



customs



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
- 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 consultation to assist exhibitors with their specific needs

On-Site Representation

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

Simplified Ordering

To learn more, connect with the GES Customs team at:

- Online: www.ges.com/ca
- Email: torontocl@ges.com
- Phone: 905.283.0500 or Toll-Free 1.877.437.4247

** Customs Brokerage services provided by North American Logistics Services Inc.*



CUSTOMS ORDER FORM

5675 McLaughlin Road, Mississauga, Ontario, L5R 3K5 Tel: 905.283.0500 Toll Free: 1.877.437.4247
torontocl@ges.com www.ges.com/ca

Please accept this completed form as authorization for GES to provide customs clearance services.*
This completed form must be submitted to GES with a commercial invoice.

Section 1: Customer Information

COMPANY NAME: _____			
ADDRESS: _____	CITY: _____	PROV/STATE: _____	POSTAL/ZIP: _____
CONTACT: _____	PHONE: _____	E-MAIL: _____	

Section 2: Shipment Information

BOOTH NAME: _____		BOOTH #: _____	
VENUE NAME: Metro Toronto Convention Centre - North Building, Hall A		EVENT NAME: Cantech Investment Conference	
SHIPMENT DATE: _____	SHIPPING FROM (CITY): _____	# CARTONS/CRATES/ETC: _____	
CARRIER NAME: <input type="checkbox"/> GES <input type="checkbox"/> OTHER: _____	ESTIMATED TOTAL WEIGHT: _____		<input type="checkbox"/> LBS. <input type="checkbox"/> KGS.
ON-SITE CONTACT: _____	PHONE: _____	E-MAIL: _____	

Section 3: Return Shipment Consignment Information

COMPANY NAME: _____		U.S. TAX # / EIN: _____	
CARRIER NAME: <input type="checkbox"/> GES <input type="checkbox"/> OTHER: _____			
DELIVERY ADDRESS: _____	CITY: _____	PROV/STATE: _____	POSTAL/ZIP: _____
CONTACT NAME: _____	PHONE: _____	E-MAIL: _____	

Section 4: Billing & Payment Information

COMPANY: _____	I hereby authorize use of the following credit card for payment of services relative to this order form. <input type="checkbox"/> MASTER CARD <input type="checkbox"/> VISA <input type="checkbox"/> AMEX <table border="1" style="width: 100%; height: 20px;"> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table> EXPIRY DATE: ____ / ____ CVV: _____ CARDHOLDER NAME: _____ CARDHOLDER SIGNATURE: _____										
ADDRESS: _____											
CITY: _____ PROV/STATE: _____ POSTAL/ZIP: _____											
CONTACT NAME: _____											
E-MAIL: _____ PHONE: _____											

HST #: 104060264RT001

Terms & Conditions

GES assumes no responsibility for shipments left in booth by the 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 exhibitor's material after same has been delivered to the 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 loose, 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.



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

Signature

Date

CANADA CUSTOMS INVOICE / FACTURE DES DOUANNES CANADIENNES

<p>1 Vendor (Name and Address) / Vendeur (Nom et Adresse)</p> <p>ABC MACHINE COMPANY 100-5TH AVENUE NEW YORK, NY 10012-1010</p>	<p>2 Date of Direct Shipment to Canada Date d'expédition directe vers le Canada MARCH 3, 2001</p> <p>3 Other References (Include Purchaser's Order No.) Autres références (inclure le no de commande de l'acheteur) 31-2293941 (COMPANY IRS#)</p>
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<p>4 Consignee (Name and Address) / Destinataire (Nom et Adresse)</p> <p>ABC MACHINE COMPANY / BOOTH 210 INTERNATIONAL MACHINERY SHOW C/O METRO TORONTO CONVENTION CENTRE SOUTH BLDG 222 BREMNER BLVD TORONTO, ON M5V 2E6</p>	<p>5 Purchaser's Name and Address (if other than Consignee) Nom et Adresse de l'acheteur (s'il diffère du destinataire) NO SALE INVOLVED</p> <p>6 Country of Transshipment / Pays de transbordement N/A</p> <p>7 Country of Origin of Goods Pays d'origine des marchandises U.S.A.</p> <p style="font-size: small;">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</p>
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<p>VII. 1 Is this a related company transaction? Est-ce que les compagnies sont liées entre elles?</p> <p>YES <input type="checkbox"/> OUI NO <input type="checkbox"/> NON</p>	<p>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.)</p>
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<p>8 Transportation: Give Mode and Place of Direct Shipment to Canada Transport: Préciser mode et lieu d'expédition directe vers le Canada</p> <p>GES LOGISTICS NEW YORK, NY</p>	<p>10 Currency of Settlement / Devises du paiement USD</p>
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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	\$3,000.00
1 PC	CRATE-COMPUTER MONITOR (CERTIFICATE OF REGISTRATION ATTACHED)	1	\$ 500.00	\$ 500.00
1 PC	CARTON-ADVERTISING LITERATURE	1,000	\$ 0.10	\$ 100.00
1 PC	CARTON-PLASTIC KEY CHAINS / BOOKS	50	\$ 0.50	\$ 25.00

<p>XI.1 Total Number of Pieces / Nombre total de pièces 6</p>		
<p>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</p> <p>Commercial Invoice No. / No. De la facture commerciale</p>	<p>16. Total Weight / Poids total 1,500bs. <input checked="" type="checkbox"/>kgs.</p> <p>Net. Weight / Gross Wt./ Brut N/A 1,500 lbs</p>	<p>17. Invoice Total / Total de la facture</p>

<p>19 Exporter's Name and Address (if other than Vendor) Nom et adresse de l'exportateur (s'il diffère du vendeur)</p>	<p>20 Originator (Name and Address) Expéditeur d'origine (Nom et adresse) ABC MACHINE COMPANY 100-5TH AVENUE NEW YORK, NY 10012-1010</p> <p>Contact: BILL SMITH</p> <p>Tel: 212-268-2140 Fax: 212-268-2511</p>
<p>21 Departmental Ruling (if applicable) Decision ministérielle (s'il y a lieu)</p> <p>N/A</p>	

