

## CONSULTEXPO CUSTOMS BROKERAGE & SHIPPING SERVICES CANADIAN GOLF COURSE MANAGEMENT CONFERENCE AND TRADE SHOW

ConsultExpo, has been selected as official Customs Broker / Shipping provider and will be pleased to assist all exhibitors with sending their display material to Calgary, Canada. ConsultExpo has an extensive array of customs and shipping options tailored to the exhibitions and meetings industry.

Included with their services you will have access to:

- Simple and user-friendly assistance with customs document completion
- Domestic and International air and ground shipping options available
- Return customs clearance and return shipping
- Up-to-date tracking of your shipment while in transit

Please complete the **ConsultExpo Order Form** and **Canada Customs Invoice** and return to their office *prior* to shipping. For your convenience, you may download their forms from <a href="http://consultexpoinc.com/forms/">http://consultexpoinc.com/forms/</a> or go to the following link and submit information directly online:

http://consultexpoinc.com/onlineforms/.

\*\*If shipping via your own carrier from outside of Canada, please note that you will <u>still require customs</u> <u>clearance services</u> therefore please provide ConsultExpo with your shipment's tracking number (specifically, if using a courier such as FedEx, UPS or DHL).\*\*

For a detailed round-trip custom and / or shipping estimate, please complete the **ConsultExpo Order Form** and **Canada Customs Invoice** and return to the undersigned. If you agree with the estimate, ConsultExpo will proceed with booking your shipment on the date requested.

#### HAND CARRY OR PRIVATE VEHICLE

For exhibitors who will be arriving by plane or plan on driving across the border with exhibit material, it is important to notify ConsultExpo a minimum of 2 weeks in advance, so the necessary documentation can be provided for customs clearance. For a personalized service, please contact:

For all inquiries, please contact ConsultExpo:

**Stephanie Lane** 

Cell Number: 778-229-3075

Email: <a href="mailto:stefaniel@consultexpoinc.com">stefaniel@consultexpoinc.com</a>

Fax: 888-689-9008

www.consultexpoinc.com www.consultexpoinc.com/forms/





## **CUSTOMS & TRANSPORTATION** SERVICES ORDER FORM

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

Show / Event Dates:

Show / Event Name:

Services Required (Please select one):

**Customs Clearance and Shipping Services** 

Custom Clearance Only

Shipping Only

IIPPER INFO (	SHIPPING FROM)		DELIVERY INFO	(GOING TO)	
ompany Name:			Company Name:		Booth#
S#			Venue Name:		
ddress:			Address:		
Dity:	State/Prov:	Zip/Post:	City:	State/Prov:	Zip/Pos
Contact Name:	01010/1101	Tel:	On-site Contact Na		Cell:
Email:		Fax:	Email:		

<b>RETURN SHIPPING</b>	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						
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 INFORMAT	ION									
Carrier Name (If not using (	ConsultExpo):		С	arrier Contact Na	me:					
Carrier Contact Tel:	er Contact Tel: Carrier Contact I					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)			
			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: Additional Services Required:	$=$ $\Box$	ay Expedited Pick Up / Delivery	Ground / Truc	k ce (Please Specify)	Residential Pick	Up / Delivery				

Cargo Insurance / Declared Value If specifically requested, 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 to stor damaged. Subject to the terms and conditions of lability for loss/damage, stated below. Otherwise, this shipment will 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. Shipments will not be insured absent written request and written confirmation from ConsultExpo.

#### 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 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.	ACCEPTED BY CONSULTEXPO
Signature:	Signature:
Name:	Name:
Title:	Title:
Date:	Date:



# CUSTOMS & TRANSPORTATION SERVICES ORDER FORM

						- info@consultexpo					
Show / Event Name: INT'L I Services Required (Pleases		ATION ANI	NUAL MEI	ETING 20	22 Show/E	vent Dates: SEP	TEMBER 22-2	5			
Customs Clearance		ces	Custom	Clearance	Only	🔲 Shi	pping Only				
SHIPPER INFO (SHIPPIN					ERY INFO (GO						
Company Name: "EXHIBIT		ΔME"				IBITING COMPA	Booth# 12	30			
IRS# 12-3456786				Venue N	lame: EV/ENIT	FACILITY NAME	<b>1 BOOUI</b> <i>I</i> <b>IIIIIIIIIIIII</b>	52			
Address: 123 SESAME ST	TDEET			Venue Name: EVENT FACILITY NAME Address: 123 CONVENTION CENTER WAY							
					. 123 001112	INTION GENTER					
City: LANGHORNE	State/Prov: PA Z	Zip/Post: 19	047	Citv: M	ONTREAL	State/Prov: QC	; Zip/Post: H	1X 1X1			
Contact Name: MARY PAR		-	88-0970			MARY PARKER	Cell: 555-2				
Email: MPARKER@EMAI			88-7788		MPARKER@E						
RETURN SHIPPING INF	ORMATION	🖌 SAME AS	SHIPPER	INVOIO	ING INFORM	ATION	SAME A	S SHIPPER			
Company Name: "EXHIBIT	ING COMPANY N	AME"				<b>IBITING COMPAN</b>	NY NAME"				
IRS# 12-3456786					2-3456786						
Address: 123 SESAME ST	REET			Address	: 123 SESAM	E STREET					
		Zip/Post: 19	U4 <i>1</i>	City: LA	NGHORNE	State/Prov: PA	Zip/Post: 19	9047			
Contact Name: MARY PAR	RKER 1	Tel: 709 <b>-</b> 888	-0970	Contact	Name: MARY	PARKER	Tel: 709-88	38-0970			
Email: MPARKER@EMAI	L.COM F	ax: 709 <b>-</b> 88	8-7788	Email:	/IPARKER@E	MAIL.COM	Fax: 709-8	888-7788			
TERMS OF PAYMENT A				ATION							
Charge to:	VISA				STERCARD	7					
Cardholder Name: MARY F											
Credit Card Number: XXXX		(X		Title: YOUR TITLE CVV: xxx Expiry Date: MM/DD							
I hereby authorize use of this card for payment											
Cardholder Signature:					Date:						
SHIPMENT INFORMATION	ON										
Carrier Name (If not using Co	onsultExpo): CONS	ULTEXPO	INC	Ca	rrier Contact Na	me: COORDINAT	OR NAME				
Carrier Name (If not using Co Carrier Contact Tel: 514-70	onsultExpo): CONS	ULTEXPO	INC	Ca	rrier Contact En		OR NAME				
Carrier Name (If not using Co Carrier Contact Tel: 514-70 Pick-up Date: 11/12/2022	onsultExpo): CONS 09-0781	ULTEXPO		Ca		nail:	OR NAME				
Carrier Name (If not using Co Carrier Contact Tel: 514-70	onsultExpo): CONS 09-0781	ULTEXPO	INC	Ca Ho	rrier Contact En	ail: <sup>:</sup> 8am - 5pm	OR NAME				
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Carrier Name (If not using Co Carrier Contact Tel: 514-70 Pick-up Date: 11/12/2022 Delivery Date: 09/22/2022 # of Pieces 5 5 8 Requested Service Level: Additional Services Required: Cargo Insurance / Declared Value This shipment is covered under basic carrier li part of the shipment lost or damaged, but not 1 Please contact ConsultExpo Inc. for more info The order is placed with the specific understan such properties being handled; 1) ConsultExpo due to fire, acts of god, strikes, lock outs of an arrangements and paid applicable charges. 4) damage to materials. 5) All hazardous materia CLIENT SIGNATURE 1 have Signature:	DISUITEXPO): CONS D9-0781 Type of Pieces (Box / Crate / Skids, etc.) CASES Total Pieces Air Freigh Lift Gate ability, directly with the carrier. Me ess than \$50.00 per shipment Ut rmation on Cargo Insurance. Inding that we hereby release Cor o Inc. shall not be responsible for o kinc beyond its control. 3) Coms consultExpo Inc. shall not be lia Is have been declared, and we a	t 2 aximum liability (dec NLESS additional Ce asultExpo Inc. and/o damage to uncrater sultExpo Inc. iability be to any extent wh bide by all Federal, I	ches) X Wid X X X X X X X X A A A A A A A A A A A	Ca Ho De De th (Inches) 2 15 2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3	rrier Contact En urs of Operation livery Time: 8a ( Height (Inches) ( 15 ( . ( . ( . ( . ( . ( . ( . ( .	ail: 8am - 5pm () () () () () () () () () ()	Per Piece (LBS) 100 Total Weight Total Weight utiplied by the number of fiability for loss/damage ther how caused, and we la responsible for any loss/v ve made other appropriata locsts which may result for	500 500 500			

*	Canada Border Services Agency	Agence des services frontaliers du Canada		CANADA CUSTOMS INVOICE URE DES DOUANES CANADIENNES					PROTECTED B when completed PROTEGE B une fois rempli				
	<i>,</i>		FACTORE DES	DOUANE	5 CANADI	ENNES		Page	e 1 de				
1. Vendor	(name and address) - Vene	deur (nom et adresse)		2. Date of c	lirect shipment to	o Canada - Dat	te d'expédition directe v		- ue	; -			
				<ol> <li>Other references (include purchaser's order No.) Autres références (inclure le n° de commande de l'acheteur)</li> </ol>									
4. Consig	nee (name and address) - [	Destinataire (nom et adresse)		<ol> <li>Purchaser's name and address (if other than consignee) Nom et adresse de l'acheteur (s'il diffère du destinataire)</li> </ol>									
				CONSUL	TEXPO - EA	MAIL: INF	E CONTACT: O@CONSULTE> 4-482-8886**	(POINC.(	COM				
				6. Country N/A	of transhipment -	- Pays de trans							
				Pays d'o	of origin of goods rigine des march	andises	IF SHIPMENT INCLUDES ENTER ORIGINS AGAINS SI L'EXPÉDITION COMPR DIFFÉRENTES, PRÉCISE	GOODS OF DIFF T ITEMS IN 12. END DES MARC Z LEUR PROVEN	ERENT ORIC HANDISES [ IANCE EN 12	gins D'origines 2.			
		ace of direct shipment to Canada t d'expédition directe vers le Canada		(i.e. sale Condition (p. ex. ve		nipment, léasec odalités de pai en consignatior	d goods, etc.)	lises, etc.)					
					of settlement - I		ement						
	1												
11. Number of	description and chara	nodities (kind of packages, marks and n acteristics, i.e., grade, quality) les (nature des colis, margues et numér			13. Quan (state Quan	unit)	Selling p 14. Unit price	rice - Prix de 15.	e vente Total				
packages Nombre de colis					(précisez		Prix unitaire						
		on an attached commercial invoice, che			16. Tota	l weight - Poids	s total	17. Invoic					
comme	renseignement relativement rciales ci-attachées, cochez ercial Invoice No N° de la		factures		Net		Gross - Brut	Total	de la fact	ture			
	er's name and address (if ot adresse de l'exportateur (s			20. Originato	r (name and add	lress) - Expédit	teur d'origine (nom et a	dresse)					
		sion de l'Agence (s'il y a lieu)	1	Si les zor	3 to 25 are not a nes 23 à 25 sont	sans objet, co	chez cette case						
	led in field 17 indicate amo oris dans le total à la zone 1		24. If not included in field 17 Si non compris dans le to	7 indicate amount: 25. Check (if applicable): total à la zone 17, précisez : Cochez (s'il y a lieu) :									
.,	from the place of direct shipment to Canada to the place of direct s Les frais de transport, dépenses et assurances Les frais de transport,			es, expenses and insurance shipment to Canada t, dépenses et assurances édition directe vers le Canada (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) 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 Les commissions autre pour l'achat			ssions other than buying utres que celles versées (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									
(iii)	Export packing Le coût de l'emballage d'ex	portation	(iii) Export packing Le coût de l'emballage	e d'exportation									
		Dans ce formulaire, toutes le	s expressions désignant des pe	ersonnes visent	à la fois les horr	I mes et les ferr	nmes.						

*	Canada Border Services Agency	Agence des services frontaliers du Canada	CANADA FACTURE DES	CUSTOM	PROTEC PROT	PROTECTED when completed PROTÉGÉ B une fois rempli				
			FACTORE DES	DOUANE	5 CANADI			Page 1	of de	1
1. Vendor	(name and address) - Ven	deur (nom et adresse)		2. Date of c	lirect shipment to	Canada - Da	ate d'expédition directe v	ers le Canada		-
	ITING COMPANY	NAME"								
	5AME STREET ORNE, PA			<ol> <li>Other references (include purchaser's order No.)</li> <li>Autres références (inclure le n° de commande de l'acheteur)</li> </ol>						
19047 U	•			Auteste	erences (inclure		imanue de l'acheteur)			
	,	Destinataire (nom et adresse)					r than consignee) e du destinataire)			
	ITING COMPANY	NAME" CIATION ANNUAL MEETI	NG 2022	N/A						
	FACILITY NAME									
	VENTION CENTE	R WAY								
MONTR	EAL, QC H1X 1X1			6. Country	of transhipment -	Pays de tran	sbordement			
				N/A						
				Pays d'o	of origin of goods rigine des marcha JSA / CHIN	andises	IF SHIPMENT INCLUDES ENTER ORIGINS AGAINS' SI L'EXPÉDITION COMPR DIFFÉRENTES, PRÉCISEZ	300ds of differ Titems in 12. End des Marcha Zleur Provenan	ENT ORIGI NDISES D' ICE EN 12.	ins 'Origines
8. Transp Transp	ortation: Give mode and pla ort : Précisez mode et poin	ace of direct shipment to Canada t d'expédition directe vers le Canada			ns of sale and ter , consignment sh					
	Expo Logistics INC,				ns de vente et mo ente, expédition e		aiement on, location de marchand	ises, etc.)		
	, ·,			NO SAL	E INVOLVED	>				
				10. Currency	of settlement - D	)evises du pa	iement			
11.		nodities (kind of packages, marks and r	numbers, general		13. Quant		Selling pr	ice - Prix de v	ente	
Number of packages	Désignation des artic	acteristics, i.e., grade, quality) les (nature des colis, marques et numér	ros, description générale		(state u Quant	ité	14. Unit price Prix unitaire	15.	Total	
Nombre de colis	et caractéristiques, p	. ex. classe, qualite)			(précisez	l'unite)				
5	PLASTIC CRATES	5 CONTAINING BOOTH ST	RUCTURE - MADE IN	USA	5		\$1,000.00			,000.00
	LITERATURE - M				100		\$0.10			\$100.00
	KEYCHAINS - MA	ADE IN CHINA			50	)	\$0.50			\$25.00
				•						
		l on an attached commercial invoice, ch t aux zones 1 à 17 figure sur une ou de				weight - Poic		17. Invoice t Total de		ure
	rciales ci-attachées, coche ercial Invoice No N° de la				Net		Gross - Brut 500		\$5	5,125.00
19. Exporte	er's name and address (if of	ther than vendor)		20. Originato	r (name and add	ress) - Expéc	liteur d'origine (nom et ac	dresse)		,
Nom et	adresse de l'exportateur (s	'il diffère du vendeur)		EXHIBI	TING COM	PANY NA	ME"			
				123 SES	AME STREE DRNF PA	Т				
21. Agency	ruling (if applicable) - Déci	sion de l'Agence (s'il y a lieu)		22	3 to 25 are not a	anliankla aka	al this hav	<b>b</b> 21		
			I	Si les zor	nes 23 à 25 sont	sans objet, c	ochez cette case	$\mathbf{X}$		
	ded in field 17 indicate amo pris dans le total à la zone f		24. If not included in field 17 Si non compris dans le to				(if applicable): z (s'il y a lieu) :			
	Transportation charges, ex from the place of direct shi	pment to Canada	to the place of direct s	arges, expenses and insurance ct shipment to Canada (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser						
	Les frais de transport, dépe à partir du point d'expédition	enses et assurances on directe vers le Canada	Les frais de transport, jusqu'au point d'expéd	, dépenses et a dition directe ve	ssurances rs le Canada	Ver	s redevances ou produits sés par l'acheteur	ont été ou se	ront	
(ii)	Costs for construction, ere	ction and a sembly	(iii) mounts for commiss	ons other tien	buving					
	incurred after importation i Les coûts de construction, d'assemblage après impor	nto Canada d'érection	for restored to the formation of the for	es que cel is v	erséet	L'ao ser	put haser has supplied use in the production of t cheteur a fourni des marc vices pour la production o rchandises	hese goods chandises ou o		
(iii)	Export packing Le coût de l'emballage d'e	xportation	(iii) Export packing Le coût de l'emballag	e d'exportation						
		Dans ce formulaire, toutes le	es expressions désignant des pe	ersonnes visent	à la fois les hom	mes et les fe	mmes.			