

### From your door - to the floor - and back

# Any Location. Any Mode. Any Service Level.

Allow the GES/ConsultExpo Logistics team to skillfully and efficiently manage the shipping and logistics process for you. As an industry leader, GES is committed to providing high level service while maintaining competitive rates and to providing an expert team you can rely on.

### **Consider these advantages:**

- All-inclusive service: pick-up, warehousing, delivery, storage & outbound service.
- Advance Warehousing guarantees your shipment will arrive on-site, on time.
- Priority delivery ensures that your freight is delivered first.
- Various service options: round-trip, advance warehousing only, outbound shipping only.
- Various transport options: time-critical, expedited, international air and more.
- Eliminate additional fees charged by some carriers for trade show deliveries.
- Avoid long wait times at the docks. Maximize your set-up time.
- GES/ConsultExpo Logistics reps are on-site and at your service .

From the beginning of move-in, throughout the event and until your last shipment leaves the show floor.

## GES is the one-source solution for all of your Logistics needs.



Contact **GES/ConsultExpo Customs & Logistics** today at **ges@consultexpoinc.com** or **1(514)482-8886.** Visit the <u>www.consultexpoinc.com/ges</u> for an Online Form Submission.



#### TRANSPORTATION SERVICES ORDER FORM

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

Show / Event Dates:

#### Show / Event Name:

Services Required (Please select one): Round Trip Shipping Services

Inbound Shipping Only

**Outbound Shipping Only** 

SHIPPER INFO	(SHIPPING FROM)		DELIVERY INFO (	GOING TO)		
Company Name:		Company Name:		Booth#		
IRS#			Venue Name:			
Address:		Address:				
City:	State/Prov:	Zip/Post:	City:	State/Prov:	Zip/Post:	
Contact Name:		Tel:	On-site Contact Nam	e:	Cell:	
Email:		Fax:	Email:			

<b>RETURN SHIPPIN</b>	IG INFORMATION	SAME AS SHIPPER	INVOICING INFOR	MATION	SAME AS SHIPPER
Company Name:			Company Name:		
IRS#			IRS#		
Address:			Address:		
City:	State/Prov:	Zip/Post:	City:	State/Prov:	Zip/Post:
Contact Name:		Tel:	Contact Name:		Tel:
Email:		Fax:	Email:		Fax:

TERMS OF PAYMENT AND DEPOSIT - (MANDATORY INFORMATION)					
Charge to:	VISA	MASTERCARD	AMEX		
Cardholder Name:		Title:			
Credit Card Number:		CVV: Expiry Date:			
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% surchage (minimum \$50.00).					
Cardholder Signature: Date:					

SHIPMENT INFORMA	TION					
Carrier Name (If not using	GES ):	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 W	/idth (Inches) X Height (Inches)		Per Piece (LBS)	Total (LBS)
		Х	Х	@ Weight (LBS) Each		
		Х	Х	@ Weight (LBS) Each		
		Х	Х	@ Weight (LBS) Each		
		Х	Х	@ Weight (LBS) Each		
		Х	Х	@ Weight (LBS) Each		
		Х	Х	@ Weight (LBS) Each		
	Total Pieces				Total Weight	
Requested Service Level:	Air Freight 2nd Da	y Expedited	Ground / Truck			

Additional Services	Required:

Lift Gate Inside Pick Up / Delivery

Special Service (Please Specify)

#### Terms and conditions:

All orders are governed by GES Canada Ltd. Payment Policy and limits of Liability & Responsibility as specified in this event's Exhibitor kit. Please see the exhibitor services manual for more information. ConsultExpo Event Event Services Inc. is acting agent for GES Canada Ltd.

CLIENT SIGNATURE I have read and agree to the terms of this contract.	ACCEPTED BY GES / CONSULTEXPO
Signature:	Signature:
Name:	Name:
Title:	Title:
Date:	Date: