

MATERIAL HANDLING AGREEMENT

INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

BOOTH NO. _____ CIRCLE NUMBER OF SEPARATE SHIPMENTS IN BOOTH: 1 2 3 4 OR MORE DATE _____ TIME RECEIVED _____ AM PM

FROM:
 SHIPPER/EXHIBITOR _____
 BILLING ADDRESS _____
 CITY _____
 STATE _____ ZIP _____
 ATTN: _____ PHONE _____

TO:
 COMPANY NAME _____
 DELIVERY ADDRESS _____
 CITY _____
 STATE _____ ZIP _____
 ATTN: _____ PHONE _____

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE OUT DAY PLEASE SELECT ONE OF THE FOLLOWING OPTIONS:
 1 ___ RE-ROUTE VIA TRADESHOW EXPRESS' CHOICE
 2 ___ DELIVERY BACK TO WAREHOUSE AT EXHIBITOR'S EXPENSE

 SIGNATURE

SPECIAL INSTRUCTIONS _____

 CARRIER _____ PHONE _____

RE-ROUTE VIA _____ BY _____
 DATE _____ TIME _____ AM PM

METHOD NO. SHIPPING UNITS	COMMON CARRIER	VAN LINE	OTHER	AIR FREIGHT	NEXT DAY AIR WEIGHT (LB.)	DEFERRED AIR	
	DESCRIPTION OF ARTICLES, SPECIAL MARKS, AND EXCEPTIONS				CLASS	WEIGHT (LB.)	EXCEPTIONS
	Crates Exhibition Material, K.D. (wooden)					SUBJ. TO CORR.	
	Cartons (cardboard)						
	Trunks / Cases (fiber) (color) _____						
	Skids / Pallets						
	Carpets (color) _____						

PLEASE READ CAREFULLY!

YOU ARE ENTERING INTO A CONTRACT WHICH DEFINES THE RESPECTIVE RESPONSIBILITIES & LIABILITIES OF THE PARTIES. SEE TERMS & CONDITIONS OF THE CONTRACT ON THE REVERSE SIDE OF THIS FORM. SHIPPER'S SIGNATURE DESIGNATES ABOVE INFORMATION IS CORRECT AS STATED.

CHECKER SIGNATURE _____ DATE LOADED _____
 TRAILER NO. _____ TIME LOADED _____
 SHIPPER SIGNATURE _____

CHECK BOX IF CHARGES ARE COLLECT PREPAID

FREIGHT CHARGES GUARANTEED BY:
 SHIPPER/EXHIBITOR _____
 PERMANENT ADDRESS: STREET _____
 CITY _____ STATE _____ ZIP _____
 ATTN. _____ PHONE _____

CARRIER _____
 DRIVER _____ DATE _____ PIECES RECEIVED _____