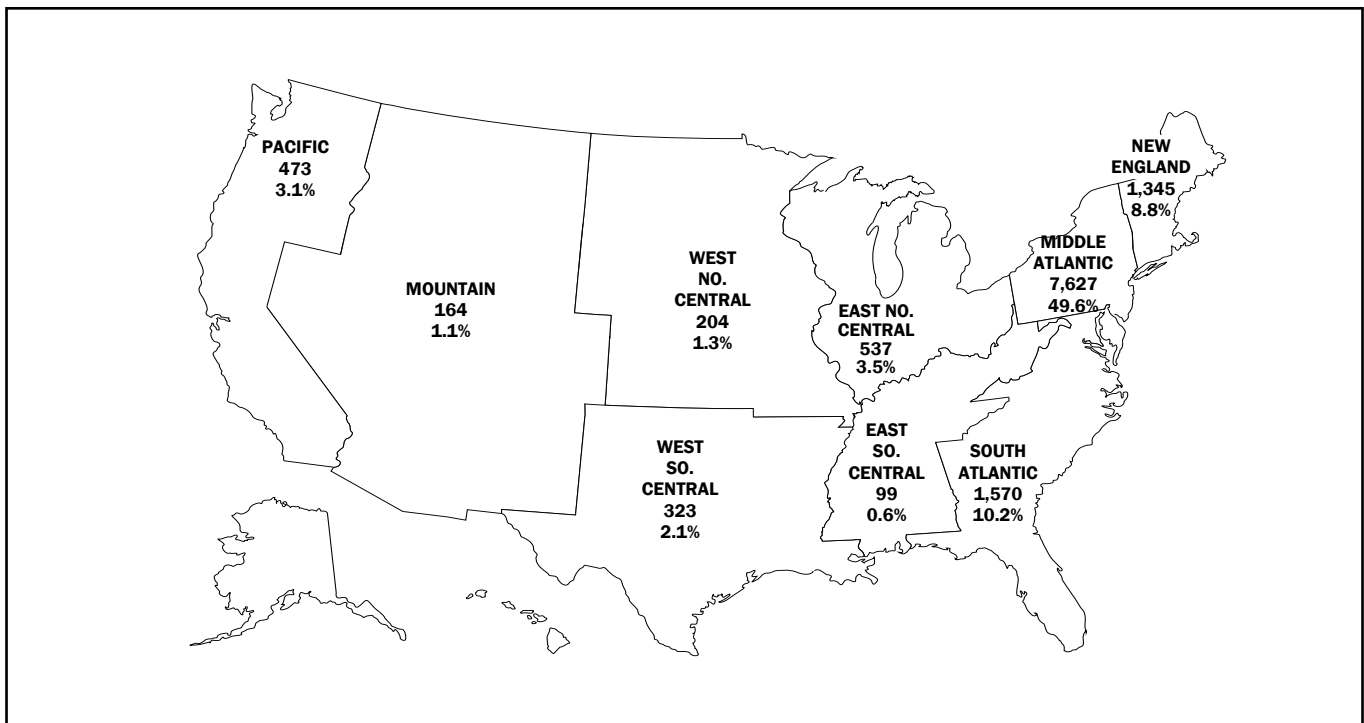
* Not audited. Verified and on-site counts taken from registration database provided by the registration company.

4. TYPE OF BUSINESS/PRACTICE			
TYPE OF BUSINESS/PRACTICE	TOTAL ATTENDEES	PERCENT OF TOTAL	PERCENT IDENTIFIED BY TYPE OF BUSINESS/PRACTICE
Chain/Superstore Corporate Management	475	3.1	3.4
Independent Ophthalmological Practice	1,371	8.9	9.8
Independent Opticianry Chain, 1-5 Locations	2,088	13.6	14.9
Independent Opticianry Chain, 6-10 Locations	102	0.7	0.7
Independent Opticianry Chain, 10+ Locations	108	0.7	0.8
Independent Optometric Practice	4,356	28.3	31.1
Laboratory	461	3.0	3.3
Manufacturer	1,164	7.6	8.3
Multidisciplinary Practice	465	3.0	3.3
Retail Optical Chain, 1-5 Locations	993	6.5	7.1
Retail Optical Chain, 6-10 Locations	134	0.9	0.9
Retail Optical Chain, 10+ Locations	407	2.6	2.9
Superstore Outlet	53	0.3	0.4
Wholesaler/Distributor	1,150	7.5	8.2
Student	685	4.4	4.9
Total Attendees Identified by Type of Business/Practice	14,012	91.1	100.0
Total Attendees Not Identified by Type of Business/Practice	1,362	8.9	-
TOTAL CONFERENCE AND EXHIBIT ONLY ATTENDEES	15,374	100.0	100.0

5. JOB TITLE/POSITION			
JOB TITLE/POSITION	TOTAL ATTENDEES	PERCENT OF TOTAL	PERCENT IDENTIFIED BY JOB TITLE/POSITION
Buyer	3,208	20.9	21.3
Laboratory Manager	335	2.2	2.2
Laboratory Technician	171	1.1	1.1
Manufacturer's Representative	689	4.5	4.6
Optician, Licensed or Certified	2,368	15.4	15.7
Optician, Non-Certified	495	3.2	3.3
Opticianry Assistant	464	3.0	3.1
Ophthalmologist	233	1.5	1.5
Ophthalmic Medical Personnel-COA	52	0.3	0.3
Ophthalmic Medical Personnel-COT	26	0.2	0.2
Ophthalmic Medical Personnel-COMT	27	0.2	0.2
Ophthalmological Assistant (Non-Certified)	71	0.5	0.5
Ophthalmological Resident	7	<0.1	<0.1
Optometrist	2,705	17.6	17.9
Optometric Technician	361	2.3	2.4
Optometric Resident	11	0.1	0.1
Optometric Student	488	3.2	3.2
Practice/Business Manager	1,207	7.9	8.0
Other	2,173	14.1	14.4
Total Attendees Identified by Job Title/Position	15,091	98.2	100.0
Total Attendees Not Identified by Job Title/Position	283	1.8	-
TOTAL CONFERENCE AND EXHIBIT ONLY ATTENDEES	15,374	100.0	100.0

6. JOB CLASSIFICATION			
JOB CLASSIFICATION	TOTAL ATTENDEES	PERCENT OF TOTAL	PERCENT IDENTIFIED BY JOB CLASSIFICATION
Owner	5,114	33.3	36.1
Manager	2,693	17.5	19.0
Employee	4,116	26.8	29.1
Buyer	1,358	8.8	9.6
Student	873	5.7	6.2
Total Attendees Identified by Job Classification	14,154	92.1	100.0
Total Attendees Not Identified by Job Classification	1,220	7.9	-
TOTAL CONFERENCE AND EXHIBIT ONLY ATTENDEES	15,374	100.0	100.0

7. AUDITED GEOGRAPHIC BREAKOUT OF ATTENDEES					
State	TOTAL	PERCENT	STATE	TOTAL	PERCENT
NEW ENGLAND	1,345	8.8	EAST SO. CENTRAL	99	0.6
Maine	47		Kentucky	18	
New Hampshire	80		Tennessee	45	
Vermont	34		Alabama	19	
Massachusetts	501		Mississippi	17	
Rhode Island	137		WEST SO. CENTRAL	323	2.1
Connecticut	546		Arkansas	31	
MIDDLE ATLANTIC	7,627	49.6	Louisiana	39	
New York	4,483		Oklahoma	5	
New Jersey	1,774		Texas	248	
Pennsylvania	1,370		MOUNTAIN	164	1.1
EAST NO. CENTRAL	537	3.5	Montana	3	
Ohio	176		Idaho	16	
Indiana	67		Wyoming	3	
Illinois	134		Colorado	61	
Michigan	86		New Mexico	6	
Wisconsin	74		Arizona	47	
WEST NO. CENTRAL	204	1.3	Utah	13	
Minnesota	84		Nevada	15	
Iowa	22		PACIFIC	473	3.1
Missouri	43		Alaska	2	
North Dakota	1		Washington	50	
South Dakota	6		Oregon	31	
Nebraska	9		California	384	
Kansas	39		Hawaii	6	
SOUTH ATLANTIC	1,570	10.2	UNITED STATES	12,342	80.3
Delaware	86		INTERNATIONAL	2,974	19.3
Maryland	393		Canada	990	
Washington, DC	40		Mexico	108	
Virginia	273		Other International	1,876	
West Virginia	15		Not Identified	58	0.4
North Carolina	102		Total Attendees	15,374	100.0
South Carolina	46				
Georgia	102				
Florida	513				



Exhibits Only and/or Continuing Education Registration INTERNATIONAL VISION EXPO

Conference: March 22 – March 25, 2007 Exhibits: March 23 – March 25, 2007

Jacob K. Javits Convention Center, New York, NY

www.visionexpoeast.com

1 Contact Information

First Name _____ Last Name _____
 Job Title _____
 Company _____
 Address 1 _____
 Address 2 _____
 City _____
 State/Prov. _____ Zip+4/Postal Code _____
 Business Telephone (do not include international dialing code) _____
 Fax (do not include international dialing code) _____
 Email _____
 FL OD License # _____ FL Optician License # _____ ARBO/COPE OE Tracker # _____ (OD's only)



2 Your Title/Position

Please check one. (This selection determines your badge category.)

- A Buyer
- B Laboratory Manager
- C Laboratory Technician
- D Manufacturer's Representative
- E Optician, Licensed or Certified
- F Optician, Non-Certified
- G Optician Assistant
- H Ophthalmologist
- J Ophthalmic Medical Personnel – COA
- K Ophthalmic Medical Personnel – COT
- M Ophthalmic Medical Personnel – COMT
- N Ophthalmological Assistant (non-certified)
- P Ophthalmological Resident
- Q Optometrist
- R Optometric Technician
- S Optometric Resident
- T Optometric Student
- U Practice/Business Manager
- V Other (please specify) _____

CS

5 Registration type

Exhibits Only: Before 2/23/07: \$50.00 After 2/23/07: \$75.00 Continuing Education (which includes Exhibits)

6 Registration Packages and A la Carte Selections

Standard Packages	before 2/23/07	after 2/23/07	A la Carte	before 2/23/07	after 2/23/07
Package A – 6 Hours	\$187 <input type="checkbox"/>	\$211 <input type="checkbox"/>	1 Hour	\$60 <input type="checkbox"/>	\$65 <input type="checkbox"/>
Package B – 9 Hours	\$234 <input type="checkbox"/>	\$261 <input type="checkbox"/>	2 Hours	\$85 <input type="checkbox"/>	\$95 <input type="checkbox"/>
Package C – 13 Hours	\$337 <input type="checkbox"/>	\$368 <input type="checkbox"/>	3 Hours	\$115 <input type="checkbox"/>	\$125 <input type="checkbox"/>
Package D – 18 Hours	\$439 <input type="checkbox"/>	\$480 <input type="checkbox"/>	4 Hours	\$145 <input type="checkbox"/>	\$155 <input type="checkbox"/>
Total Office Packages Office pricing is good throughout the show			5 Hours	\$175 <input type="checkbox"/>	\$185 <input type="checkbox"/>
Package E – 25 Hours	\$575 <input type="checkbox"/>		Optical Boot Camp Level 1** 3108	\$199 <input type="checkbox"/>	\$219 <input type="checkbox"/>
Package F – 35 Hours	\$770 <input type="checkbox"/>		Optical Boot Camp Level 2** 4108	\$139 <input type="checkbox"/>	\$159 <input type="checkbox"/>
Package G – 45 Hours	\$945 <input type="checkbox"/>		Contact Lens Boot Camp** 2207	\$169 <input type="checkbox"/>	\$189 <input type="checkbox"/>
Standard Packages do not include a la carte courses. Hours cannot be combined with another registrant.			NYSOA Update 2120	\$50 members / \$100 non-members	
Total Office Packages do not include a la carte courses. When registering please use same company name, address and zip code and a registration form for each person.			Workshops: 1111 – 3 Hours 1212 – 2 Hours 4216 – 3 Hours	\$60 per hour	
Other discounts do not apply. Additional hours can be added to any package for \$30 per hour.			FREE Courses* Fashion Panel 2110 NFOS College Bowl 2014 Women Ask for Directions 3200***	FREE	

3 Type of Business/Practice

- Please check one.
- A Chain/Superstore Corp. Management
 - B Independent Ophthalmological Practice
 - C Independent Optician Chain, 1-5 locations
 - D Independent Optician Chain, 6-10 locations
 - E Independent Optician Chain, 10+ locations
 - F Independent Optometric Practice
 - G Laboratory
 - H Manufacturer
 - J Multidisciplinary Practice
 - K Retail Optical Chain, 1-5 locations
 - M Retail Optical Chain, 6-10 locations
 - N Retail Optical Chain, 10+ locations
 - P Superstore Outlet
 - Q Wholesaler/Distributor

4 You are:

- Please check one. For demographic census purposes, please indicate if you are:
- A Owner
 - B Manager
 - C Employee
 - D Buyer
 - A Male
 - B Female

Cancellation Policy: www.visionexpoeast.com

7 List below the courses you wish to take: Be sure to list all courses you wish to take (including free courses)

Thursday	Friday	Saturday	Sunday
Course	Course	Course	Course
Fee	Fee	Fee	Fee

8 * \$40 Continuing Education Registration Processing Fee applies if ONLY registering for Workshops, and/or Free Courses. Registration required for free courses.
 ** Non-refundable ***No Processing Fee

Processing Fee: \$ _____
 Grand Total (6-8): \$ _____

9a Method of Payment

Check enclosed (payable to Reed Exhibitions)
 Amount \$ _____
 Charge to:
 AMEX MasterCard VISA

9b Cardholder's Name (please print) _____
 Account # _____
 Expiration Date _____
 Cardholder's Signature _____
 (I agree to pay the above total amount according to my card issuer agreement.)

Four Ways to Register

On-Line: www.visionexpoeast.com
By phone: Call 800-811-7151 for conference registrations only. Be sure to have your credit card handy.
By fax: Fax this registration form to 972-620-3099. Please include your phone number in case we have questions. Method of payment by credit card only.
By mail: Send this registration form to: International Vision Expo East, c/o ARI, 350 East Royal Lane, Suite 100, Irving, TX 75039-3105.
Important: The Preregistration cut-off date is 2/23/07. To receive your badge and course tickets in the mail, registrations must be postmarked by 2/23/07. Registrations received after 2/23/07 will be processed; however, badges and course tickets will need to be picked up on-site.
 We collect this data in order to provide you with information about International Vision Expo and other companies in your industry. If you prefer not to receive further information, please see our Privacy Statement at http://visionexpo.com or call our Privacy Administrator at 888-306-2344, or from outside the US at 203-840-5810.

REGISTER ONLINE: www.visionexpoeast.com Any Questions? Call 800-811-7151 or 203-840-5610

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Founded in 1963, Exhibit Surveys, Inc. is a full service research firm dedicated to providing market intelligence and measurement for the exhibition and events marketing industry. Having researched over 10,000 exhibits and over 4,000 events, Exhibit Surveys, Inc. has led the industry in developing the most comprehensive database of normative data for events and the most sophisticated diagnostic and measurement tools available.

STATEMENT OF CERTIFICATION – AUDIT CONDUCTED BY EXHIBIT SURVEYS, INC.

We have examined the attendee records of subject show/event for the date and location of the show/event as reported in this Exhibit Surveys, Inc. Event Audit Report. Our examination was made in accordance with generally accepted event auditing standards. This audit complies with standards set forth by the Exhibition and Event Industry Audit Commission (EEIAC), a not for profit commission organized for the purpose of managing and overseeing the exhibition industry's independent audit process. The audit process includes pre-event review of systems, post event confirmations of attendance, examination of accounting records, and any other auditing procedures considered necessary.

Based on such examinations, the statements set forth in this report present fairly and accurately the total attendance of this event in conformance with generally accepted event measurement principles.

Exhibit Surveys, Inc.
Red Bank, NJ