

**CONSULT**EXPO

ConsultExpo Event Services Inc.

Tel: 514-482-8886 ext. 1

johns@consultexpoinc.com

Fax: 888-629-9008

www.consultexpoinc.com**CONSULTEXPO CUSTOMS BROKERAGE SERVICES**

ConsultExpo Inc., Customs services has been selected as official Customs Broker for the **ATCE 2019 SPE ANNUAL TECHNICAL CONFERENCE & EXHIBITION** being held in Calgary at the BMO Centre at Stampede Park. ConsultExpo will be pleased to assist with all your customs needs. For your convenience, you may download their forms from <https://www.consultexpoinc.com/forms/>. Their forms are also included in this exhibitor manual. For a personalized service, please contact:

John Santini, Director of Operations**Tel: 514-482-8886 ext. 1****Mobile: 514-709-0781****Fax : 888-629-9008****Email: johns@consultexpoinc.com**

Please complete the **ConsultExpo Order Form** and **Canada Customs Invoice** and return to them by email or fax **prior** to shipping and provide them with your **shipment's tracking number**.

****If shipping via your own carrier or via courier please note that you will still require customs clearance services****. 3 copies of the Canada Customs Invoice must accompany your materials. Please affix to your display materials and include the words: **Notify ConsultExpo for Customs Clearance**
info@consultexpoinc.com

PRIVATE VEHICLE

For Exhibitors who plan on driving with their display material it is important to notify ConsultExpo a minimum of four weeks in advance, so the necessary documentation can be provided to you for customs clearance.

We look forward to assisting with your customs and shipping needs! The ConsultExpo Inc. Team

CUSTOMS & TRANSPORTATION ORDER FORM

Fax or Email Forms to: 1-888-629-9008 - info@consultexpoinc.com - Tel:514-482-8886

Show / Event Name:		Show / Event Dates:
Services Required (Please select one):		
Customs Clearance and Shipping Services	Custom Clearance Only	Shipping Only

SHIPPER INFO (SHIPPING FROM)		
Company Name:		
IRS#		
Address:		
City:	State/Prov:	Zip/Post:
Contact Name:	Tel:	
Email:	Fax:	

DELIVERY INFO (GOING TO)		
Company Name:		Booth#
Venue Name:		
Address:		
City:	State/Prov:	Zip/Post:
On-site Contact Name:	Cell:	
Email:		

RETURN SHIPPING INFORMATION			SAME AS SHIPPER
Company Name:			
IRS#			
Address:			
City:	State/Prov:	Zip/Post:	
Contact Name:	Tel:		
Email:	Fax:		

INVOICING INFORMATION			SAME AS SHIPPER
Company Name:			
IRS#			
Address:			
City:	State/Prov:	Zip/Post:	
Contact Name:	Tel:		
Email:	Fax:		

TERMS OF PAYMENT AND DEPOSIT - (MANDATORY INFORMATION)			
Charge to:	VISA	MASTERCARD	AMEX
Cardholder Name:	Title:		
Credit Card Number:	CVV:	Expiry Date:	
<small>I hereby authorize use of this card for payment of services relative to this form. I understand that declined credit cards are subject to a 20% surcharge (minimum \$50.00).</small>			
Cardholder Signature:	Date:		

SHIPMENT INFORMATION	
Carrier Name (If not using ConsultExpo):	Carrier Contact Name:
Carrier Contact Tel:	Carrier Contact Email:
Pick-up Date:	Hours of Operation:
Delivery Date:	Delivery Time:

# of Pieces	Type of Pieces (Box / Crate / Skids, etc.)	Length (Inches) X Width (Inches) X Height (Inches)		Per Piece (LBS)	Total (LBS)
		X X	@ Weight (LBS) Each		
		X X	@ Weight (LBS) Each		
		X X	@ Weight (LBS) Each		
		X X	@ Weight (LBS) Each		
		X X	@ Weight (LBS) Each		
		X X	@ Weight (LBS) Each		
Total Pieces				Total Weight	

Requested Service Level:	Air Freight	2nd Day Expedited	Ground / Truck
Additional Services Required:	Lift Gate	Inside Pick up / Delivery	Special Service (Please Specify) Check to <u>Decline</u> Cargo Insurance (see below)

Cargo Insurance / Declared Value
 Unless declined, cargo insurance will apply at the rate of \$1.25 per \$100.00 in value (min \$125) per shipment with a \$1000 deductible applicable / maximum liability limit is \$250,000CAD. Coverage is limited to the portion of the shipment lost or damaged. Subject to the terms and conditions of liability for loss/damage, stated below. Should you opt to decline cargo insurance through ConsultExpo, this shipment will only be covered under basic carrier liability, directly with the carrier. In this case maximum liability (declared value for carriage of this shipment) is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged, but not less than \$50.00 per shipment.

Terms and conditions
 This order is placed with the specific understanding that we hereby release ConsultExpo Inc. and/or agents from all liability for loss, damage and/or theft to our merchandise and property, no matter how caused, and we have insured all such properties being handled; 1) ConsultExpo Inc. shall not be responsible for damage to uncrated materials, improperly packaged goods or concealed damage. 2) ConsultExpo Inc. will not be responsible for any loss/damage/delay due to fire, acts of god, strikes, lock outs of any kind beyond its control. 3) ConsultExpo Inc. liability is outlined in the above Cargo Insurance / Declared Value section. We are self-insured, or have made other appropriate insurance arrangements and paid applicable charges. 4) ConsultExpo Inc. shall not be liable to any extent whatsoever for the actual, potential or assumed losses or profits or revenues, or for any collateral costs which may result from any loss or damage to materials. 5) All hazardous materials have been declared, and we abide by all Federal, Provincial, State and Local laws. ConsultExpo Inc shall not be responsible for AMPS penalties.

CLIENT SIGNATURE	
I have Read and agree to the terms of this contract.	
Signature:	
Name:	
Title:	
Date:	

ACCEPTED BY CONSULTTEXPO	
Signature:	
Name:	
Title:	
Date:	



Show / Event Name: INT'L MUPPET ASSOCIATION ANNUAL MEETING 2022

Show / Event Dates: SEPTEMBER 22-25

Services Required (Please select one):

☒ Customs Clearance and Shipping Services

☐ Custom Clearance Only

☐ Shipping Only

SHIPPER INFO (SHIPPING FROM)

Company Name: "EXHIBITING COMPANY NAME"
IRS# 12-3456786
Address: 123 SESAME STREET

City: LANGHORNE State/Prov: PA Zip/Post: 19047
Contact Name: MARY PARKER Tel: 709-888-0970
Email: MPARKER@EMAIL.COM Fax: 709-888-7788

DELIVERY INFO (GOING TO)

Company Name: "EXHIBITING COMPANY NAME" Booth# 1232
Venue Name: EVENT FACILITY NAME
Address: 123 CONVENTION CENTER WAY

City: MONTREAL State/Prov: QC Zip/Post: H1X 1X1
On-site Contact Name: MARY PARKER Cell: 555-222-6655
Email: MPARKER@EMAIL.COM

RETURN SHIPPING INFORMATION

☒ SAME AS SHIPPER

Company Name: "EXHIBITING COMPANY NAME"
IRS# 12-3456786
Address: 123 SESAME STREET

City: LANGHORNE State/Prov: PA Zip/Post: 19047
Contact Name: MARY PARKER Tel: 709-888-0970
Email: MPARKER@EMAIL.COM Fax: 709-888-7788

INVOICING INFORMATION

☒ SAME AS SHIPPER

Company Name: "EXHIBITING COMPANY NAME"
IRS# 12-3456786
Address: 123 SESAME STREET

City: LANGHORNE State/Prov: PA Zip/Post: 19047
Contact Name: MARY PARKER Tel: 709-888-0970
Email: MPARKER@EMAIL.COM Fax: 709-888-7788

TERMS OF PAYMENT AND DEPOSIT - (MANDATORY INFORMATION)

Charge to: ☒ VISA ☐ MASTERCARD

Cardholder Name: MARY PARKER

Title: YOUR TITLE

Credit Card Number: XXXX XXXX XXXX XXXX

CVV: xxx

Expiry Date: MM/DD

I hereby authorize use of this card for payment of services relative to this form. I understand that declined credit cards are subject to a 20% surcharge (minimum \$50.00).

Cardholder Signature:

Date:

SHIPMENT INFORMATION

Carrier Name (If not using ConsultExpo): CONSULTXPO INC

Carrier Contact Name: COORDINATOR NAME

Carrier Contact Tel: 514-709-0781

Carrier Contact Email:

Pick-up Date: 11/12/2022

Hours of Operation: 8am - 5pm

Delivery Date: 09/22/2022

Delivery Time: 8am

# of Pieces	Type of Pieces (Box / Crate / Skids, etc.)	Length (Inches)	X	Width (Inches)	X	Height (Inches)		Per Piece (LBS)	Total (LBS)
5	cases	44	X	15	X	15	@ Weight (LBS) Each	100	500
			X		X		@ Weight (LBS) Each		
			X		X		@ Weight (LBS) Each		
			X		X		@ Weight (LBS) Each		
			X		X		@ Weight (LBS) Each		
5	Total Pieces							Total Weight	500

Requested Service Level:

☐ Air Freight

☐ 2nd Day Expedited

☒ Ground / Truck

Additional Services Required:

☐ Lift Gate

☐ Inside Pick Up / Delivery

☐ Special Service (Please Specify)

Cargo Insurance / Declared Value

This shipment is covered under basic carrier liability, directly with the carrier. Maximum liability (declared value for carriage of this shipment) is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged, but not less than \$50.00 per shipment UNLESS additional Cargo Insurance has been arranged with ConsultExpo Inc. Subject to the terms and conditions of liability for loss/damage, stated below. Please contact ConsultExpo Inc. for more information on Cargo Insurance.

Terms and conditions

This order is placed with the specific understanding that we hereby release ConsultExpo Inc. and/or agents from all liability for loss, damage and/or theft to our merchandise and property, no matter how caused, and we have insured all such properties being handled: 1) ConsultExpo Inc. shall not be responsible for damage to uncrated materials, improperly packaged goods or concealed damage. 2) ConsultExpo Inc. will not be responsible for any loss/damage/delay due to fire, acts of god, strikes, lock outs of any kind beyond its control. 3) ConsultExpo Inc. liability is outlined in the above Cargo Insurance / Declared Value section. We are self-insured, or have made other appropriate insurance arrangements and paid applicable charges. 4) ConsultExpo Inc. shall not be liable to any extent whatsoever for the actual, potential or assumed losses or profits or revenues, or for any collateral costs which may result from any loss or damage to materials. 5) All hazardous materials have been declared, and we abide by all Federal, Provincial, State and Local laws. ConsultExpo Inc shall not be responsible for AMPS penalties.

CLIENT SIGNATURE I have Read and agree to the terms of this contract.

Signature:

Name: MARY PARKER

Title: PRESIDENT

Date: 08/15/2022

ACCEPTED BY CONSULTXPO

Signature:

Name:

Title:

Date:



CANADA CUSTOMS INVOICE
FACTURE DES DOUANES CANADIENNES

PROTECTED **B** when completed
PROTÉGÉ une fois rempli

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 n° 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, PRÉCISEZ LEUR PROVENANCE EN 12.	
8. Transportation: Give mode and place of direct shipment to Canada Transport : Précisez mode et point d'expédition directe vers le Canada		9. Conditions of sale 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.)	
		10. Currency of settlement - Devises du paiement	
11. Number of packages Nombre de colis	12. Specification of commodities (kind of packages, marks and numbers, general description and characteristics, i.e., grade, quality) Désignation des articles (nature des colis, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité)	13. Quantity (state unit) Quantité (précisez l'unité)	Selling price - Prix de vente
			14. Unit price Prix unitaire
			15. Total
18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box Si tout renseignement relativement aux zones 1 à 17 figure sur une ou des factures commerciales ci-attachées, cochez cette case Commercial Invoice No. - N° de la facture commerciale		16. Total weight - Poids total Net Gross - Brut	
		17. Invoice total Total de la facture	
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. Agency ruling (if applicable) - Décision de l'Agence (s'il y a lieu)		22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cochez cette case	
23. If included in field 17 indicate amount: Si compris dans le total à la zone 17, précisez :		24. If not included in field 17 indicate amount: Si non compris dans le total à la zone 17, précisez :	
(i) Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada		(i) Transportation charges, expenses and insurance to the place of direct shipment to Canada Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada	
(ii) Costs for construction, erection and assembly incurred after importation into Canada Les coûts de construction, d'érection et d'assemblage après importation au Canada		(ii) Amounts for commissions other than buying commissions Les commissions autres que celles versées pour l'achat	
(iii) Export packing Le coût de l'emballage d'exportation		(iii) Export packing Le coût de l'emballage d'exportation	
		25. Check (if applicable): Cochez (s'il y a lieu) :	
		(i) Royalty payments or subsequent proceeds are paid or payable by the purchaser Des redevances ou produits ont été ou seront versés par l'acheteur	
		(ii) The purchaser has supplied goods or services for use in the production of these goods L'acheteur a fourni des marchandises ou des services pour la production de ces marchandises	
Dans ce formulaire, toutes les expressions désignant des personnes visent à la fois les hommes et les femmes.			



CANADA CUSTOMS INVOICE
FACTURE DES DOUANES CANADIENNES

1. Vendor (name and address) - Vendeur (nom et adresse) "EXHIBITING COMPANY NAME" 123 SESAME STREET LANGHORNE, PA 19047 USA		2. Date of direct shipment to Canada - Date d'expédition directe vers le Canada	
4. Consignee (name and address) - Destinataire (nom et adresse) "EXHIBITING COMPANY NAME" C/O INT'L MUPPET ASSOCIATION ANNUAL MEETING 2022 EVENT FACILITY NAME 123 CONVENTION CENTER WAY MONTREAL, QC H1X 1X1		3. Other references (include purchaser's order No.) Autres références (inclure le n° de commande de l'acheteur)	
8. Transportation: Give mode and place of direct shipment to Canada Transport : Précisez mode et point d'expédition directe vers le Canada ConsultExpo Logistics INC, CHICAGO, IL		5. Purchaser's name and address (if other than consignee) Nom et adresse de l'acheteur (s'il diffère du destinataire) N/A	
		6. Country of transshipment - Pays de transbordement N/A	
		7. Country of origin of goods Pays d'origine des marchandises USA / CHINA	
		IF SHIPMENT INCLUDES GOODS OF DIFFERENT ORIGINS ENTER ORIGINS AGAINST ITEMS IN 12. SI L'EXPÉDITION COMPREND DES MARCHANDISES D'ORIGINES DIFFÉRENTES, PRÉCISEZ LEUR PROVENANCE EN 12.	
		9. Conditions of sale 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.) NO SALE INVOLVED	
		10. Currency of settlement - Devises du paiement USD	
11. Number of packages Nombre de colis	12. Specification of commodities (kind of packages, marks and numbers, general description and characteristics, i.e., grade, quality) Désignation des articles (nature des colis, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité)	13. Quantity (state unit) Quantité (précisez l'unité)	14. Unit price Prix unitaire
5	PLASTIC CRATES CONTAINING BOOTH STRUCTURE - MADE IN USA LITERATURE - MADE IN USA KEYCHAINS - MADE IN CHINA	5 1000 50	\$1,000.00 \$0.10 \$0.50
		15. Total \$5,000.00 \$100.00 \$25.00	
18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box Si tout renseignement relativement aux zones 1 à 17 figure sur une ou des factures commerciales ci-attachées, cochez cette case Commercial Invoice No. - N° de la facture commerciale		16. Total weight - Poids total Net Gross - Brut 500	
		17. Invoice total Total de la facture \$5,125.00	
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) "EXHIBITING COMPANY NAME" 123 SESAME STREET LANGHORNE, PA	
21. Agency ruling (if applicable) - Décision de l'Agence (s'il y a lieu)		22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cochez cette case	
23. If included in field 17 indicate amount: Si compris dans le total à la zone 17, précisez : (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada (ii) Costs for construction, erection and assembly incurred after importation into Canada Les coûts de construction, d'érection et d'assemblage après importation au Canada (iii) Export packing Le coût de l'emballage d'exportation		24. If not included in field 17 indicate amount: Si non compris dans le total à la zone 17, précisez : (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada (ii) Amounts for commissions other than buying commissions Les commissions autres que celles versées pour achat (iii) Export packing Le coût de l'emballage d'exportation	
		25. Check (if applicable): Cochez (s'il y a lieu) : (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser Des redevances ou produits ont été ou seront versés par l'acheteur (ii) The purchaser has supplied goods or services for use in the production of these goods L'acheteur a fourni des marchandises ou des services pour la production de ces marchandises	

Dans ce formulaire, toutes les expressions désignant des personnes visent à la fois les hommes et les femmes.



Official Broker Customs Broker for the
ATCE 2019 SPE ANNUAL TECHNICAL
CONFERENCE & EXHIBITION

ATTN: EXHIBITORS

FAQ's About Sending Exhibitor Material to Calgary:

Question: Are their specific customs forms required in order to send my exhibit material to Calgary?

Answer: Yes, prior to shipping your exhibit material to Calgary please ensure to complete ConsultExpo's customs documentation (Order Form and Canada Customs Invoice) and return to the undersigned John Santini johns@consultexpoinc.com forms can be located online: <https://www.consultexpoinc.com/forms/>. Note: every new shipment sent to Calgary requires its own set of customs documents completed. John Santini will gladly review your customs forms for compliancy and provide a roundtrip customs quote. "3" copies of the Canada Customs Invoice must accompany your shipment. Notify your carrier that ConsultExpo is your customs broker.

Question: If I ship via a courier such as FedEx or UPS do, I still need to complete ConsultExpo's forms?

Answer: In most cases yes since all shipments entering Canada must be accompanied by a completed Canada customs invoice. ConsultExpo can guide you regarding required forms. If shipping exhibit material via courier (Fedex / UPS / DHL) please ensure to complete ConsultExpo's customs forms and provide ConsultExpo with your courier tracking number. *Notify the courier before your goods leave that ConsultExpo is your customs broker.*

Question: If you are bringing commercial goods with you via your private vehicle should I contact ConsultExpo?

Answer: Yes, please speak with ConsultExpo ahead for time so they can prepare you for crossing the border with exhibit material.

We highly encourage you to speak with John Santini to receive instructions and guidance *prior* to sending your material. For a personalized service please contact:

John Santini
Director of Operations



CONSULTEXPO

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