

Transportation Order Form  
 Quad Express is pleased to be named the OFFICIAL transportation company for:



SHOW LOCATION: \_\_\_\_\_ SHOW DATES: \_\_\_\_\_ BOOTH # \_\_\_\_\_

PLEASE ARRANGE TRANSPORTATION FOR MY EXHIBIT MATERIALS   
 RATE INQUIRY ONLY AT THIS TIME

REQUESTER NAME: \_\_\_\_\_ REQUESTER PHONE: \_\_\_\_\_

**PICK UP ADDRESS:**

**COMPANY INFORMATION**

Company Name: \_\_\_\_\_  
 Street address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Contact name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Pick up date: \_\_\_\_\_  
 Ready time: \_\_\_\_\_ Close time: \_\_\_\_\_  
 Declared value: \_\_\_\_\_

Company name: \_\_\_\_\_  
 DBA: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City, State Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Contact name: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Billing Zip Code: \_\_\_\_\_

Payment type:  Visa  MC  Disc  Amx / Card #: \_\_\_\_\_ Exp: \_\_\_\_\_  
 Card holder name: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Payment authorization

- For this show only – do not retain credit card info
- Repeat use – Retain on file – Authorization not required prior to processing credit card

\_\_\_\_\_  
 AUTHORIZED SIGNATURE

NO. OF PIECES	DESCRIPTION	DIMENSIONS			WEIGHT
		L	W	H	

**SERVICE LEVEL REQUIRED:**

- NEXT DAY
- 2 DAY
- 3-5 DAY DEFERRED (LTL)

**Please arrange shipping after show to the following address**

Company: \_\_\_\_\_  
 Street address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_

*Providing REAL solutions to your transportation problems!*



987 Primrose Court, Lexington, KY 40511  
 PHONE: 859-254-4112 • TOLL FREE 800-388-4112 • Fax: 859-253-9137  
 Web address: [www.qwexpologistics.com](http://www.qwexpologistics.com)  
 Email: [info@qwexpologistics.com](mailto:info@qwexpologistics.com)