



**Vision Canada 2017
Hyatt Regency Hotel
November 4 - 5, 2017**

GES is pleased to have been selected the official service partner by the Show Organizer to design and produce your show. Our goal is to ensure your show participation is a success.

GES is involved in many areas relative to the show and if at any time during the planning process you are unsure where to turn, just ask us, we are at your service.

Please ensure that you review this section carefully as it contains information on **Advance Pricing dates** that will save you money and order forms for our products and services.

For your convenience, we will be offering the following services:

- **Expresso Online Ordering**
- **Show Information**
- **Furnishings / Specialty Furnishings**
- **Carpet & Underpadding**
- **Booth Cleaning**
- **GEM Exhibits & Accessories**
- **Graphics**
- **Plants**
- **Electrical**
- **Installation & Dismantling Labour**
- **In-Booth Forklift**
- **Material Handling**
- **GES Logistics / Shipping**
- **GES Customs**

Take advantage of our **Advanced Pricing**, by ordering on or before the **Advance Date** of October 20, 2017 as indicated on each form. **GES** accepts Visa, MasterCard, American Express, Cheques and Cash as methods of payment for our services. All exhibitors are responsible for payment of G.S.T. when exhibiting in Alberta.

If you need assistance or additional information, please contact our **Exhibitor Services Department at 403.243.2212**
exhibitorserviceswest@ges.com



Show Information

Vision Canada 2017
Hyatt Regency Calgary
November 4-5, 2017

Advance Warehouse Shipping Address

GES/(Vision Canada 2017)

(Company Name & Booth #)

#25, 5805 - 76th Avenue SE

Calgary, Alberta

T2C 5L8

(delivery & loading dock at rear of building)

* See shipping label in the exhibitor manual. Note receiving dates below.

Official Services Contractor

GES Canada

Phone

(403) 243-2212

#25, 5805 – 76th Ave SE

Fax

(403) 243-3868

Calgary, AB, Canada

Web Site

www.ges.com/ca

T2C 5L8

E-Mail

exhibitorserviceswest@ges.com

Show Information

Booth Size

8' x 10'

Backwall Drape (Height & Colour)

8'

Sidewall Drape (Height & Colour)

3'

Booth Package Includes:

1 - 6' Skirted Table

(please include all items provided by Show Management, even those not provided by GES.)

2 Folding Chairs

Important Dates - Prior to Show

Advance Price Deadline Date

Friday, October 20, 2017

Advance Shipments may begin arriving at the Warehouse

Wednesday, October 4, 2017

Last day for Advance Shipments to arrive at the Warehouse

Wednesday, November 1, 2017

Important Dates - At the Show

Exhibitor Move-In

Saturday, November 4, 2017

9:00 am - 1:00 pm

Show Hours

Saturday, November 4, 2017

5:00 pm - 8:00 pm

Sunday, November 5, 2017

11:00 am - 3:00 pm

Exhibitor Move-Out

Sunday, November 5, 2017

3:00 pm - 5:00 pm

Factoring Green into Exhibition



We integrate sustainable business practices, both internally and with preferred vendors in the exhibition industry.

With the future in mind, we are dedicated to providing green product options and services to all our show organizers and exhibitors. As the need to conserve resources grows, we will continue to explore ways to deliver sustainable solutions.

Our green exhibition products:

- 100% recyclable graphics, use of bioboard (60% recycled content) and biobanner (an oxo-biodegradable alternative to vinyl)
- 100% recyclable carpet and carpet padding made with 98% pre- and post-consumer content
- Using EspressoSM, our online ordering system, for most shows reduces the use of paper exhibitor manuals

Our green operational efforts:

- Recycling carpet and padding
- Utilizing energy efficient lighting
- Recycling paper and ink cartridges from printers
- Purchasing recycled paper and signage products
- Recycling steel and aluminum exhibit structures



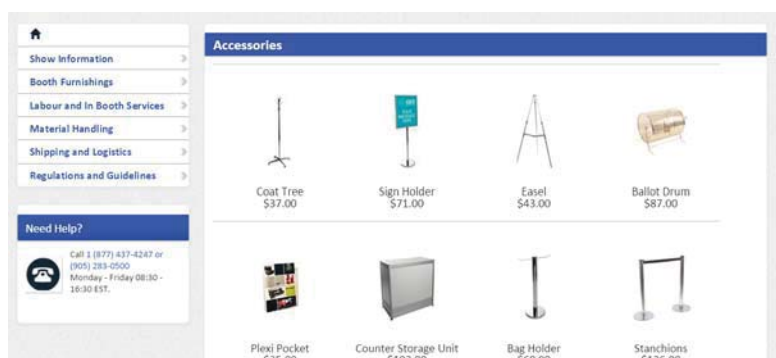
Please consider the environment before printing this page.



Accelerate your experience using the Expresso planning, ordering and management tool.

With just a few clicks, exhibitors can order GES products and services through Expresso including:

- Booth furnishings
- Carpet and Flooring
- Material handling
- Booth labour
- Signs and Graphics (custom)
- And much more



Experience a difference with Expresso.

- Each show has their own custom website
- Print shipping labels
- Download the show schedule and forms
- View order history
- View important show and event information
- Keeps you on-time and on-budget





CREDIT CARD AUTHORIZATION

#25, 5805 76th Ave SE, Calgary, Alberta, T2C 5L8 Tel: 403.243.2212 Fax: 403.243.3868 Toll Free: 1.800.636.8235
exhibitorserviceswest@ges.com www.ges.com/ca

SHOW: Vision Canada 2017

November 4 - 5, 2017

EXHIBITOR INFORMATION

BOOTH #: _____

COMPANY _____

STREET _____

CITY _____ PROV/STATE _____ CODE _____

E-MAIL _____

PHONE _____ FAX _____

CONTACT NAME _____

IMPORTANT - READ CAREFULLY

Please fill out The Credit Card Authorization below if:

- You or your company are forwarding payment to GES in the form of a cheque.
- There is any possibility you or your representative will be ordering any service on-site.
- You are ordering Material Handling, Installation and Dismantle Labour or In-Booth Forklift Services.

PLEASE COMPLETE THE FOLLOWING

☐ MASTERCARD ☐ VISA ☐ AMERICAN EXPRESS
☐ CORPORATE ☐ PERSONAL

EXPIRY DATE:

CARD #

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CARDHOLDER'S NAME (PRINT): _____

CARDHOLDER'S SIGNATURE: _____

Cardholder's Billing Address: _____

City: _____ Prov/State: _____ Code/Zip: _____

Tel: _____ Fax: _____

This authorization allows GES to charge any fees outstanding after show closing to this credit card
(including funds owed due to a cheque returned NSF)

CHEQUES WILL NOT BE ACCEPTED WITHOUT THIS CREDIT CARD AUTHORIZATION

**IF THIS AUTHORIZATION IS NOT COMPLETED, ALL ON-SITE ORDERS
ARE EXPECTED TO BE PAID IN FULL BEFORE DELIVERY**



PAYMENT POLICY INFORMATION

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exhibitorserviceswest@ges.com www.ges.com/ca

ADVANCE PRICING:

To qualify for **Advance Pricing**, orders must be received **with payment in full on or before the deadline date.** After the Deadline Date, orders will be charged the **Regular Prices**. Orders without payment cannot be processed until payment is received and could be charged the **Regular Price**.

ON SITE PRICING:

Orders placed on site (i.e. During move-in) will be charged 5% additional to the **Regular Price**.

METHOD OF PAYMENT:

GES accepts American Express, MasterCard, Visa, Debit Card, Cheques, Bank Wire and Electronic Funds Transfers (EFT).

Exhibitors will be charged a \$25.00 fee for returned NSF cheques.

BANK WIRE AND ELECTRONIC FUNDS TRANSFER INFORMATION:

To properly credit your account, please complete the **BANK WIRE / EFT FORM** included with the GES order forms.

NOTE: There is a minimum \$20.00 Service Charge (North America) \$40.00 (International) applicable on all Wire and EFTs. Any additional Wire Transfer and EFT fees are the exhibitors responsibility and may vary depending on the processing bank.

Please ensure the transfer is made a minimum of 10 days prior to the show.

PAYMENT SCHEDULE:

Payment for all services must be pre-paid in full. **GES** will not provide Material Handling, In-Booth Forklifts, or Installation and Dismantle Labour Services without your company's **CREDIT CARD AUTHORIZATION FORM** on file.

THIRD PARTY BILLING:

You may arrange for an exhibit house or Third Party to manage your exhibit and order services on your behalf. **GES** will agree to this arrangement if the exhibit house or agent makes satisfactory payment arrangements with us. In the event the authorized Third Party does not pay, each exhibiting company is ultimately responsible for all charges incurred on its behalf. See **THIRD PARTY BILLING REQUEST FORM**.

ADJUSTMENTS AND CANCELLATIONS:

Adjustments to your invoice **will not be made after the close of the show.** Some items, services and labour are subject to cancellation fees. Refer to each order form for details.

ALL EXHIBITORS MUST PAY 5% GST ON ALL ORDERS.



ELECTRONIC FUNDS/WIRE TRANSFER FORM

5675 McLaughlin Road, Mississauga, Ontario, L5R 3K5 Phone: 905-283-0500 Fax: 905-283-0501

Please complete and return this form to : Jolanta Baloniak, Accounts Receivable

GES Canada Limited

Email: ar@ges.com Fax: 905-283-0501

Your Company Name: _____

Contact Name: _____

Contact Number: _____

Booth Number: _____ Event Name: _____

GES BANK INFORMATION

PLEASE INCLUDE ALL OF THE FOLLOWING INFORMATION TO ENSURE YOUR FUNDS REACH OUR BANK

Beneficiary's Name:

GES Canada Limited

Bank Name:

Bank of Montreal

Address:

350 - 7th Avenue SW
Calgary, AB
T2P 3N9

IF YOU ARE SENDING
CANADIAN DOLLARS (\$CDN)



EFT/Direct Deposit

IF YOU ARE SENDING
AMERICAN DOLLARS (\$US)



Institution code #: 001
Transit #: 00109
Account #: 1967-990

Institution code #: 001
Transit #: 00109
Account #: 4773-410

Wire Transfers

Account #: 1967-990
Beneficiary's Bank: //CC000100109
Swift Code: BOFMCAM2

Account #: 4773-410
Beneficiary's Bank: //CC000100109
Intermediary bank: Wells Fargo Bank (FKA Wachovia)
Swift Code: PNBPU3NNYC

Routing / BIC / NCC / BSC or ABA Number: 026005092

Invoice Amount: _____

Date of Transfer: _____

*Minimum Bank Charge: \$20.00 (North American) \$40.00 (International)

Total: _____

Please Note: Please ensure transfer is made by the deadline date on your Order Form or Quotation. Additional charges will be incurred for late payments, and services may be delayed.
*Minimum Bank Charges as shown above, reflect GES's bank charges only.
Any additional wire transfer and EFT fees are the exhibitor's responsibility.



Furnishings (Calgary)

Grey Fabric Counter Stool



Grey Fabric Side Chair



Grey Fabric Arm Chair



30" Round / 18" High
Coffee Table



30" Round / 30" High
Starbase Table



30" Round / 40" High
Cocktail Table



4' and 6' Long
Skirted Counter with White Vinyl Top

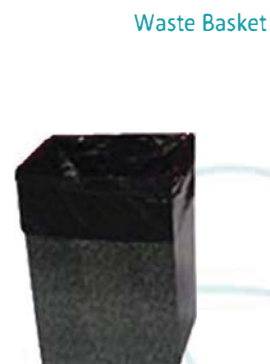


4', 6', or 8' Long
Skirted Table with White Vinyl Top





Furnishings (Calgary)





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exhibitorserviceswest@ges.com www.ges.com/ca

FURNISHINGS

SHOW: Vision Canada 2017

**ADVANCE PRICE
DEADLINE DATE:**

October 20, 2017

EXHIBITOR INFORMATION

BOOTH #: _____

COMPANY _____

STREET _____

CITY _____ PROV/STATE _____ CODE _____

E-MAIL _____

PHONE _____ FAX _____

CONTACT NAME _____

CREDIT CARD AUTHORIZATION

☐ MASTERCARD ☐ VISA ☐ AMEX

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EXPIRY DATE _____ / _____

CARDHOLDER NAME

CARDHOLDER SIGNATURE

☐ CHEQUE ATTACHED (PAYABLE TO GES CANADA)

ALL ORDERS MUST BE PREPAID IN FULL (ORDERS CAN NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED)

QTY	Item #	Description	Advance Price	Regular Price	Total
	FPEDT40	Cocktail Table 40" High	\$90.00	\$125.50	
	FGFSC	Grey Fabric Side Chair	\$41.00	\$57.00	
	FGFAC	Grey Fabric Arm Chair	\$42.00	\$74.50	
	FGFCS	Grey Fabric Counter Stool	\$89.50	\$125.50	
	FGR	Garment Rack on wheels	\$46.50	\$65.00	
	FLR	Literature Rack	\$80.00	\$112.00	
	FPEDT	Starbase Table - 30" Round x 30" High (Pedestal)	\$74.50	\$104.50	
	FCOFT	Starbase Table - 30" Round x 18" High (Coffee Table)	\$57.00	\$79.50	
	FCT	Coat Tree	\$32.00	\$45.00	
	FCSH	22" x 28" Chrome Sign Holder (Sign Extra)	\$48.50	\$68.00	
	FESL	Easel	\$41.00	\$57.50	
	FSBD	Gold Ballot Drum	\$65.00	\$91.00	
	FWB	Wastebasket	\$22.50	\$32.00	
	FCSU	White Counter Storage Unit 40" H	\$139.50	\$195.50	
	FBH	Bag Holder 41"H	\$68.00	\$95.50	
	FCS	1 Pair of Stanchions	\$87.00	\$121.00	
CUSTOM BOOTH DRAPING <input type="checkbox"/> BLACK <input type="checkbox"/> BLUE <input type="checkbox"/> RED <input type="checkbox"/> SILVER <input type="checkbox"/> WHITE					
	D3	3 Ft. High (Per Linear Ft.)	\$7.00	\$10.00	
	D8	8 Ft. High (Per Linear Ft.)	\$8.00	\$11.00	

Terms & Conditions

- All orders received after the Advance Price Date will be processed at the Regular Price.
- Exhibitor is responsible for all items for the duration of the show.
- If a colour is not chosen, GES will choose a colour for you.
- Charges are for rental of equipment only. All items remain the property of GES.
- GES is not responsible for exhibit materials left in GEM rental exhibits or counter storage units.
- All claims or discrepancies must be settled at the GES Service Centre prior to show closing.
- No refunds/exchanges on cancelled skirted tables or custom booth draping once delivered.
- 50% refund on furnishings cancelled prior to show opening.

SUBTOTAL
5% GST
TOTAL

GST #R104060264

Signature

Date



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exhibitorserviceswest@ges.com www.ges.com/ca

FURNISHINGS

SHOW:	Vision Canada 2017	ADVANCE PRICE DEADLINE DATE:	October 20, 2017
EXHIBITOR INFORMATION		CREDIT CARD AUTHORIZATION	
BOOTH #: _____ COMPANY _____ STREET _____ CITY _____ PROV/STATE _____ CODE _____ E-MAIL _____ PHONE _____ FAX _____ CONTACT NAME _____		<input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <div style="display: flex; justify-content: space-around;"> <div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div> <div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div> <div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div><div><input type="text"/></div> </div> EXPIRY DATE ____ / ____ / ____ CARDHOLDER NAME _____ CARDHOLDER SIGNATURE _____ <input type="checkbox"/> CHEQUE ATTACHED (PAYABLE TO GES CANADA)	

ALL ORDERS MUST BE PREPAID IN FULL (ORDERS CAN NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED)

QTY	Item #	SKIRTED TABLES 30" HIGH	Advance Price	Regular Price	Total
<input type="checkbox"/> BLACK <input type="checkbox"/> BLUE <input type="checkbox"/> BURGUNDY <input type="checkbox"/> GREEN <input type="checkbox"/> RED <input type="checkbox"/> SILVER <input type="checkbox"/> WHITE					
	DT4	4 Ft. Long x 2 Ft. Wide	\$85.50	\$119.50	
	DT6	6 Ft. Long x 2 Ft. Wide	\$94.00	\$131.50	
	DT8	8 Ft. Long x 2 Ft. Wide	\$101.50	\$142.50	
	DTS4S	Skirted Fourth Side Additional Charge	\$37.00	\$37.00	
SKIRTED COUNTER 42" HIGH <input type="checkbox"/> BLACK <input type="checkbox"/> BLUE <input type="checkbox"/> SILVER <input type="checkbox"/> WHITE					
	RD4	4 Ft. Long x 2 Ft. Wide	\$97.50	\$136.50	
	RD6	6 Ft. Long x 2 Ft. Wide	\$120.00	\$168.00	
	RD8	8 Ft. Long x 2 Ft. Wide	\$147.00	\$206.00	
NON SKIRTED TABLES 30" HIGH					
	UD4	4 Ft. Long x 2 Ft. Wide	\$48.50	\$82.50	
	UD6	6 Ft. Long x 2 Ft. Wide	\$57.00	\$94.50	
	UD8	8 Ft. Long x 2 Ft. Wide	\$64.50	\$105.50	
NON SKIRTED TABLES 42" HIGH					
	RUD4	4 Ft. Long x 2 Ft. Wide	\$60.50	\$99.50	
	RUD6	6 Ft. Long x 2 Ft. Wide	\$83.00	\$131.00	

Terms & Conditions

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- Charges are for rental of equipment only. All items remain the property of GES.
- GES is not responsible for exhibit materials left in GEM rental exhibits or counter storage units.
- All claims or discrepancies must be settled at the GES Service Centre prior to show closing.
- No refunds/exchanges on cancelled skirted tables or custom booth draping once delivered.
- 50% refund on furnishings cancelled prior to show opening.

SUBTOTAL	
5% GST	
TOTAL	
GST #R104060264	

Signature

Date



Specialty Furnishings (Calgary)

Genuine Italian Leather Sofa & Love Seat



Genuine Italian Leather Arm Chair

Bloor Fabric Sofa



Genuine Italian Leather Arm Chair



Genuine Italian Leather Sofa & Love Seat

Sandor Coffee Table



Metropolis Coffee Table



Max Side Table



Sandor Side Table

Specialty Furnishings



Tate Accent Chair



Diana Dining Chair



Cane Adjustable Barstool



Zoey Side Table



Madison Wood Desk



Diego White Desk



Draco Dining Chair



SHOW:

**DISCOUNT PRICE
DEADLINE DATE:**

EXHIBITOR INFORMATION

CREDIT CARD AUTHORIZATION

☐ CHEQUE ATTACHED (PAYABLE TO GES)

ALL ORDERS MUST BE PREPAID IN FULL (ORDERS CAN NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED)

SUBTOTAL 5% GST TOTAL	
	GST #R104060264

Signature

Date _____



Customized Rental Exhibits

Our Creative Exhibit Team will design a cost-effective, turnkey exhibit that will

- Exceed your expectations
- Highlight your brand
- Attract positive attention
- Stay within your budget

Your successful Tradeshow is just a phone call or click away...

David Ryman 403.218.7424

DRyman@ges.com

20' x 20' island



10' x 20' inline



20' x 30' island



10' x 20' corner





EXHIBIT ACCESSORIES

#25, 5805 76th Ave SE, Calgary, Alberta, T2C 5L8 Tel: 403.243.2212 Fax: 403.243.3868 Toll Free: 1.800.636.8235
exhibitorserviceswest@ges.com www.ges.com/ca

SHOW:	Vision Canada 2017	ADVANCE PRICE DEADLINE DATE:	October 20, 2017
EXHIBITOR INFORMATION		CREDIT CARD AUTHORIZATION	
BOOTH #: _____ COMPANY _____ STREET _____ CITY _____ PROV/STATE _____ CODE _____ E-MAIL _____ PHONE _____ FAX _____ CONTACT NAME _____		<input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 2px;"></div> EXPIRY DATE ____ / ____ / ____ CARDHOLDER NAME _____ CARDHOLDER SIGNATURE _____ <input type="checkbox"/> CHEQUE ATTACHED (PAYABLE TO GES CANADA)	

ALL ORDERS MUST BE PREPAID IN FULL (ORDERS CAN NOT BE PROCESSED UNTIL PAYMENT IS RECEIVED)

QTY	Item #	DESCRIPTION	ADVANCE PRICE	REGULAR PRICE	TOTAL
	PED001	Pedestal (White) 20"L x 20"W 28"H	\$91.50	\$128.00	
	PED002	Pedestal (White) 20"L x 20"W 36"H	\$91.50	\$128.00	
	GPML	Pedestal White 40"L X 40"W (Tops are 20" X 20") (Unit Heights - 16" - 28" & 28" - 40")	\$458.50	\$642.00	
	GSC	Storage Counter (White) 80"L X 20"W X 40"H	\$272.50	\$381.50	
	GCC	Curved Counter (White) 60"L X 20"W X 40"H	\$187.00	\$262.00	
	F99A	99A Showcase (White/Glass) 40"L X 20"W X 41"H	\$187.00	\$262.00	
	F99B	99B Showcase (White/Glass) 40"L X 20"W X 41"H	\$190.50	\$266.50	
	F99C	99C Showcase (White/Glass) 26"L X 26"W X 96"H	\$276.00	\$386.00	
	F99D	99D Showcase (White/Glass) 40"L X 20"W X 96"H	\$390.00	\$546.00	



QTY	Item #	DESCRIPTION	ADVANCE PRICE	REGULAR PRICE	TOTAL
	GWF	Waterfall With Eight Hooks	\$18.50	\$25.50	
	GGR	Garment Rail 39"W	\$47.50	\$66.50	
	GFS	Shelves - Flat 37"L X 12"W	\$40.00	\$56.00	
	GAS	Shelves - Angled 37"L X 12"W	\$40.00	\$56.00	
	GSWP	Slatwall Panels - 37"W X 96"H Grey (Upgrade for standard panels)	\$110.50	\$154.50	



*Designed to fit GES Hardwall booths only.
Please Attach Diagram Of Booth Indicating Locations For Grid Panels And/Or Slatwall. Grid Panels Cannot Be Installed In Corners.*

Terms & Conditions

- All items subject to availability.
- No refunds/exchanges once show move-in begins.
- All claims or discrepancies must be settled prior to show closing.
- Exhibitor is responsible for all items for the duration of the show.
- Charges are for rental of equipment. All items remain the property of GES.
- All orders received after the Advance Price Date will be processed at the Regular Price.

SUBTOTAL	
5% GST	
TOTAL	
	GST #R104060264

I have read and understand the Terms & Conditions of my Agreement with GES.

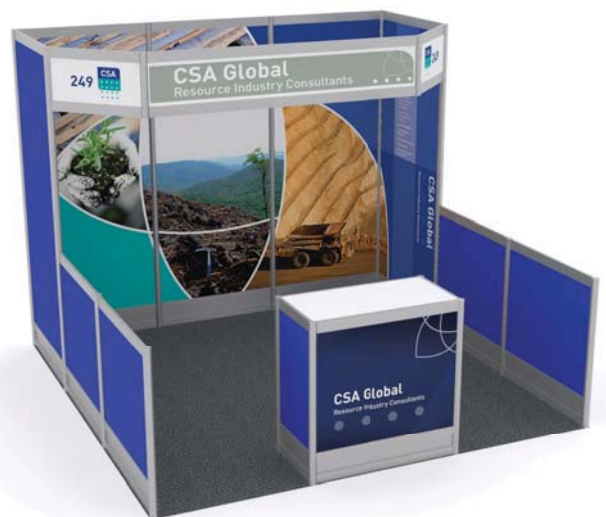
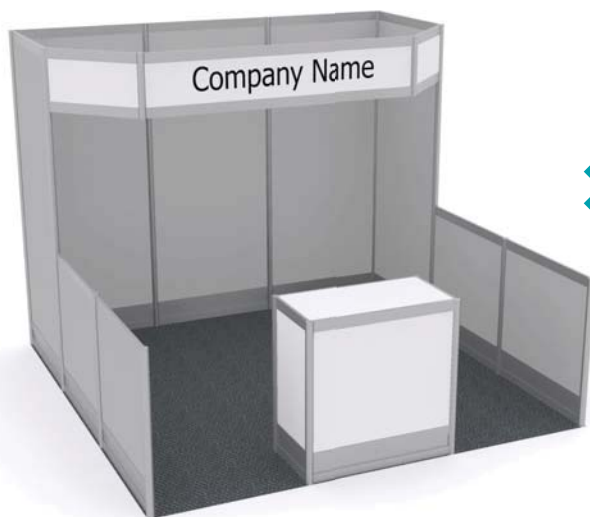
Signature

Date



Graphic Design & Production

GES is your one stop exhibit solution partner. Take advantage of our Creative Services Department to enhance your presence on the show floor. Upgrade a show special, or design from scratch. Our team of in-house Designers & Production Technicians, can help you realize your vision quickly and affordably.



- Backlit signs
- Banners & hanging signs
- Floor/carpet decals
- Backwall murals
- Easel & freestanding signs
- Posters
- Custom cut signs & decals
- Branding graphics

Please contact

Kat Friesen: 403.218.7434 (Kfriesen@ges.com) or

Dan Warcup: 403.218.7431 (Dwarcup@ges.com)



PRIORITY ON THE FLOOR... MEANS GES LOGISTICS

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 1.800.636.8235 or complete information below and fax to 403.243.3868, and let GES take care of your logistics needs from start to finish.

Company Name:	Phone:
Contact:	Fax:



SHIPPING ORDER FORM

#25, 5805 76th Ave SE, Calgary, Alberta, T2C 5L8 Tel: 403.243.2212 Fax: 403.243.3868 Toll Free: 1.800.636.8235
exhibitorserviceswest@ges.com www.ges.com/ca

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: _____ FAX: _____	CONTACT: _____	
EMAIL: _____	PHONE: _____	

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

DESTINATION

COMPANY NAME: _____	BOOTH #: _____
ON-SITE CONTACT: _____	
SHOW NAME: Vision Canada 2017	DELIVERY DATE: _____ DELIVERY TIME: _____
FACILITY: _____	
ADDRESS: _____	
CITY: _____ PROV/STATE: _____	POSTAL CODE: _____

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: _____	TEL: _____
CREDIT CARD NUMBER: _____	EXPIRY DATE: _____	
<input type="checkbox"/> VISA	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> AMERICAN EXPRESS
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. Exhibitor is responsible to declare all hazardous materials and abide by all federal, state and local laws.

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

X _____ Date: _____

Please Print Name: _____



ADVANCED WAREHOUSE

#25, 5805 76th Ave SE, Calgary, Alberta, T2C 5L8 Tel: 403.243.2212 Fax: 403.243.3868 Toll Free: 1.800.636.8235

exhibitorserviceswest@ges.com www.ges.com/ca

Warehouse Location: #25, 5805 - 76 Ave. SE, Calgary, Alberta, Canada T2C 5L8

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: Vision Canada 2017	Booth #: _____
Facility: _____	
Address: _____	Delivery Date: _____ Delivery Time: _____
City: _____ Prov/State: _____	Postal Code/VIP Code: _____
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	

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

**ADVANCED WAREHOUSE SERVICES INCLUDES DELIVERY TO BOOTH
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

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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

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/Vision Canada 2017**
#25, 5805 76th Ave SE
Calgary, Alberta, Canada
T2C 5L8

CARRIER: _____
(Name of your Transportation Company)

NUMBER **OF** **PIECES**

ADVANCE SHIPMENTS TO WAREHOUSE MUST BE RECEIVED BY:

November 1, 2017



GES Customs Services

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

Reliable and Efficient Service

- Experienced and reliable staff you can depend on who specialize in trade show Customs procedures
- Personnel are accessible at all times

Value Added Service

- Save time and money by making fewer calls

Personalized Service

- Telephone, email and fax communication
- Forms and instructions for completion in all Exhibitor Service Kits
- One-on-one Customs consultation to assist all exhibitors with their specific needs

On-Site Representation

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

Simplified Ordering

For your convenience choose one of the ordering options available:

- Online: www.ges.com/ca
- Phone: 403.243.2212 or 1.800.636.8235
- Fax: 403.243.3868

Leave all your shipping, customs clearance and furniture rentals to GES.



Customs / Transportation Order Form

THE ORIGINAL OF THIS ORDER FORM MUST BE COMPLETED & RETURNED TO ENSURE CUSTOMS CLEARANCE
PLEASE ACCEPT THIS AS YOUR AUTHORITY TO PROVIDE CUSTOMS CLEARANCE AND/OR TRANSPORTATION SERVICES

WE WISH TO USE GES SERVICES
FOR (PLEASE CHECK ONE)

☐

Customs Clearance
And Transportation

☐

Customs Clearance
Only

☐

Transportation
Only

SECTION 1

EXHIBITOR AND SHIPMENT INFORMATION

Exhibitor / Company Name: _____

U.S. Tax # or U.S. IRS ID #: _____

Event Name & Booth #: _____

Booth #: _____

Facility Name: _____

Shipment Date: _____

From (City): _____

Carrier Name: _____

It Consists of (# Cartons): _____

Weight: _____

☐

lbs.

☐

kgs.

Our Rep @ Event: _____

Staying At (Hotel): _____

Tel: _____

PLEASE DO NOT SHIP BY PARCEL COURIER OR MAIL – WE WILL NOT BE RESPONSIBLE FOR TIMELY DELIVERY

SECTION 2

RETURN SHIPMENT CONSIGNMENT INFORMATION

Company Name: _____

Delivery Address: _____

City: _____

Province/State: _____

Postal / Zip: _____

Name: _____

Telephone: _____

Fax Number: _____

Ship Via: ☐

Common Carrier

☐

Our Company Vehicle

☐

Van Line Service

☐

Air Freight Service

SECTION 3

CREDIT CARD AUTHORIZATION (NOTE – THIS SECTION MUST BE COMPLETED)

☐ I hereby authorize use of the following credit card for payment of services relative to this order form

CREDIT CARD INFORMATION MUST BE COMPLETED

Charge To: _____

☐

VISA

☐

MASTERCARD

☐

AMERICAN EXPRESS

Credit Card Number: _____

Expiry: _____ / _____

Cardholder's Name: _____

Title: _____

Cardholder's Signature: _____

ORIGINAL SIGNATURE REQUIRED

SECTION 4

INVOICE / STATEMENT INFORMATION

Company Name: _____

Mailing Address: _____

City: _____

Province/State: _____

Postal / Zip: _____

Attention: _____

Telephone: _____

Fax Number: _____

Email: _____

SECTION 5

ORDER AUTHORIZED BY

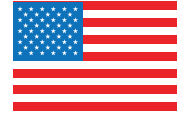
This Form Was Completed By:
(Please Print Full Name) _____

Title: _____

Date: _____



Table of Contents



Please Read Carefully Before Completing the Attached Documents

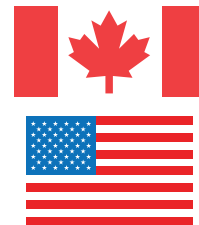
CANADA CUSTOMS DOCUMENTATION REQUIRED	Page 1
US CUSTOMS DOCUMENTATION REQUIRED	Page 1
DETAILED DESCRIPTION & INSTRUCTIONS	Pages 2 - 7

SAMPLES & ORDER FORMS

A) GES Customs/Transportation Order Form (Mandatory for all shipments)	Pages A-A1
B) CANADA CUSTOMS INVOICE (Mandatory for all shipments)	Pages B-B1
C) NAFTA CERTIFICATE OF ORIGIN	Pages C-C1
D) CERTIFICATE OF REGISTRATION (Form 4455)	Pages D-D1
E) FCC RADIO FREQUENCY FORM (Form 740)	Pages E-E1
F) RADIATION CONTROL FORM (Form FD 2877)	Pages F-F1
G) TEXTILE DECLARATION	Pages G1
H) PRIVATE VEHICLE SHIPMENT INFORMATION FORM	Pages H-H1

ALL DOCUMENTS MUST BE FAXED TO GES CUSTOMS BROKERAGE SERVICES PRIOR TO SHIPPING

Telephone: 403.243.2212 Fax: 403.243.3868
e-mail: exhibitorserviceswest@ges.com website: www.ges.com/ca



WELCOME TO CANADA

Canada is very proud to open its doors and borders to International Conventions, Meetings and Tradeshows. Like all countries, we have rules and regulations with respect to crossing the border and they are controlled and administered by Canada Customs, an official agency of the Revenue Department of the Canadian Government.

GES Customs Brokerage Services can help you make exhibiting across the border a simple and straightforward two-way experience for your people, products and display equipment. The following pages contain information and forms to assist you in that process by explaining what and when things have to be done.

CUSTOMS SIMPLIFIED - TIPS FOR SHIPPING ACROSS THE BORDER

1. ➔ **Use Official Suppliers**
It is beneficial for exhibitors to use the official suppliers selected for the show (i.e. GES Customs Brokerage Services and GES Logistics).
2. ➔ **Complete Customs Documents**
Complete all mandatory and necessary documents and fax copies to our GES office prior to shipping. Send all originals with the shipment and bring 2 copies to the show.
3. ➔ **Ship on Time**
Have materials shipped to arrive 7 days prior to move-in and consolidate shipments to reduce costs. GES Logistics is the recommended transportation carrier. **All shipments must be paid for in advance. We do not recommend shipping by parcel carriers or by mail.**
4. ➔ **Hand Carrying or Private Vehicle**
Notify GES in advance if you are bringing goods with you on the plane or crossing the border by company, rented or your own vehicle.
5. ➔ **Tracing Service**
To assist GES personnel in locating your exhibit freight please bring a record of the shipment "Tracking Number" provided by GES Logistics or your carrier. Our personnel have the knowledge and connections to expedite your shipment to the show site as quickly as possible.
6. ➔ **Changes & Return Shipments**
Notify GES Customs Brokers immediately of any change(s) to what is being shipped, quantities, addresses, etc., as well as what materials will be returned to the U.S. and provide the correct return address.
7. ➔ **Communicate with GES CUSTOMS/LOGISTICS Contacts**
GES will be in touch with you starting 3-4 weeks prior to the event and will have staff on site or on call during move-in, show days, and move-out. Exhibitors will be provided with cell phone numbers for 24-hour, 7-days-a-week access to your GES CUSTOMS and LOGISTICS contacts.

CANADA CUSTOMS DOCUMENTS:

(Explanations and direction to samples and order forms for completion)

TIP: Review and highlight the forms that apply to your shipments for completion

- ☐ **GES Customs/Transportation Order Form – (Mandatory for all shipments)**
- gives GES the authority to clear and coordinate the movement of your materials on your behalf (Pages A - A1 Sample).
- ☐ **Canada Customs Invoice – CCI – (Mandatory for all shipments)** - itemizes the contents of your shipment; quantities, countries of origin, unit and total shipment values. This is also where you would notify GES of any goods that will require special treatment or permits (Page B – B1 Sample).
- ☐ **NAFTA Certificate of Origin** - Goods that will be distributed (giveaways) to a Canadian, or remain in Canada must be identified on this form in order to receive the most favourable duty & tax treatment. This applies to NAFTA countries only; USA, Canada and Mexico (Pages C – C1 Sample).
- ☐ **Private Vehicle Shipment Information** – Goods that will be crossing the border via a company vehicle, rental or personal vehicle. You must fax GES this completed document one week in advance of your intended date of crossing. (Page H)
- ☐ **Airline Hand Baggage** - In the event you intend on bringing exhibit materials or commercial goods with you as hand baggage, a formal customs clearance may be required. Contact GES prior to departure for further information. Failure to follow these instructions may result in unexpected delays or payments at the airport. (Note: No Form)

UNITED STATES CUSTOMS DOCUMENTS:

(Explanations and direction to samples and order forms for completion)

TIP: Review and highlight the forms that apply to your shipments for completion

- ☐ **Certificate of Registration (FORM 4455)** -Goods that are not of USA origin and are intended to return to the USA (Pages D – D1 Sample).

ATTENTION ELECTRONIC SHIPPERS - MANDATORY

By not completing the following forms your materials will be denied re-entry into the USA

- ☐ **Radio Frequency Form (FCC 740)** – Goods that emit radio frequencies, e.g. computers, video cameras/recorders is mandatory by order of the U.S. Federal Communication Commission (Pages E – E1 Sample)
- ☐ **Radiation Form (FD 2877)** – Goods that emit radiation, e.g. CD Players, laser printers, monitors, televisions, x-ray equipment, etc. and is mandatory by order of U.S. Food & Drug Administration (Pages F – F1 Sample).

ATTENTION TEXTILE SHIPPERS - MANDATORY

By not completing the following forms your materials will be denied re-entry into the USA

- ☐ **Textile Declaration** - Goods such as carpets, curtains and clothing require this declaration to re-enter the USA. (Pages G – G1 Sample).

**ALL DOCUMENTS MUST BE FAXED TO GES CUSTOMS BROKERAGE
SERVICES PRIOR TO SHIPPING**

Telephone: 403.243.2212 Fax: 403.243.3868 e-mail: exhibitorserviceswest@ges.com

DETAILED DESCRIPTION & INSTRUCTIONS

☐ GES Customs/Transportation Order Form

This Order Form ***must be completed*** for all shipments.

The GES Customs Order Form is your authorization to allow GES to act on your behalf. GES cannot clear your goods through Canada Customs without this form being fully completed. The information completed on this form allows us to properly classify and process your shipment(s) into and out of Canada. It also provides payment authorization and IRS identification details for the safe return of your goods back to the USA. GES accepts Credit Card, Cheque, Bank Transfer or Money Order.

Charges for GES Customs Brokerage services include the posting of any Canada Customs Bonds that may be required plus any additional pay-outs that are made on your behalf. These amounts may include duty and taxes for goods that remain in Canada, local cartage fees, terminal fees and U.S. Customs clearance.

Action ☐ Please complete ***all*** areas of the Form and fax to GES.

☐ Canada Customs Invoice – CCI

This document ***must accompany*** every shipment.

The *Canada Customs Invoice – CCI*, is the most important document for any exhibition materials entering Canada. It must itemize all goods contained in the shipment with a description, quantity, value and country of origin.

- Action** ☐
1. Fill in all required information on the *Canada Customs Invoice – CCI*
 2. Include the original and two copies of your completed *Canada Customs Invoice*, in an envelope and staple to your Truck Bill of Lading or Air Waybill and label the envelope: **“Notify GES Customs Brokers for Canada Customs Clearance”**
 3. Fax a copy of the *Canada Customs Invoice* to GES Customs Brokers prior to shipping your goods, and keep a copy for your on-site representative’s records.

☐ North American Free Trade Agreement (NAFTA) Certificate of Origin Completion Instructions

Goods and display materials entering Canada that will not be exported after the show may be subject to duty and/or tax. Under the *North American Free Trade Agreement*, you may reduce or eliminate the amount of duty that is normally payable if a properly completed *NAFTA Certificate of Origin* accompanies your shipment. This is only applicable to goods originating in other NAFTA countries: United States and Mexico.

□ **North American Free Trade Agreement (NAFTA) - cont'd....**
Certificate of Origin Completion Instructions

- Field 1 State the full legal name, address (including country) and legal tax identification number of the exporter. Legal tax identification number is: in Canada, employer number or importer/exporter number assigned by Revenue Canada; in Mexico, federal taxpayer's registry number (RFC); and the United States, employer's identification number or Social Security Number.
- Field 2 Complete field if the Certificate covers multiple shipments of identical goods as described in Field 5 that are imported into a NAFTA country for a specified period of up to one year (blanket period). "FROM" is the date upon which the Certificate becomes applicable to the goods covered by the blanket Certificate (it may be prior to the date of signing this Certificate). "TO" is the date upon which the blanket period expires. The importation of a good for which preferential tariff treatment is claimed based on this Certificate must occur between these dates.
- Field 3 State the full legal name, address (including country) and legal tax identification number, as defined in Field 1, of the producer. If more than one producer's good is included on the Certificate, attach a list of the additional producers, including the legal name, address (including country) and legal tax identification number, cross referenced to the good described in Field 5. If you wish this information to be confidential, it is acceptable to state "Available to Customs upon request". If the producer and the exporter are the same, complete field with "SAME". If the producer is unknown, it is acceptable to state "UNKNOWN".
- Field 4 State the full legal name, address (including country) and legal tax identification number, as defined in Field 1, of the importer. If importer is not known, state "UNKNOWN", if multiple importers, state "VARIOUS".
- Field 5 Provide a full description of each good. The description should be sufficient to relate it to the invoice description and to the Harmonized System (HS) description of the good. If the Certificate covers a single shipment of a good, include the invoice number as shown on the commercial invoice. If not known, indicate another unique reference number, such as the shipping order number.
- Field 6 For each good described in Field 5, identify the HS tariff classification to six digits. If the good is subject to a specific rule of origin in Annex 401 that requires eight digits, identify to eight digits, using the HS tariff classification of the country into whose territory the good is imported.
- Field 7 For each good described in Field 5, state which criterion (A through F) is applicable. The rules of origin are contained in Chapter Four and Annex 401. Additional rules are described in Annex 703.2 (certain agricultural goods), Annex 300-B, Appendix 6A (certain textile goods) and Annex 308.1 (certain automatic data processing goods and their parts). **Note: In order to be entitled to preferential tariff treatment, each good must meet at least one of the criteria below.**

Preference Criteria:

- A The good is "wholly obtained or produced entirely" in the territory of one or more of the NAFTA countries, as referred to in Article 415. Note: The purchase of a good in the territory does not necessarily render it "wholly obtained or produced". If the good is an agricultural good, see also criterion F and Annex 703.2. (Ref. Article 401(a) and 415)
- B The good is produced entirely in the territory of one or more of the NAFTA countries and satisfies the specific rule of origin, set out in Annex 401, that applies to its tariff classification. The rule may include a tariff classification change, regional value-content requirement or a combination thereof. The good must also satisfy all other applicable requirements of Chapter Four. If the good is an agricultural good, see also criterion F and Annex 703.2. (Reference: Article 401(b))
- C The good is produced entirely in the territory of one or more of the NAFTA countries exclusively from originating materials. Under this criterion, one or more of the materials may not fall within the definition of "wholly produced or obtained", as set out in Article 415. All materials used in the production of the good must qualify as "originating" by meeting the rules of Article 401(a) through (d). If the good is an agricultural good, see also criterion F and Annex 703.2. (Ref.: Article 401(c))

□ **North American Free Trade Agreement (NAFTA)** - cont'd....
Certificate of Origin Completion Instructions

- D Goods are produced in the territory of one or more of the NAFTA countries but do not meet the applicable rule of origin, set out in Annex 401, because certain non-originating materials do not undergo the required change in tariff classification. The goods do nonetheless meet the regional value-content requirement specified in Article 401(d). This criterion is limited to the following two circumstances:
1. the good was imported into the territory of a NAFTA country in an unassembled or disassembled form but was classified as an assembled good, pursuant to HS General Rule of Interpretation 2(a); or
 2. the good incorporated one or more non-originating materials, provided for as parts under the HS, which could not undergo a change in tariff classification because the heading provided for both the good and its parts and was not further subdivided into subheadings, or the subheading provided for both the good and its parts and was not further subdivided.

Note: This criterion does not apply to Chapters 61 through 63 of the HS (Reference: Article 401(d))

- E Certain automatic data processing goods and their parts, specified in Annex 308.1, that do not originate in the territory are considered originating upon importation into the territory of a NAFTA country from the territory of another NAFTA country when the Most-Favoured-Nation Tariff rate of the good conforms to the rate established in Annex 308.1 and is common to all NAFTA countries. (Reference: Annex 308.1)
- F The good is an originating agricultural good under preference criterion A, B or C above and is not subject to a quantitative restriction in the importing NAFTA country because it is a "qualifying good" as defined in Annex 703.2, Section A or B (please specify). A good listed in Appendix 703.2.B.7 is also exempt from quantitative restrictions and is eligible for NAFTA preferential tariff treatment if it meets the definition of "qualifying good" in Section A of Annex 703.2. **Note 1: This criterion does not apply to goods that wholly originate in Canada or the United States and are imported into either country. Note 2: A tariff rate quota is not a quantitative restriction.**

- Field 8 For each good described in field 5, state "YES" if you are the producer of the good. If you are not the producer of the good, state "NO" followed by (1), (2), or (3), depending on whether this certificate was based upon: (1) your knowledge of whether the good qualifies as an originating good; (2) your reliance on the producer's written representation (other than a Certificate of Origin) that the good qualifies as an originating good; or (3) a completed and signed Certificate for the good, voluntarily provided to the exporter by the producer.
- Field 9 For each good described in Field 5, where the good is subject to a regional value content (RVC) requirement, indicate "NC" if the RVC is calculated according to the net cost method; otherwise, indicate "NO". If the RVC is calculated according to the net cost method over a period of time, further identify the beginning and ending dates (DD/MM/YY) of that period. (Reference: Articles 402.1, 402.5)
- Field 10 Identify the name of the country ("MX" or "US" for agricultural and textile goods exported to Canada; "US" or "CA" for all goods exported to Mexico; or "CA" or "MX" for all goods exported to the United States) to which the preferential rate of customs duty applies, as set out in Annex 302.2, in accordance with the Marking Rules or in each Party's schedule of tariff elimination. For all other originating goods exported to Canada, indicate appropriately "MX" or "US" if the goods originate in that NAFTA country, within the meaning of the NAFTA Rules of Origin Regulations, and any subsequent processing in the other NAFTA country does not increase the transaction value of the goods by more than 7%; otherwise indicate as "JNT" for joint production. (Reference: Annex 302.2)
- Field 11 This field must be completed, signed and dated by the exporter. When the Certificate is completed by the producer for use by the exporter, it must be completed, signed and dated by the producer. The date must be the date the Certificate was completed and signed.

□ Airline Hand Baggage

In the event you intend on bringing any exhibit materials or commercial goods with you as hand baggage, a formal Customs clearance may be required. Contact GES Customs Brokers prior to your departure for further information.

Action □ Complete a *Customs Transportation Order Form* and a *Canada Customs Invoice – CCI*, describing your materials, fax to GES and bring a copy with you. Upon arrival present the *CCI* to the Customs and Immigration officer in Toronto and inform him/her you are attending a convention/tradeshow and GES Customs Brokers will Customs clear your goods at the show. Canada Customs will issue you a C6 document to be presented to GES Customs Brokers upon arrival at show site.

Failure to follow these instructions may result in unexpected delays or payments at the airport

□ Private Vehicles or Company Vehicles

In the event you will be transporting your exhibition materials to Canada with a company, rented or personal vehicle you **must** notify GES Customs Brokers, at least one week in advance of your intended date of crossing the border.

Action □ Complete all required Customs documentation including the GES Customs/Transportation Order Form, *Canada Customs Invoice – CCI* and the Private Vehicle Shipment Information Form. Fax all completed documentation to GES Customs Brokers at least one week prior to your border crossing date. Ensure the driver of the vehicle has copies of all documentation.

Failure to follow these instructions may result in unexpected delays or payments at the border

□ Canadian Certificates or Permits

Certain goods require Certificates or Permits before they are allowed entry into Canada. The specific kinds of materials that require certificates and/or permits are:

- | | | |
|---------------------|----------------------|---------|
| ▶ Clothing/Textiles | ▶ Plants/Agriculture | ▶ Food |
| ▶ Animals | ▶ Alcohol | ▶ Drugs |
| ▶ Firearms | ▶ Explosives | |

In the event you will be shipping any of these materials, or you are not certain if your materials are subject to special treatment, you must notify GES immediately.

□ ATA Carnet

The *ATA Carnet* is an internationally recognized Customs document that is similar to a passport for an individual traveler. It serves as a guarantee for the entry of materials into a country in place of the normal Customs documentation that would usually be required. An *ATA Carnet* is issued in the country of origin and provides bond coverage for the temporary importation of exhibit materials. Please contact GES for further information.

□ **Certificate of Registration (Form 4455)**
For Goods that are not of U.S. Origin/Manufacture

If you are shipping materials to Canada that are not made or produced in the USA but have been shipped from the USA and will be returning to the USA, they will require a *Certificate of Registration Form* .

Goods that are manufactured outside the United States are dutiable each time they cross the U.S. border, unless evidence can be provided that the goods are re-entering the United States.

This form must accompany your shipment to Canada and be validated or stamped by U.S. Customs at the port of exit prior to your departure. The carrier must be instructed in writing on the Bill of Lading or Air Waybill that this form must be validated/stamped.

If you are transporting your materials by company, rented or private vehicle, it is important that you stop at U.S. Customs prior to entering Canada to have this form Validated/Stamped.

Action □ This form is not Valid unless it has been stamped and examined by U.S. Customs prior to leaving the U.S.A. An original must be provided to GES Customs Brokers at show site to be included in your documents for return to the USA.

□ **FCC Form 740 Items Capable of Emitting Radio Frequencies**
An FCC Form is required for all goods capable of emitting Radio Frequencies

The U.S. Federal Communications Commission (FCC) requires the filing of an FCC Form 740 for any radio frequency or sub assembly devices (manufactured outside the USA), which can cause harmful interference, prior to entry into the USA. A separate Form 740 is required for each model type.

Examples of Products that Emit Radio Frequencies:

A radio frequency (RF) device is any product capable of emitting radio signals while being operated, such as: computers & peripherals, telephones, video cameras & VCRs, transmitters/receivers, disk drives, video games, TV tuners.

Action □ The FCC Form must be completed and faxed to GES Customs Brokers prior to shipping your goods. Keep the original with your shipment and provide it, with your other Customs documents, to a GES Customs representative at show-site. GES must receive the original of the FCC Form 740 for submission to U.S. Authorities upon return of your shipment to the USA.

□ **FDA Form 2877 Electronic Products Capable of Emitting Radiation**
An FDA Form 2877 is required for all goods capable of emitting Radiation

The USA Food and Drug Administration (FDA) and U.S. Customs regulations state that when shipping electronic equipment that emits or is capable of emitting radiation, Form FD 2877 must be completed prior to entry into the USA. This form is required regardless of the country of manufacture.

You must verify that a certificate, in the form of an identification tag or label, is affixed to the product that states compliance with USA Food and Drug regulations.

Examples of Products that Emit Radiation.

Products that emit radiation include televisions, monitors, laser printers, CD players, X-ray equipment and laser emitting equipment and devices.

Action □ The FDA Form 2877 must be completed and faxed to GES Customs Brokers prior to shipping your goods. Keep the original with your shipment and provide it, with your other Customs documents, to a GES Customs representative at show-site. GES must receive the original of the FDA Form 2877 for submission to U.S. Authorities upon return of your shipment to the USA.

□ Textile Declaration

The U.S. Government requires the filing of a *Textile Declaration* for any textile products returning to the United States. This declaration would be for any products containing textiles such as carpet, drapes, t-shirts, tote bags, etc. In addition, goods from certain countries may require permits or may not be allowed re-entry into the U.S. due to trade quotas or embargo's with certain countries such as China, Singapore, Sri Lanka, etc.

Completion Instructions – See Example

1. Name of the person making the declaration.
2. Countries manufacturing the article, source of country of the textiles used in the manufacture of the article
3. Style & model numbers, colour, etc. (if applicable)
4. Name & number of items
5. Description of processing and country where processing was done
6. Date of export from Canada (date goods returning to US)
7. Description of imported material and country where the material was manufactured
8. Date material was exported from originating country

Action □ The *Textile Declaration* must be completed and faxed to GES Customs Brokers prior to shipping your goods. Keep the original with your shipment and provide it, with your other Customs documents, to a GES Customs representative at show-site. GES must receive the original for submission to U.S. Authorities upon return of your shipment to the USA.

All Customs documents must be faxed to GES prior to shipping

For additional information contact GES
the Official Customs Broker for this event.

Telephone: 403.243.2212 Fax: 403.243.3868 e-mail: exhibitorserviceswest@ges.com



Customs / Transportation Order Form

THE ORIGINAL OF THIS ORDER FORM MUST BE COMPLETED & RETURNED TO ENSURE CUSTOMS CLEARANCE
PLEASE ACCEPT THIS AS YOUR AUTHORITY TO PROVIDE CUSTOMS CLEARANCE AND/OR TRANSPORTATION SERVICES

WE WISH TO USE GES SERVICES
FOR (PLEASE CHECK ONE)

☒ Customs Clearance
And Transportation

☐ Customs Clearance
Only

☐ Transportation
Only

SECTION 1

EXHIBITOR AND SHIPMENT INFORMATION

Exhibitor / Company Name: **ABC MACHINE COMPANY** Email Address: _____
U.S. Tax # or U.S. IRS ID #: **31-2293941**
Event Name & Booth #: **INTERNATIONAL MACHINERY SHOW** Booth #: **1430**
Facility Name: **MTCC - METRO TORONTO CONVENTION CENTRE - SOUTH BLDG**
Shipment Date: **MARCH 3, 2001** From (City): **NEW YORK** Carrier Name: **GES LOGISTICS**
It Consists of (# Cartons): **6** Weight: **1,500** ☒ lbs. ☐ kgs.
Our Rep @ Event: **BILL SMITH** Staying At (Hotel): **RYH - ROYAL YORK** Tel: **416-368-2511**

PLEASE DO NOT SHIP BY PARCEL COURIER OR MAIL - WE WILL NOT BE RESPONSIBLE FOR TIMELY DELIVERY

SECTION 2

RETURN SHIPMENT CONSIGNMENT INFORMATION

Company Name: **ABC MACHINE COMPANY**
Delivery Address: **100 - 5TH AVENUE**
City: **NEW YORK** Province/State: **NEW YORK** Postal / Zip: **10012-1010**
Name: **JOE BROWN** Telephone: **212-286-2140** Fax Number: **212-286-2100**
Ship Via: ☒ Common Carrier ☐ Our Company Vehicle ☐ Van Line Service ☐ Air Freight Service

SECTION 3

CREDIT CARD AUTHORIZATION (NOTE - THIS SECTION MUST BE COMPLETED)

☐ I hereby authorize use of the following credit card for payment of services relative to this order form

CREDIT CARD INFORMATION MUST BE COMPLETED

Charge To: ☒ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS
Credit Card Number: **123 456 789 012** Expiry: **09 / 03**
Cardholder's Name: **BILL SMITH** Title: **DIRECTOR OF SALES**
Cardholder's Signature: **BILL SMITH**

ORIGINAL SIGNATURE REQUIRED

SECTION 4

INVOICE / STATEMENT INFORMATION

Company Name: **ABC MACHINE COMPANY**
Mailing Address: **100 - 5TH AVENUE**
City: **NEW YORK** Province/State: **NY** Postal / Zip: **10012-1010**
Attention: **BILL SMITH** Telephone: **212-286-2140** Fax Number: **212-286-2100**

SECTION 5

ORDER AUTHORIZED BY

This Form Was Completed By: **JOE BROWN**
(Please Print Full Name)

Title: **DIRECTOR OF MARKETING**

Date: **APRIL 17, 2001**



Customs / Transportation Order Form

THE ORIGINAL OF THIS ORDER FORM MUST BE COMPLETED & RETURNED TO ENSURE CUSTOMS CLEARANCE
PLEASE ACCEPT THIS AS YOUR AUTHORITY TO PROVIDE CUSTOMS CLEARANCE AND/OR TRANSPORTATION SERVICES

WE WISH TO USE GES SERVICES
FOR (PLEASE CHECK ONE)

☐

Customs Clearance
And Transportation

☐

Customs Clearance
Only

☐

Transportation
Only

SECTION 1

EXHIBITOR AND SHIPMENT INFORMATION

Exhibitor / Company Name: _____

U.S. Tax # or U.S. IRS ID #: _____

Event Name & Booth #: _____

Booth #: _____

Facility Name: _____

Shipment Date: _____

From (City): _____

Carrier Name: _____

It Consists of (# Cartons): _____

Weight: _____

☐

lbs.

☐

kgs.

Our Rep @ Event: _____

Staying At (Hotel): _____

Tel: _____

PLEASE DO NOT SHIP BY PARCEL COURIER OR MAIL – WE WILL NOT BE RESPONSIBLE FOR TIMELY DELIVERY

SECTION 2

RETURN SHIPMENT CONSIGNMENT INFORMATION

Company Name: _____

Delivery Address: _____

City: _____

Province/State: _____

Postal / Zip: _____

Name: _____

Telephone: _____

Fax Number: _____

Ship Via: ☐

Common Carrier

☐

Our Company Vehicle

☐

Van Line Service

☐

Air Freight Service

SECTION 3

CREDIT CARD AUTHORIZATION (NOTE – THIS SECTION MUST BE COMPLETED)

☐ I hereby authorize use of the following credit card for payment of services relative to this order form

CREDIT CARD INFORMATION MUST BE COMPLETED

Charge To: _____

☐

VISA

☐

MASTERCARD

☐

AMERICAN EXPRESS

Credit Card Number: _____

Expiry: _____ / _____

Cardholder's Name: _____

Title: _____

Cardholder's Signature: _____

ORIGINAL SIGNATURE REQUIRED

SECTION 4

INVOICE / STATEMENT INFORMATION

Company Name: _____

Mailing Address: _____

City: _____

Province/State: _____

Postal / Zip: _____

Attention: _____

Telephone: _____

Fax Number: _____

Email: _____

SECTION 5

ORDER AUTHORIZED BY

This Form Was Completed By:
(Please Print Full Name) _____

Title: _____

Date: _____

CANADA CUSTOMS INVOICE / FACTURE DES DOUANES CANADIENNES

Page 1 of 1
de

1 Vendor (Name and Address) / Vendeur (Nom et Adresse) ABC MACHINE COMPANY 100-5 TH AVENUE NEW YORK, NY 10012-1010		2 Date of Direct Shipment to Canada Date d'expédition directe vers le Canada MARCH 3, 2001 3 Other References (Include Purchaser's Order No.) Autres références (inclure le no de commande de l'acheteur) 31-2293941 (COMPANY IRS#)	
4 Consignee (Name and Address) / Destinataire (Nom et Adresse) ABC MACHINE COMPANY / BOOTH 210 INTERNATIONAL MACHINERY SHOW C/O METRO TORONTO CONVENTION CENTRE SOUTH BLDG 222 BREMNER BLVD TORONTO, ON M5V 2E6		5 Purchaser's Name and Address (if other than Consignee) Nom et Adresse de l'acheteur (s'il diffère du destinataire) NO SALE INVOLVED	
		6 Country of Transshipment / Pays de transbordement N/A	
		7 Country of Origin of Goods Pays d'origine des marchandises U.S.A. If shipment includes goods of different origins enter origins against items in 12 Si l'expédition comprend des marchandises d'origines différentes, en préciser la provenance en 12	
VII. 1 Is this a related company transaction? Est-ce que les compagnies sont liées entre elles? YES <input type="checkbox"/> OUI NO <input type="checkbox"/> NON		9 Condition of Sales and Terms of Payment (i.e. Sale, Consignment Shipment, Leased Goods, etc.) Conditions de vente et modalités de paiement (p. Ex. Vente, Expédition en consignation, location de marchandises, etc.)	
8 Transportation: Give Mode and Place of Direct Shipment to Canada Transport: Préciser mode et lieu d'expédition directe vers le Canada GES LOGISTICS NEW YORK, NY		10 Currency of Settlement / Devises du paiement USD	
11. No. of Pkgs. Nbre. de colis	12 Specification of Commodities (Kind of Packages) Marks and Numbers, General Description and Characteristics i.e. Grade Quality Designation des articles (Nature des colis, marques et numéros, description générale et caractéristiques. P. Ex. Classe, qualité)	13 Quantity (State Unit) Quantité (Préciser l'unité)	Relacement Value Valeur de Remplacement
			14 Unit Price Prix Unitaire
			15 Total
3 PCS	WOODEN CRATES-COMPUTERS (CERTIFICATE OF REGISTRATION ATTACHED)	3	\$1,000.00
1 PC	CRATE-COMPUTER MONITOR (CERTIFICATE OF REGISTRATION ATTACHED)	1	\$ 500.00
1 PC	CARTON-ADVERTISING LITERATURE	1,000	\$ 0.10
1 PC	CARTON-PLASTIC KEY CHAINS / BOOKS	50	\$ 0.50
XI.1 Total Number of Pieces / Nombre total de pièces 6			
18 <input type="checkbox"/> If any fields of 1 to 17 are included on an attached commercial invoice, check this box / Si les renseignements des zones 1 à 17 figurent sur la facture commerciale cocher cette case Commercial Invoice No. / No. De la facture commerciale		16. Total Weight / Poids total 1,500bs. <input checked="" type="checkbox"/> kgs. Net. Weight N/A	
		Gross Wt./ Brut 1,500 lbs	
19 Exporter's Name and Address (if other than Vendor) Nom et adresse de l'exportateur (s'il diffère du vendeur)		20 Originator (Name and Address) Expéditeur d'origine (Nom et adresse) ABC MACHINE COMPANY 100-5 TH AVENUE NEW YORK, NY 10012-1010 Contact: BILL SMITH Tel: 212-268-2140 Fax: 212-268-2511	
21 Departmental Ruling (if applicable) Decision ministérielle (s'il y a lieu) N/A			

CANADA CUSTOMS INVOICE / FACTURE DES DOUANES CANADIENNES

Page of
de

1 Vendor (Name and Address) / Vendeur (Nom et Adresse)		2 Date of Direct Shipment to Canada Date d'expédition directe vers le Canada		3 Other References (Include Purchaser's Order No.) Autres références (inclure le no de commande de l'acheteur)	
4 Consignee (Name and Address) / Destinataire (Nom et Adresse)		5 Purchaser's Name and Address (if other than Consignee) Nom et Adresse de l'acheteur (s'il diffère du destinataire)			
		6 Country of Transshipment / Pays de transbordement			
		7 Country of Origin of Goods Pays d'origine des marchandises		If shipment includes goods of different origins enter origins against items in 12 Si l'expédition comprend des marchandises d'origines différentes, en préciser la provenance en 12	
VII. 1 Is this a related company transaction? Est-ce que les compagnies sont liées entre elles?		9 Condition of Sales and Terms of Payment (i.e. Sale, Consignment Shipment, Leased Goods, etc.) Conditions de vente et modalités de paiement (p. Ex. Vente, Expédition en consignation, location de marchandises, etc.)			
YES <input type="checkbox"/> OUI NO <input type="checkbox"/> NON					
8 Transportation: Give Mode and Place of Direct Shipment to Canada Transport: Préciser mode et lieu d'expédition directe vers le Canada		10 Currency of Settlement / Devises du paiement			
11. No. of Pkgs. Nbre. de colis	12 Specification of Commodities (Kind of Packages) Marks and Numbers, General Description and Characteristics i.e. Grade Quality Designation des articles (Nature des colis, marques et numéros, description générale et caractéristiques. P. Ex. Classe, qualité)	13 Quantity (State Unit) Quantité (Préciser l'unité)	Relacement Value Valeur de Remplacement		
			14 Unit Price Prix Unitaire	15 Total	
XI.1 Total Number of Pieces / Nombre total de pièces					
18 <input type="checkbox"/> If any fields of 1 to 17 are included on an attached commercial invoice, check this box / Si les renseignements des zones 1 à 17 figurent sur la facture commerciale cocher cette case		16. Total Weight / Poids total <input type="checkbox"/> lbs. <input type="checkbox"/> kgs.		17. Invoice Total Total de la facture	
Commercial Invoice No. / No. De la facture commerciale		Net. Weight	Gross Wt./ Brut		
19 Exporter's Name and Address (if other than Vendor) Nom et adresse de l'exportateur (s'il diffère du vendeur)		20 Originator (Name and Address) Expéditeur d'origine (Nom et adresse)			
21 Departmental Ruling (if applicable) Decision ministérielle (s'il y a lieu)		Contact: Tel: Fax:			



PROTECTED (when completed)

North American Free Trade Agreement
Certificate of Origin

Please Print or Type

1 Exporter's Name and Address <div>Tax Identification Number ▶</div>		2 Blanket Period From <div>DD MM YY</div> To <div>DD MM YY</div>			
3 Producer's Name and Address <div>Tax Identification Number ▶</div>		4 Importer's Name and Address <div>Tax Identification Number ▶</div>			
5 Description of Goods	6 HS Tariff Classification Number	7 Preference Criterion	8 Producer	9 Net Cost	10 Country of Origin
11 I CERTIFY THAT: <ul style="list-style-type: none">The information on this document is true and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document;I agree to maintain, and present upon request, documentation necessary to support this Certificate, and to inform, in writing, all persons to whom the Certificate was given, of any changes that would affect the accuracy or validity of this Certificate;The goods originated in the territory of one or more of the Parties, and comply with the origin requirements specified for those goods in the North America Free Trade Agreement, and unless specifically exempted in Article 411 or Annex 401, there has been no further production or any other operation outside the territories of the Parties; andThis Certificate consists of ____ pages, including all attachments.					
Authorized Signature:		Company:			
Name:		Title:			
Date: <div>DD MM YY</div>		Telephone:		FAX:	



PROTECTED (when completed)

North American Free Trade Agreement Certificate of Origin

Please Print or Type

1 Exporter's Name and Address <div>Tax Identification Number ▶</div>		2 Blanket Period From <table><tr><td></td><td></td><td></td></tr><tr><td>DD</td><td>MM</td><td>YY</td></tr></table> To <table><tr><td></td><td></td><td></td></tr><tr><td>DD</td><td>MM</td><td>YY</td></tr></table>							DD	MM	YY				DD	MM	YY
DD	MM	YY															
DD	MM	YY															
3 Producer's Name and Address <div>Tax Identification Number ▶</div>		4 Importer's Name and Address <div>Tax Identification Number ▶</div>															
5 Description of Goods	6 HS Tariff Classification Number	7 Preference Criterion	8 Producer	9 Net Cost	10 Country of Origin												
11 I CERTIFY THAT: <ul style="list-style-type: none">The information on this document is true and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document;I agree to maintain, and present upon request, documentation necessary to support this Certificate, and to inform, in writing, all persons to whom the Certificate was given, of any changes that would affect the accuracy or validity of this Certificate;The goods originated in the territory of one or more of the Parties, and comply with the origin requirements specified for those goods in the North America Free Trade Agreement, and unless specifically exempted in Article 411 or Annex 401, there has been no further production or any other operation outside the territories of the Parties; andThis Certificate consists of ____ pages, including all attachments.																	
Authorized Signature:		Company:															
Name:		Title:															
Date: <table><tr><td></td><td>DD</td><td></td><td>MM</td><td></td><td>YY</td></tr></table>			DD		MM		YY	Telephone:		FAX:							
	DD		MM		YY												



FORM 4455
CERTIFICATE OF REGISTRATION

COMPLETE WHEN GOODS ARE NOT OF U.S.A. ORIGIN

FORM APPROVED OMB NO. 48-R0247

(NOTE: Number of copies to be submitted varies with type of transaction
Inquire at District Director's Office as to number of copies required.)

Via (Carrier): GES LOGISTICS		B/L or INSURED NO. Y123456	NO. DATE: APRIL 17, 2000
NAME, ADDRESS AND ZIP CODE TO WHICH CERTIFIED FORM IS TO BE MAILED (If Applicable) ABC MACHINE COMPANY C/O GES CUSTOMS BROKERS 3175 AIRWAY DRIVE MISSISSAUGA, ON L4V 1C2		ARTICLES EXPORTED FOR: <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR * <input type="checkbox"/> USE ABROAD <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> PROCESSING <input checked="" type="checkbox"/> OTHER (SPECIFY) <u>EXHIBITION</u> *NOTE: The cost or value of alterations, repairs, or processing abroad is subject to Customs duty.	

LIST ARTICLES EXPORTED

Number of Packages	Kind of Packages	Description of Articles
3	CRATES	CRATE #1 - IBM COMPUTER, SER#1710-MADE IN JAPAN CRATE #2 - PANASONIC CD, SER#210-MADE IN JAPAN CRATE #3 - ATI COLOUR MONITOR, SER#A10-MADE IN KOREA

Signature of Owner or Agent (Print or Type and Sign)			DATE
→ TYPE NAME: BILL SMITH	SIGN NAME: BILL SMITH	TEL: 212-286-2140	APRIL 17, 2000

The Above Described Articles Were:

EXAMINED		LADEN under my supervision	
DATE	PORT	DATE	PORT
SIGNATURE OF CUSTOMS OFFICER		SIGNATURE OF CUSTOMS OFFICER	

CERTIFICATE ON RETURN

Duty-free entry is claimed for the described articles as having been exported without benefit of drawback and are returned unchanged except as noted: (use reverse if needed)

IMPORTANT: Be Sure To Mark In The Body Of Your Air Waybill Or Bill Of Lading As Follows:



U.S. CERTIFICATE OF REGISTRATION FORM 4455 ATTACHED. GOODS MUST BE EXAMINED BY U.S. CUSTOMS PRIOR TO EXPORT FROM THE U.S.A. AND CERTIFIED COPIES MUST BE GIVEN TO GES AT SHOW SITE.

If your list of goods exceeds the available space, prepare your list (as above) on a separate sheet and mark this form "exhibition material as per attached". Please attach a copy of your list to each copy of the 4455 forms.

Signature of Owner or Agent (Print or Type and Sign) → BILL SMITH - BILL SMITH	DATE: APRIL 17, 2000
---	-------------------------

NOTE: Certifying officers shall draw lines through all unused spaces with ink or indelible pencil.

CUSTOMS FORM 4455



FORM 4455
CERTIFICATE OF REGISTRATION

COMPLETE WHEN GOODS ARE NOT OF U.S.A. ORIGIN

FORM APPROVED OMB NO. 48-R0247

(NOTE: Number of copies to be submitted varies with type of transaction
Inquire at District Director's Office as to number of copies required.)

NO.

Via (Carrier):	B/L or INSURED NO.	DATE:								
NAME, ADDRESS AND ZIP CODE TO WHICH CERTIFIED FORM IS TO BE MAILED (If Applicable)	ARTICLES EXPORTED FOR: <table border="0"><tr><td><input type="checkbox"/> ALTERATION</td><td><input type="checkbox"/> PROCESSING</td></tr><tr><td><input type="checkbox"/> REPAIR *</td><td><input type="checkbox"/> OTHER (SPECIFY) _____</td></tr><tr><td><input type="checkbox"/> USE ABROAD</td><td></td></tr><tr><td><input type="checkbox"/> REPLACEMENT</td><td><u>EXHIBITION</u></td></tr></table> <p>*NOTE: The cost or value of alterations, repairs, or processing abroad is subject to Customs duty.</p>		<input type="checkbox"/> ALTERATION	<input type="checkbox"/> PROCESSING	<input type="checkbox"/> REPAIR *	<input type="checkbox"/> OTHER (SPECIFY) _____	<input type="checkbox"/> USE ABROAD		<input type="checkbox"/> REPLACEMENT	<u>EXHIBITION</u>
<input type="checkbox"/> ALTERATION	<input type="checkbox"/> PROCESSING									
<input type="checkbox"/> REPAIR *	<input type="checkbox"/> OTHER (SPECIFY) _____									
<input type="checkbox"/> USE ABROAD										
<input type="checkbox"/> REPLACEMENT	<u>EXHIBITION</u>									

LIST ARTICLES EXPORTED

Number of Packages	Kind of Packages	Description of Articles

Signature of Owner or Agent (Print or Type and Sign)

DATE



TYPE
NAME: _____

SIGN
NAME: _____

TEL: _____

The Above Described Articles Were:

EXAMINED		LADEN under my supervision	
DATE	PORT	DATE	PORT
SIGNATURE OF CUSTOMS OFFICER		SIGNATURE OF CUSTOMS OFFICER	

CERTIFICATE ON RETURN

Duty-free entry is claimed for the described articles as having been exported without benefit of drawback and are returned unchanged except as noted: (use reverse if needed)

IMPORTANT: Be Sure To Mark In The Body Of Your Air Waybill Or Bill Of Lading As Follows:



U.S. CERTIFICATE OF REGISTRATION FORM 4455 ATTACHED. GOODS MUST BE EXAMINED BY U.S. CUSTOMS PRIOR TO EXPORT FROM THE U.S.A. AND CERTIFIED COPIES MUST BE GIVEN TO GES AT SHOW SITE.

If your list of goods exceeds the available space, prepare your list (as above) on a separate sheet and mark this form "exhibition material as per attached". Please attach a copy of your list to each copy of the 4455 forms.

Signature of Owner or Agent (Print or Type and Sign)

DATE:



NOTE: Certifying officers shall draw lines through all unused spaces with ink or indelible pencil.

CUSTOMS FORM 4455

INSTRUCTIONS FOR COMPLETION OF FCC FORM 740

This form must be completed for each radio frequency device, as defined in 47 U.S.C. 302 and 47 C.F.R. 2.801, which is imported into the Customs territory of the United States. The original shall be filed with the U.S. Customs Service on or before the date the shipment is delivered to a U.S. port of entry.

The completed form must accompany each such entry.

The following are typical examples of devices that require the use of FCC Form 740: radio and TV receivers, converters, transmitters, transmitting devices, radio frequency amplifiers, microwave ovens, industrial heaters, ultrasonic equipment, transceivers, and computers.

Marketing, as used in this form (and 47 C.F.R. 2.1201 et seq.), means sale or lease (including advertising for sale or lease, or display at a trade show) or import, ship or distribute for the purpose of selling or leasing or offering for sale or lease.

Limited quantities, as used in this form, are the number specified in 47 C.F.R. 2.1204(a)(3). Waivers of this limit are infrequently granted but may be requested from the FCC office listed in 47 C.F.R. 2.1204(a)(3)(iii). Written waiver requests must contain specific information required by that office.

Equipment imported for test, evaluation or display (see import conditions 3 or 4 of Part II of this form) may not be marketed (sold or leased, offered for sale or lease, advertised, etc.). Display of this equipment must include markings clearly indicating that the device(s) are not eligible for sale. See 47 C.F.R. 2.803 for details regarding this labeling.

Wireless telephony devices that do not have a FCC grant of equipment authorization must either comply with 47 C.F.R. 2.1204(a)(5) or 47 C.F.R. 2.803(a)(2) (e.g., Verification or Declaration of Conformity is required).

The identification (company name and model number/FCC ID) of the radio frequency device specified on the front of this form must be identical to the company name and model number/FCC ID inscribed on the device. If the device being imported requires an equipment authorization to be issued by the FCC (e.g., Certification), it is important that the name of the company, description of the device and FCC ID specified on the grant of equipment authorization agree exactly with the same information shown on the front of this form. Any discrepancy between the information on this form and the FCC grant of equipment authorization may result in unnecessary delays, additional expense, or enforcement action.

FCC Form 740 may be reproduced provided the following conditions are met (see 47 C.F.R. 0.409, Commission Policy on Private Printing of FCC Forms.) Some of the conditions are listed below:

1. That private companies reproducing the form use a printing process resulting in a product that is comparable to the original document;
2. That private companies reproducing the form refrain from including therein or attaching thereto any advertising matter or deleting any material from the form;
3. That private companies reproducing the form exercise care that the form being reproduced or distributed is the current edition presently used by the FCC for the type of application involved: such private company to be advised that, though the Commission will endeavor to keep the public advised of revisions of the form, it cannot assume responsibility to the extent of eliminating any element or risk against overstocking, etc.

PAPERWORK REDUCTION ACT STATEMENT AND PRIVACY ACT STATEMENT

The solicitation of information requested on this form is authorized by the Communications Act of 1934, as amended. The information collected will be used to ascertain whether equipment authorization is required, and if so, whether or not it has been granted. If all the information is not provided the importation of this or other shipments may be delayed or prevented. Accordingly, every effort should be made to provide all necessary information. Your response is required to obtain a benefit.

Public reporting for this collection of information is estimated to average .04 seconds per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, should be sent to the Federal Communications Commission, Performance and Evaluations and Records Management, Washington, DC 20554, Paperwork Reduction Project (3060-0059) DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. Individuals are not required to respond to a collection of information unless it displays a currently valid OMB control number.

THE FOREGOING NOTICE IS REQUIRED BY THE PRIVACY ACT OF 1974, P.L. 93-579, DECEMBER 31, 1974, 5 U.S.C. 552A(E)(3), AND THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

**STATEMENT REGARDING THE IMPORTATION OF RADIO FREQUENCY DEVICES CAPABLE OF
CAUSING HARMFUL INTERFERENCE**

(Read instructions before completing form. Please type or print clearly in ink.)

Part I - All Blocks MUST Be Completed				
Date of Entry	Entry Number	Port of Entry ¹	Harmonized Tariff Number ²	Quantity of Item (not number of containers) ³
Please leave these fields blank.				

Device Model/Type Name or #	Trade Name	FCC ID	Description of Equipment

Manufacturer's Name and Address	Consignee's Name and Address	Importer's Name and Address

Printed or Typed Name of Importer or Consignee	Signature of Importer or Consignee	Date (Month/Day/Year)

Warning: Any person who knowingly makes a false declaration may be fined not more than \$250,000 or imprisoned not more than 5 years, or both, pursuant to 18 U.S.C. § 1001.

Part II - With Regard to the Importation of the Described Radio Frequency Device(s), I DECLARE THAT: (Place an "X" in only one box)	
<input type="checkbox"/>	1. The FCC has issued a grant of equipment authorization for the FCC ID listed above.
<input type="checkbox"/>	2. An FCC grant of equipment authorization and an FCC ID are not required, but the equipment complies with FCC technical requirements.
<input type="checkbox"/>	3. The described equipment is being imported in limited quantities for testing and evaluation for compliance with technical requirements or marketing suitability. The equipment will not be offered for sale or otherwise marketed. (See Instructions)
<input type="checkbox"/>	4. The described equipment is being imported in limited quantities for demonstration at industry trade shows and will not be offered for sale or otherwise marketed. (See Instructions)
<input type="checkbox"/>	5. The described equipment is being imported solely for export. It will not be offered for sale or otherwise marketed in the U.S.
<input type="checkbox"/>	5(a). The described equipment is a non-U.S. standard cellular phone that can only function outside of the U.S. (See Instructions)
<input type="checkbox"/>	6. The described equipment is being imported for use exclusively by the U.S. Government.
<input type="checkbox"/>	7. Three or fewer radio receivers, computers, or other unintentional radiators as defined in Part 15 of the FCC Rules, are being imported for an individual's personal use and are not intended for sale.
<input type="checkbox"/>	8. The described equipment is being imported for repair and will not be offered for sale or otherwise marketed.

1. Port of Entry Use Schedule D – Classification of U.S. Customs Districts and Ports for U.S. Foreign Trade Statistics – a four digit code i.e., New York City, NY 1001.
2. Harmonized Tariff Number – Harmonized Tariff Schedule of the United States.
3. This quantity must be total number of items, not number of containers.

<div>DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION</div> <div>DECLARATION FOR IMPORTED ELECTRONIC PRODUCTS SUBJECT TO RADIATION CONTROL STANDARDS</div>		<div>Form Approved OMB No. 0910-0025</div> <div>INSTRUCTIONS 1. If submitting entries electronically through ACS/ABI, hold FDA-2877 in entry file. Do not submit to FDA unless requested. 2. If submitting paper entry documents, submit the following to FDA: a. 2 copies of Customs Entry Form (e.g. CF 3461, CF 3461 Alt, CF 7501, etc.) b. 1 copy of FDA 2877 c. Commercial Invoice(s) in English.</div>	
U.S. CUSTOMS PORT OF ENTRY		ENTRY NUMBER	DATE OF ENTRY
NAME & ADDRESS OF MANUFACTURING SITE; COUNTRY OF ORIGIN		NAME & ADDRESS OF IMPORTER & ULTIMATE CONSIGNEE (if not importer)	
PRODUCT DESCRIPTION	QUANTITY (Items/Containers)	MODEL NUMBER(S) & BRAND NAME(S)	
<div>DECLARATION: I / WE DECLARE THAT THE PRODUCTS IDENTIFIED ABOVE: (Mark X applicable statements, fill in blanks, & sign)</div> <div><div><input type="checkbox"/> A. ARE NOT SUBJECT TO RADIATION PERFORMANCE STANDARDS BECAUSE THEY: <div><input type="checkbox"/> 1. Were manufactured prior to the effective date of any applicable standard; Date of Manufacture _____ <input type="checkbox"/> 2. Are excluded by the applicability clause or definition in the standard or by FDA written guidance. Specify reason for exclusion _____ <input type="checkbox"/> 3. Are personal household goods of an individual entering the U.S. or being returned to a U.S. resident. (Limit: 3 of each product type). <input type="checkbox"/> 4. Are property of a party residing outside the U.S. and will be returned to the owner after repair or servicing. <input type="checkbox"/> 5. Are components or subassemblies to be used in manufacturing or as replacement parts (NOT APPLICABLE to diagnostic x-ray parts). <input type="checkbox"/> 6. Are prototypes intended for on going product development by the importing firm, are labeled "FOR TEST/EVALUATION ONLY," and will be exported, destroyed, or held for future testing (i.e., not distributed). (Quantities Limited - see reverse.) <input type="checkbox"/> 7. Are being reprocessed in accordance with P.L. 104-134 or other FDA guidance, are labeled "FOR EXPORT ONLY," and will not be sold, distributed, or transferred without FDA approval.</div></div><div><input type="checkbox"/> B. COMPLY WITH THE PERFORMANCE STANDARDS WHICH ARE APPLICABLE AT DATE OF MANUFACTURE AND THAT A CERTIFICATION LABEL OR TAG TO THIS EFFECT IS AFFIXED TO EACH PRODUCT. COMPLIANCE DOCUMENTED IN: <div><input type="checkbox"/> 1. Last annual report or Product/Initial report ACCESSION NUMBER of Report _____ Name of MANUFACTURER OF RECORD (Filed report with FDA/CDRH) _____ <input type="checkbox"/> 2. Unknown manufacturer or report number; State reason: _____</div></div><div><input type="checkbox"/> C. DO NOT COMPLY WITH PERFORMANCE STANDARDS; ARE BEING HELD UNDER A TEMPORARY IMPORT BOND; WILL NOT BE INTRODUCED INTO COMMERCE; WILL BE USED UNDER A RADIATION PROTECTION PLAN; AND WILL BE DESTROYED OR EXPORTED UNDER U.S. CUSTOMS SUPERVISION WHEN THE FOLLOWING MISSION IS COMPLETE: <div><input type="checkbox"/> 1. Research, Investigations/Studies, or Training (attach Form FDA 766) <input type="checkbox"/> 2. Trade Show/Demonstration; List dates & use restrictions _____</div></div><div><input type="checkbox"/> D. DO NOT COMPLY WITH PERFORMANCE STANDARDS; ARE HELD AND WILL REMAIN UNDER BOND; AND WILL NOT BE INTRODUCED INTO COMMERCE UNTIL NOTIFICATION IS RECEIVED FROM FDA THAT PRODUCTS HAVE BEEN BROUGHT INTO COMPLIANCE IN ACCORDANCE WITH AN FDA APPROVED PETITION. (See Form FDA 766.) <div><input type="checkbox"/> 1. Approved Petition is attached. <input type="checkbox"/> 2. Petition Request is attached. <input type="checkbox"/> 3. Request will be submitted within 60 days.</div></div></div>			
<div>WARNING: Any person who knowingly makes a false declaration may be fined not more than \$10,000 or imprisoned not more than 5 years or both, pursuant to Title 18 U.S.C. 1001. Any person importing a non-compliant electronic product may also be subject to civil penalties of \$1000 per violation, up to a maximum \$300,000 for related violations pursuant to Title 21 U.S.C. 360pp.</div>		<div>SIGNATURE OF IMPORTER OF RECORD</div> <div>NAME AND TITLE OF RESPONSIBLE PERSON</div>	
<div>Public reporting burden for this collection of information is estimated to average 0.2 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Food and Drug Administration CDRH (HFZ-342) 2094 Gaither Road Rockville, MD 20850 An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.</div>			

INSTRUCTIONS TO IMPORTERS/BROKERS OF ELECTRONIC PRODUCTS

PURPOSE: The Form FDA 2877 must be completed for electronic products subject to Radiation Control Standards (21 CFR 1010 and 1020-1050) prior to entry into the United States. The local Food and Drug Administration (FDA) district office will review the declaration and notify the importer/agent if the products may be released into U.S. commerce or if they must be held under bond until exported, destroyed, or reconditioned. Until the shipment is released, it may be subject to redelivery for FDA examination.

PAPER OR ELECTRONIC SUBMISSION: Paper entries may be made by submitting the signed original FDA 2877 along with U.S. Customs forms to the local FDA district office; if electronic products are given a MAY PROCEED, a signed copy of CF 3461 will be returned, or if not given a MAY PROCEED, a FDA Notice of Action will be issued. For electronic entries, follow U.S. Customs Service ACS/ABI format and procedures, supported by a signed copy of this form or similar letter. Multiple entries of the same product and model families that are filed electronically may be supported by one form dated not more than 12 months previously.

DECLARATION: Select A, B, C, or D and then select the appropriate number; fill in requested information and sign. For electronic entries, AofC (affirmation of compliance) = RA#, RB#, RC#, or RD# (e.g., Radiation Declaration A5 = RA5). **Transmit model number using AofC code MDL and transmit brand name using FDA line level brand name field. If RA3 or RA6 is selected, you must transmit quantity (number of units) using the Quantity and Unit of Measure Pairs at the FDA line level.**

DECLARATION A: Importers should be prepared to demonstrate compliance to or non-applicability of FDA standards, regulations, or guidance. Components or sub-assemblies must be non-functioning. Products being reprocessed must be exported by the importer, without intermediate transfer of ownership. For RA3 the quantity limit is 3 and for RA6 the limit = 50 units TV products, microwave ovens, and Class 1 laser products limit = 200 units CD-ROM and DVD (digital versatile disc) laser products; see May 14, 1997, notice to industry issued by the Center for Devices and Radiological Health (CDRH).

DECLARATION B: If declaration RB1 is selected, provide the FDA Establishment Identifier (FEI) of the manufacturer who filed the radiation product/abbreviated report to FDA, CDRH, Rockville, Maryland. To transmit the accession number of that report use AofC code ACC. If the manufacturer cannot be determined or located, the importer must be able to provide evidence showing a certification (certifi.) label on each product and state reason: returned to orig exporter or certifi. label evidence. The new AofC codes (RB1, RB2) for this declaration will not be activated until a process is made available to determine the FEI of the responsible firm. Continue to use RAB in electronic transmission until the FEI query is available and industry is notified of its availability.

DECLARATION C: Noncompliant products may be imported only for research, investigations/studies, demonstration or training. They should be used only by trained personnel and under controlled conditions to avoid unnecessary radiation exposure. Product(s) will be detained by the local FDA district office. Since product(s) for which "C" Declarations are made will be under Temporary Import Bond (TIB) or equivalent, ultimate disposition is limited to export or destruction under U.S. Customs supervision when the purpose has been achieved or the length of time stated has expired. For purposes other than demonstration, the Form FDA 766, outlining protections, must be approved by FDA prior to use. The importer/broker must include with the FDA 766:

1. A full description of the subject electronic product(s).
2. The purpose for which the product(s) is being imported.
3. How the product(s) will be used.
4. Where the product(s) will be located.
5. The approximate length of time and dates the product(s) will be in this country.

For product(s) being used for trade shows/demonstrations, list the dates and use restrictions (Form FDA 766 is not required). A sign stating that the product does not comply with FDA performance standards must be displayed and viewable at all times during the use of product(s). All medical products, cabinet x-ray, or Class IIIb and IV lasers may NOT operate (turn on product(s)) at trade shows.

DECLARATION D: Noncompliant products must be brought into compliance with standards under FDA supervision and following a plan approved by FDA. The plan, documented on the Form FDA 766, must address technical requirements, labeling, and reporting. Some plans may need approval by both the CDRH and the local FDA district office. Use of this declaration is limited to occasional shipments; ongoing reconditioning is considered manufacturing that is handled through other means. Product(s) will be detained by the local FDA district office. An FDA 766 must be filed indicating the procedure intended to bring the product into compliance. This procedure will include a satisfactory corrective action plan and/or a product report. The FDA 766 must include all of the information requested under Declaration C. The approximate length of time will be for the amount of time needed to bring product(s) into compliance. Declaration D is also made for failure to provide reports, failure to certify, etc.

If an importer/broker intends to import equipment into the United States for purposes of research, investigation, studies, demonstrations, or training but also wishes to retain the option of bringing the product into compliance with the performance standard, check Declarations C and D on the FDA 2877 and insert the word "or" between the Affirmations. Note: The U.S. Customs Service will treat this entry as a "D" Declaration for purposes of duty. Such requests must be made on the FDA 766; include Items 1, 2, and 3 under Declaration C, a statement of the need to use the option "C" or "D" Declaration, a statement of how the product(s) will be brought into compliance and the approximate length of time necessary to evaluate or demonstrate the product(s) and the time necessary to bring the product(s) into compliance (both actions must be accomplished within the period of time granted by FDA). For electronic entries select Declaration RD3.

Ultimately, product(s) must be brought into compliance with the applicable standard in accordance with a corrective action plan which has been approved by the FDA. If the product(s) are not brought into compliance within the allotted time frame of the approved application and an extension is not requested of, or granted by, the FDA, the local FDA district office shall refuse entry on the shipment and require the product(s) to be either exported or destroyed under U.S. Customs supervision.

If additional guidance is needed, please contact your local FDA district office or consult the following FDA web pages: www.fda.gov/cdrh, www.fda.gov/ora/hier/ora_field_names.txt, and www.fda.gov/ora/compliance_ref/rpm_new2/contents.html.

DECLARATION OF MANUFACTURER, PRODUCER EXPORTER, OR IMPORTER OF TEXTILES & TEXTILE PRODUCTS

I, _____ (Name), declare that the articles described below and covered by the entry to which this Declaration relates were subjected to manufacturing or processing operations in, and/or incorporate materials originating in, the foreign country* or countries identified below. I declare that the information set forth in this declaration is correct and true to the best of my information, knowledge and belief.

- A
B
C
D

(Country*)
(Country*)
(Country*)
(Country*)
- E
F
G
H
I

(Country*)
(Country*)
(Country*)
(Country*)
(Country*)
- Etc.

Manufacturing and/or Processing Operations			Materials	
Marks of Identification, Nos.	Declaration of Article and Quantity	Description of manufacturing and /or Processing Operations and Country* of Manufacture and/or Processing	Date of Export	Description of Material and Country* of Production

Date: _____ Signature: _____

Name: _____ Title: _____

Company: _____ Address: _____

*Country when used in this declaration includes territories and insular possessions of the United States. The country will be identified in the above declaration by the alphabetical designation appearing next to the named country.



#25, 5808 76th Ave SE
Calgary, AB T2C 5L8
Tel: 403.243.2212
Fax: 403.243.3868
Toll Free: 1.800.636.8235
Email: exhibitorserviceswest@ges.com
Website: www.ges.com/ca

Customs & Logistics Specialists



Private Vehicle Shipment Information Form



NAME OF SHOW	INTERNATIONAL MACHINERY SHOW		
EXHIBITING COMPANY	ABC MACHINE COMPANY		
ADDRESS & TELEPHONE	ROYAL YORK HOTEL		TEL: 416-368-2511
BOOTH NUMBER	1430		
PERSON IN CHARGE	BILL SMITH		
VEHICLE DRIVER'S NAME	BILL SMITH		
VEHICLE LICENSE PLATE NUMBER AND STATE	74326	STATE: FLORIDA	
SHIPMENT DESCRIPTION	1 - PORTABLE DISPLAY CANISTER		
	1 - BOX PRINT LITERATURE		
	2 - 100 lbs		
SHIPMENT PIECES & WEIGHT			
VALUE OF SHIPMENT	\$ 1,500.00	Check One:	<input checked="" type="checkbox"/> U.S. \$ <input type="checkbox"/> Cdn. \$
BORDER CROSSING POINT	FORT ERIE		
DATE AND TIME OF BORDER CROSSING	APRIL 17, 2000 4:30 pm		
NAME OF PERSON COMPLETING FORM	BILL SMITH		TEL: 212-286-2140

**IMPORTANT – PAPERWORK MUST BE PREPARED IN ADVANCE FOR BORDER-CROSSING
PLEASE COMPLETE AND FAX ASAP TO 403.243.3868 – ATTN: CUSTOMS DEPARTMENT**