

# logistics



## GES Logistic Services

*GES is proud  
to offer our  
clients a one  
source solution  
for  
Customs and  
Transportation  
services*

### Your Choice of Reliable Service Options

- Time Critical Ground
- Expedited Ground
- 3-5 Day Deferred
- Common Carrier
- Van Line

### 24-Hour Tracking

Call toll free 1-877-437-4247 for immediate information on the status of your shipment

### On-Site Representation

GES Logistics representatives will be on site from the beginning of move-in and throughout the event until the last shipment leaves the show floor

### Competitive Pricing

You will benefit from priority delivery at competitive prices thanks to special arrangements we have with select carriers

### Simplified Budgeting

Our transportation management system gives you the information you need to budget more effectively

### Simplified Ordering

For your convenience choose one of the ordering options available:

- Online: [www.gesexpo.ca](http://www.gesexpo.ca)
- Phone: 905-283-0500 or 1-877-437-4247
- Fax: 905-283-0501

**Ship everywhere with GES Logistics Services.**

## **It's (almost) show time! Are you ready?**

GES offers many products and services to help you achieve the results you are looking for. Have you considered...

### **GES Logistics Services** *Local, Regional, International*

-  **Transportation**
-  **Tracking & Tracing**
-  **Warehousing**
-  **Exhibit Management**

**Let GES Logistics handle the details.** We smoothly navigate the many challenges of event management from shipping to tracking to warehousing and more.

Our **GES** Logistics team offers you  
**one-stop shopping for all your tradeshow and event needs.**

**Transportation management you can rely on.**  
With **GES** Logistics, you have a variety of shipping options:

- Common Carrier
- LTL trucking to handle national, regional and local shipping
- Full truck load for economy
- Air, 3 - 5 day service.

**Want to find out more?**

**Call toll free at 1-877-437-4247 or complete information below and fax to (905) 283-0501, and let GES take care of your logistics needs from start to finish.**

Company Name:	Phone:
Contact:	Fax:



5675 McLaughlin Road, Mississauga, Ontario, L5R 3K5 Tel: 905-283-0500 Fax: 905-283-0501 Toll Free: 1-877-437-4247 www.gesexpo.ca

## NORTH BUILDING ADVANCE WAREHOUSE ORDER FORM

**Warehouse Location: 6130 Netherhart Rd., Mississauga, Ontario, Canada L5T 1B7**

### BILLING INFORMATION

Company Name: _____	Expected Date of Arrival to Warehouse: _____
Address: _____	Crated or Loose Items: <input type="checkbox"/> YES <input type="checkbox"/> NO
City: _____ Prov/State: _____ Postal Code: _____	Customs Paperwork Attached: <input type="checkbox"/> YES <input type="checkbox"/> NO
Contact: _____	If yes, Customs Broker: _____
Phone: _____	Contact: _____
Fax: _____ Email: _____	Phone: _____

I will be shipping to: ☐ ADVANCED WAREHOUSE ☐ SHOW SITE

### DESTINATION

Show Name: _____ PDAC 2017	Booth # : _____
Facility: _____ Metro Toronto Convention Centre - North Building, Hall C	
Address: _____ 255 Front Street West	Delivery Date: _____ Delivery Time: _____
City: _____ Toronto Prov/State: _____ Ontario Postal Code: _____ M5V 2W6	
Company Name: _____	
Contact: _____	Phone: _____

### ITEMS TO BE SHIPPED

SERVICE WILL BE CHARGED ON **ACTUAL WEIGHT & DIMENSIONS**

TOTAL NUMBER OF PIECES:	DIMENSIONS IN INCHES	ESTIMATED WEIGHT
CARTONS (CARDBOARD)	H _____ x W _____ x L _____	
CASES/TRUNKS (FIBRE) COLOUR: _____	H _____ x W _____ x L _____	
CRATES (WOODEN)	H _____ x W _____ x L _____	
SKIDS/PALLETS	H _____ x W _____ x L _____	
CARPET/COLOUR: _____	H _____ x W _____ x L _____	
OTHER LIST: _____	H _____ x W _____ x L _____	
TOTAL	TOTAL WEIGHT	

**ADVANCE SHIPMENTS TO WAREHOUSE: \$49.00 PER 100LBS. min. 300lbs**

**Advance Warehouse services do not include Material Handling Services and charges.**

**ADVANCE WAREHOUSE SERVICES INCLUDES DELIVERY TO SHOW SITE ONLY**

**YOUR CARRIER MUST PICK UP YOUR MATERIALS DIRECTLY FROM SHOW SITE AT CONCLUSION**

### PAYMENT OPTIONS

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
CREDIT CARD NUMBER: _____	EXPIRY DATE: _____	
CARDHOLDER NAME: _____	CARDHOLDER SIGNATURE: _____	

### TERMS & CONDITIONS

GES assumes no responsibility for shipments left in booth by exhibitor. All materials are subject to final count and correction at time of actual removal from booth. Shipper hereby designates GES as its agent for tendering shipments to carrier. GES reserves the right to reroute any outgoing shipment via an alternate carrier in the event the requested carrier fails to pick up the shipment by established carrier check-in deadline. GES assumes no responsibility for misdirected shipments as a result of old shipping labels which remain on containers. It is the shipper's responsibility to state the national motor freight classification commodity description, otherwise shipment shall be described as exhibition materials.

1) GES shall not be responsible for damage to uncrated materials, materials improperly packed, or concealed damage. 2) GES shall not be responsible for loss, theft, or disappearance of exhibitors material after same has been delivered to exhibitor's booth. 3) GES shall not be responsible for loss, theft, or disappearance of materials before they are picked up from exhibitor's booth for reloading after the show. Bill of Lading covering outgoing shipments, which are furnished by GES to exhibitors, will be checked at time of actual pick-up from booth and corrections made where discrepancies occur. 4) GES shall not be responsible for any loss, damage, or delay due to fire, acts of God, strikes, lockouts or work stoppages of any kind, or to any causes beyond its control. 5) GES's liability shall be limited to the physical loss or damage to the specific article which is lost or damaged, and in any event GES's maximum liability shall be limited to \$0.30 per pound per article with a maximum liability of \$50.00 per item, or \$1,000.00 per shipment, whichever is less. 6) GES shall not be liable to any extent whatsoever for any actual, potential, or assumed losses of profits or revenues, or for any collateral costs, which may result from any loss or damage to an exhibitor's materials which may make it impossible or impractical to exhibit same. 7) The consignment or delivery of a shipment to GES by an exhibitor, or by any shipper to or on behalf of the exhibitor, shall be construed as an acceptance by such exhibitor (and/or other shipper) of the terms and conditions set forth.

**By signing this order form, shipper agrees to be bound by all its terms and conditions.**

X \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_



5675 McLaughlin Road, Mississauga, Ontario, L5R 3K5 Tel: 905-283-0500 Fax: 905-283-0501 Toll Free: 1-877-437-4247 www.gesexpo.ca

## SOUTH BUILDING ADVANCE WAREHOUSE ORDER FORM

**Warehouse Location: 6130 Netherhart Rd., Mississauga, Ontario, Canada L5T 1B7**

### BILLING INFORMATION

Company Name: _____	Expected Date of Arrival to Warehouse: _____
Address: _____	Crated or Loose Items: <input type="checkbox"/> YES <input type="checkbox"/> NO
City: _____ Prov/State: _____ Postal Code: _____	Customs Paperwork Attached: <input type="checkbox"/> YES <input type="checkbox"/> NO
Contact: _____	If yes, Customs Broker: _____
Phone: _____	Contact: _____
Fax: _____ Email: _____	Phone: _____

I will be shipping to: ☐ ADVANCED WAREHOUSE ☐ SHOW SITE

### DESTINATION

Show Name: _____ PDAC 2017	Booth # : _____
Facility: _____ Metro Toronto Convention Centre - <b>South Building</b>	
Address: _____ 222 Bremner Blvd.	Delivery Date: _____ Delivery Time: _____
City: _____ Toronto _____ Prov/State: _____ Ontario _____ Postal Code: _____ M5V 3L9	
Company Name: _____	
Contact: _____	Phone: _____

### ITEMS TO BE SHIPPED

SERVICE WILL BE CHARGED ON **ACTUAL WEIGHT & DIMENSIONS**

TOTAL NUMBER OF PIECES:	DIMENSIONS IN INCHES	ESTIMATED WEIGHT
CARTONS (CARDBOARD)	H _____ x W _____ x L _____	
CASES/TRUNKS (FIBRE) COLOUR: _____	H _____ x W _____ x L _____	
CRATES (WOODEN)	H _____ x W _____ x L _____	
SKIDS/PALLETS	H _____ x W _____ x L _____	
CARPET/COLOUR: _____	H _____ x W _____ x L _____	
OTHER LIST: _____	H _____ x W _____ x L _____	
<b>TOTAL</b>	<b>TOTAL WEIGHT</b>	

**ADVANCE SHIPMENTS TO WAREHOUSE: \$49.00 PER 100LBS. min. 300lbs**

**Advance Warehouse services do not include Material Handling Services and charges.**

**ADVANCE WAREHOUSE SERVICES INCLUDES DELIVERY TO SHOW SITE ONLY**

**YOUR CARRIER MUST PICK UP YOUR MATERIALS DIRECTLY FROM SHOW SITE AT CONCLUSION**

### PAYMENT OPTIONS

<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
CREDIT CARD NUMBER: _____	EXPIRY DATE: _____	
CARDHOLDER NAME: _____	CARDHOLDER SIGNATURE: _____	

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**By signing this order form, shipper agrees to be bound by all its terms and conditions.**

X \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_

# ADVANCE WAREHOUSE SHIPPING LABEL

**PDAC 2017**

**EXHIBIT SHIPMENT FOR ADVANCE WAREHOUSE**

**SHIPPER:** \_\_\_\_\_  
(Name of Company where shipment originates.)

**TO:** \_\_\_\_\_  
(Name of your exhibiting Company at the show.)

**BOOTH NUMBER:** \_\_\_\_\_  
(Your booth number at the show.)

**C/O:**   **GES/ PDAC 2017**  
          **6130 Netherhart Rd.**  
          **Mississauga, Ontario, Canada**  
          **L5T 1B7**

**CARRIER:** \_\_\_\_\_  
(Name of your Transportation Company)

**NUMBER**  **OF**  **PIECES**

**ADVANCE WAREHOUSE SHIPMENTS SHOULD ARRIVE BETWEEN:**  
**Monday February 6 - Friday February 24, 2017 9:00 AM - 4:00 PM**

# DIRECT TO SHOW SITE SHIPPING LABEL

**PDAC 2017**

**EXHIBIT SHIPMENT FOR DIRECT TO SHOWSITE**

**SHIPPER:** \_\_\_\_\_  
(Name of Company where shipment originates.)

**TO:** \_\_\_\_\_  
(Name of your exhibiting Company at the show.)

**BOOTH NUMBER:** \_\_\_\_\_  
(Your booth number at the show.)

**C/O: GES/ PDAC 2017**  
**Metro Toronto Convention Centre**  
**North Building, Hall C**  
**255 Front Street West**  
**Toronto, Ontario, Canada**  
**M5V 2W6**

**CARRIER:** \_\_\_\_\_  
(Name of your Transportation Company)

**NUMBER**  **OF**  **PIECES**

**DIRECT TO SHOW SITE SHIPMENTS TO ARRIVE ON:**

**Friday March 3, 2017 or Saturday March 4, 2017**

# DIRECT TO SHOW SITE SHIPPING LABEL

**PDAC 2017**

**EXHIBIT SHIPMENT FOR DIRECT TO SHOWSITE**

**SHIPPER:** \_\_\_\_\_  
(Name of Company where shipment originates.)

**TO:** \_\_\_\_\_  
(Name of your exhibiting Company at the show.)

**BOOTH NUMBER:** \_\_\_\_\_  
(Your booth number at the show.)

**C/O:** GES/ PDAC 2017  
Metro Toronto Convention Centre  
**South Building**  
222 Bremner Boulevard  
Toronto, Ontario, Canada  
M5V 3L9

**CARRIER:** \_\_\_\_\_  
(Name of your Transportation Company)

**NUMBER**  **OF**  **PIECES**

**DIRECT TO SHOW SITE SHIPMENTS TO ARRIVE ON:**

**Friday March 3, 2017 or Saturday March 4, 2017**

**PICK UP INFORMATION**

COMPANY NAME: _____	PICK UP DATE: _____	PICK UP TIME: _____
ADDRESS: _____	BUSINESS HOURS: _____	LOADING DOCK: <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY: _____ PROV/STATE: _____ CODE: _____	CUSTOMS PAPERWORK ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
CONTACT: _____	IF YES, CUSTOMS BROKER: _____	
PHONE: _____	CONTACT: _____	
FAX: _____ EMAIL: _____	PHONE: _____	

I will be shipping to: ☐ ADVANCED WAREHOUSE ☐ SHOW SITE

**DESTINATION**

COMPANY NAME: _____	BOOTH #: _____
ON-SITE CONTACT: _____	
SHOW NAME: _____ PDAC 2017	DELIVERY DATE: _____ DELIVERY TIME: _____
FACILITY: _____ Metro Toronto Convention Centre - <b>North Building, Hall C</b>	
ADDRESS: _____ 255 Front Street West	
CITY: _____ Toronto	PROV/STATE: _____ Ontario
POSTAL CODE: _____ M5V 2W6	

**SERVICE REQUIRED**
☐ ONE WAY ☐ ROUND TRIP  
☐ TIME CRITICAL ☐ 3-5 DAY ☐ GROUND

**ITEMS TO BE SHIPPED**

SERVICE WILL BE CHARGED ON **ACTUAL** WEIGHT & DIMENSIONS

TOTAL NUMBER OF PIECES:	DIMENSIONS IN INCHES:	ESTIMATED WEIGHT:
_____ CARTONS (CARDBOARD)	H _____ x W _____ x L _____	
_____ CASES/TRUNKS (FIBRE) COLOUR: _____	H _____ x W _____ x L _____	
_____ CRATES (WOODEN)	H _____ x W _____ x L _____	
_____ SKIDS/PALLETS	H _____ x W _____ x L _____	
_____ CARPET/COLOUR: _____	H _____ x W _____ x L _____	
_____ OTHER LIST: _____	H _____ x W _____ x L _____	
_____ TOTAL	TOTAL WEIGHT: _____	

**BILLING AND PAYMENT INFORMATION**

COMPANY NAME: _____	ADDRESS: _____	CITY: _____
PROV/STATE: _____	CODE: _____	EMAIL: _____
CREDIT CARD NUMBER: _____	EXPIRY DATE: _____	
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
CARDHOLDER NAME: _____	CARDHOLDER SIGNATURE: _____	

**TERMS & CONDITIONS**

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By signing this order form, shipper agrees to be bound by all its terms and conditions.

X \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name: \_\_\_\_\_



**PICK UP INFORMATION**

COMPANY NAME: _____	PICK UP DATE: _____	PICK UP TIME: _____
ADDRESS: _____	BUSINESS HOURS: _____	LOADING DOCK: <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY: _____ PROV/STATE: _____ CODE: _____	CUSTOMS PAPERWORK ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
CONTACT: _____	IF YES, CUSTOMS BROKER: _____	
PHONE: _____	CONTACT: _____	
FAX: _____ EMAIL: _____	PHONE: _____	

I will be shipping to: ☐ ADVANCED WAREHOUSE ☐ SHOW SITE

**DESTINATION**

COMPANY NAME: _____	BOOTH #: _____
ON-SITE CONTACT: _____	
SHOW NAME: _____ PDAC 2017	DELIVERY DATE: _____ DELIVERY TIME: _____
FACILITY: <u>Metro Toronto Convention Centre - South Building</u>	
ADDRESS: <u>222 Bremner Blvd.</u>	
CITY: <u>Toronto</u> PROV/STATE: <u>Ontario</u> POSTAL CODE: <u>M5V 3L9</u>	

**SERVICE REQUIRED**

☐ ONE WAY ☐ ROUND TRIP  
☐ TIME CRITICAL ☐ 3-5 DAY ☐ GROUND

**ITEMS TO BE SHIPPED**

SERVICE WILL BE CHARGED ON **ACTUAL** WEIGHT & DIMENSIONS

TOTAL NUMBER OF PIECES:	DIMENSIONS IN INCHES:	ESTIMATED WEIGHT:
CARTONS (CARDBOARD)	H _____ x W _____ x L _____	
CASES/TRUNKS (FIBRE) COLOUR: _____	H _____ x W _____ x L _____	
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SKIDS/PALLETS	H _____ x W _____ x L _____	
CARPET/COLOUR: _____	H _____ x W _____ x L _____	
OTHER LIST: _____	H _____ x W _____ x L _____	
<b>TOTAL</b>	<b>TOTAL WEIGHT:</b>	

**BILLING AND PAYMENT INFORMATION**

COMPANY NAME: _____	ADDRESS: _____	CITY: _____
PROV/STATE: _____ CODE: _____	EMAIL: _____	TEL: _____
CREDIT CARD NUMBER: _____	EXPIRY DATE: _____	
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
CARDHOLDER NAME: _____	CARDHOLDER SIGNATURE: _____	

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**By signing this order form, shipper agrees to be bound by all its terms and conditions.**

X \_\_\_\_\_ Date: \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_