

The Franchise Expo - Saskatoon

Appointed by:

Saskatoon Praireland Park
Saskatoon, SK
April 15th - 16th, 2023

**The
Franchise
Expo**

Customs Clearance & Transportation Services

Cross Connect Customs and Events Logistics Inc. ("Cross Connect") has been appointed by NATIONAL EVENT MANAGEMENT as the Official Customs Broker & Transportation Provider for all shipments originating outside of Canada. Please read these instructions in conjunction with the exhibitor's manual provided by the Show Organizer.

These instructions will assist you in preparing for the correct, and timely, dispatch of your shipments; both to and from the event. Cross Connect is pleased to offer a complete logistics package that includes transportation/freight forwarding, customs clearance, delivery, and re-exportation services.

Cross Connect will provide the following services:

- On-site service from the first move-in day to the last day of move-out
- Transportation / Freight Forwarding and Advance Warehousing
- Post all securities and bonds with Canadian Border Services Agency
- Prepare the proper Customs entries to account for any sales you may make & remit the payments to Customs
- Prepare return export documents, bills of lading, shipping labels, and provide U.S. Customs Clearance, when required.

For more information, please contact:

Pat D'Alessandro

Phone: 416-726-7229
E-mail: info@crossconnectcl.com

Danny Mekhuri

Phone: 416-704-1956
E-mail: info@crossconnectcl.com

Sunny Salas

Phone: **416-676-1124**
E-mail: info@crossconnectcl.com

Anthony D'Alessandro

Phone: 416-670-6606
E-mail: info@crossconnectcl.com

THE FRANCHISE EXPO - SASKATOON has been granted "official recognition status" by Canada Border Services Agency (Canada Customs) allowing certain privileges for event materials entering Canada. Using the official Customs Broker will eliminate the possibility of materials being held at the border by Canada Customs due to improper or insufficient documentation. We will assist all Exhibitors with their temporary imports, permanent entries, export of exhibit materials, and ensure that all qualifying "official recognition status" privileges are applied.

PLEASE NOTE: Failure to comply with the deadlines, consignee, and document instructions, will cause unnecessary delays and may lead to additional charges. For this reason, if you will be using a Freight Forwarder or Customs Broker, other than Cross Connect, please be sure to pass these instructions on to them. Exhibitors using their own Customs Broker will have to arrange their own bond or cash deposit with Canada Customs at the point of entry into Canada.

Consignment Instructions

ADVANCE WAREHOUSE:

The warehouse will start receiving freight 30 days prior to the event from 9am to 3pm, Monday to Friday.

Advance warehouse services include delivery to show site only. MATERIAL HANDLING SERVICES AND CHARGES ARE NOT INCLUDED.

Advance warehouse services are not provided at the conclusion of the event. Your carrier MUST pick up your materials directly from show site during the scheduled move-out time.

Price: \$42.00 PER 100 LBS (400 LBS MINIMUM CHARGE)*

*This price is per shipment/waybill delivery.

For delivery to the Advance Warehouse, consign your shipment to:

**Exhibitor Name, Booth #
c/o The Franchise Expo - Saskatoon
YRC Advanced Warehouse
717 Cynthia Street
Saskatoon, SK - S7L 6B7**

DIRECT TO SHOW SITE:

Shipments delivered direct to show site will only be accepted during scheduled move-in dates and times. Shipments arriving early or late will not be accepted.

For delivery Direct to Show Site, consign your shipment to:

**Exhibitor Name, Booth #
c/o The Franchise Expo - Saskatoon
Saskatoon Praireland Park
503 Ruth Street West
Saskatoon, SK - S7K 4E4**

Shipping Checklist

****PRIVATE VEHICLE & AIRLINE HAND BAGGAGE:**

If you intend to bring your goods across the border in a private vehicle (personal, company, or rental), or carry them as baggage on an airline, there are documents that must accompany the individual carrying the materials. Please contact Cross Connect at least 1 week in advance of your expected crossing.

- ☐ Complete required forms below & send them to Cross Connect via e-mail.
- ☐ Schedule your pick-up (if not arranging transportation through Cross Connect).
 - We strongly suggest that exhibitors **DO NOT** ship by parcel courier, or by mail. Please contact Cross Connect for advice on how best to handle these types of shipments.
 - Goods being shipped need to abide by the following timelines:
 - o **TRUCK / COMMON CARRIER:** scheduled to arrive 1 week prior to show opening
 - o **AIRFREIGHT:** scheduled to arrive 3 days (minimum) prior to show opening
 - o **VAN LINE:** Shipments may be sent direct to show site and should be scheduled for delivery on the appropriate move-in day.
 - All shipments **MUST BE SENT PREPAID**. Cross Connect will not accept any collect freight charges. Shipments sent collect will be refused.
- ☐ Label your freight.
 - All pieces must be labelled clearly; showing the address where the freight is going, piece # and total # of pieces (e.g. piece 1 of 3), emergency contact information, and **"NOTIFY CROSS CONNECT FOR CUSTOMS CLEARANCE - pars@crossconnectcl.com"**.
 - For freight on skids/pallets, if possible, we recommend that a label be placed on each individual carton, case, etc. and that any large pieces have labels placed on multiple sides.
 - Ensure that any previous shipping labels (used for past shipments) have been removed / destroyed.
- ☐ Ship your goods, ensuring that the appropriate documents have been provided.
 - ☐ The Bill of Lading or Air Waybill, all Customs documents, and labels must be marked **"NOTIFY CROSS CONNECT FOR CUSTOMS CLEARANCE - pars@crossconnectcl.com"**.
 - ☐ If shipping out of the USA, the body of the Bill of Lading or Air Waybill, must also be marked **"CERTIFICATE OF REGISTRATION (CF4455) ATTACHED. GOODS MUST BE PRESENTED TO U.S. CUSTOMS PRIOR TO EXPORT FROM THE USA. STAMPED COPIES MUST BE E-MAILED TO CROSS CONNECT (broker@crossconnectcl.com), AND TURNED OVER ON DELIVERY."**
 - ☐ 3 completed copies of the Commercial Invoice must be attached to the Bill of Lading or Air Waybill.
 - ☐ If shipping out of the USA, 3 copies of the Certificate of Registration (CF4455) must be attached to the Bill of Lading or Air Waybill.
- ☐ On show site:
 - The show site has been declared a bonded area for the entire event. Under **NO** circumstances are any goods to be removed without prior consent of Cross Connect.
 - Cross Connect can provide the following services:
 - o Return of goods to your stated destination
 - o Supply required shipping documents, export documents, and labels
 - o Arrange Customs clearance of any goods remaining in Canada; applicable duties and taxes must be paid prior to removal from the show site.
 - o Arrange transfer of goods to be displayed at another event in Canada
 - NOTE: Cross Connect is not responsible for lost, stolen, or damaged freight. All goods should be insured for the entire duration of the event; prior to, during, and after. Please contact Cross Connect for more information on cargo insurance.

Form Checklist

- ☐ Customs & Transportation Services Order Form (**Mandatory**)
 - Please ensure that all fields, including credit card information and client signature (at bottom of form), are completed.
 - Note: IRS# (U.S. Tax ID, or E.I.N.) is required if goods will be returning to the USA.
- ☐ Commercial Invoice / Packing List (**Mandatory**)
 - Complete all required information per example provided.
 - All invoices **MUST** include detailed descriptions (using general terms), countries of origin, and values for all items in the shipment.
 - For shipments that include electronics, please also provide the brand name and model # for each item in the description.
- ☐ Certificate of Registration (CF4455)
 - Required for all shipments from the USA.

****NOTE:** All forms must be completed and returned to Cross Connect for review, prior to shipping.

Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
2. The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☒ Continuous Authority granted



CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Services Required (please check all that apply):

☒ Transportation ☒ Customs Clearance ☒ Advance Warehouse

Event & Exhibitor

Shipment Delivering to (please check one): ☐ Direct to Event/Show Site ☒ Advance Warehouse

Exhibitor Name: ABC COMPANY Booth #: 1001

Event Name: NAME OF THE SHOW / EVENT YOU ARE ATTENDING Event Dates: 05-Jul-21 to 07-Jul-21

Facility/Venue Name: NAME OF CONVENTION CENTRE / HOTEL / VENUE WHERE THE EVENT IS BEING HELD

Facility/Venue Address: ADDRESS OF THE CONVENTION CENTRE / HOTEL / VENUE WHERE THE EVENT IS BEING HELD

City: TORONTO State/Province: ON Zip/Postal Code: MOX X0X

On-site Contact: JOHN SMITH Cell #: 555-555-0000

E-mail: JSMITH@DOMAIN.COM Importer # (if applicable): 123456789RM0001

Shipper

Company Name: ABC COMPANY IRS #: 12-3456789

Address: 123 SOMEPLACE AVENUE, SUITE 3

City: NEW YORK State/Province: NY Zip/Postal Code: 10093

Contact Name: JOHN SMITH Tel: 555-555-0000

E-mail: JSMITH@DOMAIN.COM

Return Freight

☒ Same as Shipper ☐ No Return Shipment

Company Name: ABC COMPANY IRS / Importer #: 12-3456789

Address: 123 SOMEPLACE AVENUE, SUITE 3

City: NEW YORK State/Province: NY Zip/Postal Code: 10093

Contact Name: JOHN SMITH Tel: 555-555-0000

E-mail: JSMITH@DOMAIN.COM

Billing

☒ Same as Shipper

Company Name: ABC COMPANY GST/HST# (if applicable): 123456789RM0001

Address: 123 SOMEPLACE AVENUE, SUITE 3

City: NEW YORK State/Province: NY Zip/Postal Code: 10093

Contact Name: JANE DOE, ACCOUNTS PAYABLE Tel: 555-555-0001

E-mail: JDOE@DOMAIN.COM

MUST BE COMPLETED

Payment

Charge to: ☒ Visa ☐ MasterCard ☐ American Express

Cardholder Name: JOHN SMITH CVV Number: 123

Credit Card Number: 1234 5678 9123 4567 Expiry Date: 11/24

I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).

Cardholder Signature: *John Smith* Date: 10-Jun-21

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)		Length	Width	Height		Per Piece	Total
2	SKIDS	@ Dimensions (Inches) Each	48	48	48	@ Weight (lbs) Each	400	800
1	CRATE	@ Dimensions (Inches) Each	41	52	50	@ Weight (lbs) Each	1,000	1,000
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
3		@ Dimensions (Inches) Each				@ Weight (lbs) Each		1,800

Shipment / Freight

Requested Service Level: ☐ Air ☐ 2nd Day ☒ Truck ☐ Other: _____

Additional Services Required: ☒ Lift Gate ☐ Inside Pick-up ☐ Inside Delivery ☐ Weekend Pick-up ☐ Weekend Delivery

Total Shipment Value: \$ 10,000.00 Carrier Name & Contact Info: IF USING CARRIER OTHER THAN CROSS CONNECT, PROVIDE INFO.

Available for Pick-up Date: 15-Jun-21 Shipper Hours of Operation: 8:00 am to 4:00 pm Must Deliver By: 30-Jun-21 @ 4:00 pm

Cargo Insurance / Declared Value

This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.

Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf. Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

Client Signature

I have read and agree to the terms of this contract.

Signature: *John Smith*

Printed Name: JOHN SMITH

Date: 10-Jun-21

Title: CEO

Cross Connect Internal Use Only

Accepted by:

Date:

Signature:

Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
2. The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☐ Continuous Authority granted



CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Services Required (please check all that apply):

☐ Transportation ☐ Customs Clearance ☐ Advance Warehouse

Event & Exhibitor

Shipment Delivering to (please check one): ☐ Direct to Event/Show Site ☐ Advance Warehouse

Exhibitor Name: Booth #:

Event Name: Event Dates: to

Facility/Venue Name:

Facility/Venue Address:

City: State/Province: Zip/Postal Code:

On-site Contact: Cell #:

E-mail: Importer # (if applicable):

Shipper

Company Name: IRS #:

Address: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

Return Freight

☐ Same as Shipper ☐ No Return Shipment

Company Name: IRS / Importer #:

Address: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

Billing

☐ Same as Shipper

Company Name: GST/HST# (if applicable):

Address: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

MUST BE COMPLETED

Payment

Charge to: ☐ Visa ☐ MasterCard ☐ American Express

Cardholder Name: CVV Number:

Credit Card Number: Expiry Date:

I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).

Cardholder Signature: Date:

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)	@ Dimensions (Inches) Each	Length	Width	Height	@ Weight (lbs) Each	Per Piece	Total
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		

Requested Service Level: ☐ Air ☐ 2nd Day ☐ Truck ☐ Other: _____

Additional Services Required: ☐ Lift Gate ☐ Inside Pick-up ☐ Inside Delivery ☐ Weekend Pick-up ☐ Weekend Delivery

Total Shipment Value: Carrier Name & Contact Info:

Available for Pick-up Date: Shipper Hours of Operation: to Must Deliver By:

Cargo Insurance / Declared Value

This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.

Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf. Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

Client Signature

I have read and agree to the terms of this contract.

Signature: Date:

Printed Name: Title:

Cross Connect Internal Use Only

Accepted by:

Date:

Signature:



NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.
 HOURS: Mon-Fri 9 am - 5 pm *E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

Shipper: ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000	Consignee (Ship To): ABC COMPANY, BOOTH # 1001 C/O NAME OF THE SHOW/EVENT VENUE NAME VENUE ADDRESS ONSITE CONTACT NAME & CELL PHONE #	Shipped Via:	TRANSPORTATION COMPANY NAME	*REMARKS ("X" each item) *A – TEMPORARY IMPORT *B – PERMANENT IMPORT *C – GIVEN AWAY / SOLD
		Shipped To:	<input checked="" type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site	
		IRS #:	12-3456789	
		Pieces:	3	
		Weight:	1,800 <input type="checkbox"/> kg <input checked="" type="checkbox"/> lbs	
		Currency:	USD	
		Ship Date:	15-Jun-21	

# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name & Model # for all electronic equipment.</small>	Origin	Weight in lbs (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value
1	SKID	1	DISPLAY BOOTH	USA	400	48	48	48	1.81	9403.20	X			5,250.00	5,250.00
1	CRATE	2	50" LED TV'S - LG MODEL# 55EG9100	CHINA	50	41	52	50	1.75	8528.72	X			700.00	1,400.00
		2	WEIGHTED METAL TV STANDS	JAPAN	950					9403.20	X			500.00	1,000.00
1	SKID	5000	ADVERTISING LITERATURE	USA	200	48	48	48	1.81	4911.10			X	0.15	750.00
		1000	BALL POINT PENS	CHINA	48					9608.10			X	0.35	350.00
		400	CATALOGS	USA	150					4911.10			X	3.00	1,200.00
		2	POSTERS	USA	2					4911.91		X		25.00	50.00

Each commodity MUST be listed on it's own line; Please DO NOT group items. Also, please note that vague descriptions, such as "Give Aways", "Display Materials", or "Trade Show Samples" will NOT be accepted.

Electronic Equipment MUST include Brand Name & Model #.

Indicate the Country of Manufacture (where the goods are made).

Values need to reflect the cost of goods (price paid), or the selling price of goods (price payable); whichever is greater. \$0 values will NOT be accepted.

**FOB (Free On Board) VALUE: indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

**CIF (Cost, Insurance, and Freight) VALUE: indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

**FOB VALUE:	10,000.00
INSURANCE:	
FREIGHT CHARGE:	
**TOTAL CIF VALUE:	10,000.00

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE: 7,650.00

PERMANENT IMPORT VALUE: 2,350.00

Signature: John Smith

Date: 10-Jun-21



NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.
 HOURS: Mon-Fri 9 am - 5 pm *E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

Shipper:	Consignee (Ship To):	Shipped Via:	*REMARKS ("X" each item) *A – TEMPORARY IMPORT *B – PERMANENT IMPORT *C – GIVEN AWAY / SOLD
		Shipped To: <input type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site	
		IRS #:	
		Pieces:	
		Weight: <input type="checkbox"/> kg <input type="checkbox"/> lbs	
		Currency:	
		Ship Date:	

# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name & Model # for all electronic equipment.</small>	Origin	Weight in _____ (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value

**FOB (Free On Board) VALUE: indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

**FOB VALUE:	
INSURANCE:	
FREIGHT CHARGE:	
**TOTAL CIF VALUE:	

**CIF (Cost, Insurance, and Freight) VALUE: indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf. The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE:

Signature: _____

Date: _____

PERMANENT IMPORT VALUE:

DEPARTMENT OF HOMELAND SECURITY
U.S. Customs and Border Protection

OMB Control Number: 1651-0010
Expiration Date: 08/31/2019

CERTIFICATE OF REGISTRATION

19 CFR 10.8, 10.9, 10.68,
148.1, 148.8, 148.32, 148.37

(NOTE: Number of copies to be submitted varies with type of transaction.
Inquire at Port Director's office as to number of copies required.)

NO.

VIA (Carrier)	B/L or INSURED NO. BILL OF LADING / AIR WAYBILL #	DATE MM/DD/YYYY
NAME OF TRANSPORTATION COMPANY	ARTICLES EXPORTED FOR:	
NAME, ADDRESS, AND ZIP CODE TO WHICH CERTIFIED FORM IS TO BE MAILED (If Applicable)	<input type="checkbox"/> ALTERATION* <input type="checkbox"/> REPAIR* <input type="checkbox"/> USE ABROAD <input type="checkbox"/> REPLACEMENT	
ABC COMPANY c/o Cross Connect 6900 Airport Road, Suite 123 Mississauga, ON L4V 1E8	<input type="checkbox"/> PROCESSING* <input checked="" type="checkbox"/> OTHER, (specify) <u>DISPLAY / TOOLS OF TRADE</u>	
* NOTE: The cost or value of alterations, repairs, or processing abroad is subject to CBP duty.		

LIST ARTICLES EXPORTED

Number Packages	Kind of Packages	Description
1	SKID	1 DISPLAY BOOTH - BACKWALLS, PANELS, LIGHTS, GRAPHICS, CARPET & UNDERPAD (USA)
1	CRATE	2 55" LED TV'S - LG MODEL# 55E9100 (CHINA)
1	SKID	2 WEIGHTED METAL TV STANDS (JAPAN)
		1000 ADVERTISING LITERATURE (USA)
		400 BALL POINT PENS (CHINA)
		200 CATALOGS (USA)
		2 POSTERS (USA)

****FORMAL U.S. ENTRY WILL BE PREPARED. PLEASE VALIDATE TO SHOW
PROOF OF EXPORT, ALLOWING THE USE OF HS# 9801.00.85.00 / 9801.00.60.00
ON THE RETURN ENTRY.**

SIGNATURE OF OWNER OR AGENT (Print or Type <u>and</u> Sign) JOHN SMITH	<i>John Smith</i>	DATE MM/DD/YYYY
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The Above-Described Articles Were:

EXAMINED	DATE	BE SURE TO MARK THE FOLLOWING IN THE BODY OF YOUR BILL OF LADING OR AIR WAYBILL: "CERTIFICATE OF REGISTRATION (CF4455) ATTACHED. GOODS MUST BE PRESENTED TO U.S. CUSTOMS PRIOR TO EXPORT FROM THE USA. STAMPED COPIES MUST BE E-MAILED TO CROSS CONNECT (broker@crossconnectcl.com) & TURNED OVER ON DELIVERY."
DATE	PORT	
SIGNATURE OF CBP OFFICER	SIGNATURE	

CERTIFICATE

Duty-free entry is claimed for the described articles as having been exported with
reverse if needed)

ATTENTION CBP:

**FORMAL ENTRY
PREPARED -- PLEASE BE SURE TO
SCAN THE ACE E-MANIFEST.**

(THIS DOCUMENT WAS VALIDATED TO MEET DUTY-FREE RE-ENTRY
REQUIREMENTS UNDER HS# 9801.00.85.00 / 9801.00.60.00, ONLY.)

SIGNATURE OF IMPORTER (Print or Type <u>and</u> Sign) JOHN SMITH	<i>John Smith</i>	DATE MM/DD/YYYY
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NOTE: Certifying officers shall draw lines through all unused spaces with ink or indelible pencil.

Paperwork Reduction Act Notice: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0010. The estimated average time to complete this application is 10 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.

OMB Control Number: 1651-0010
Expiration Date: 08/31/2019

CERTIFICATE OF REGISTRATION

(NOTE: Number of copies to be submitted varies with type of transaction.
Inquire at Port Director's office as to number of copies required.)

VIA (Carrier)	B/L or INSURED NO.	DATE
NAME, ADDRESS, AND ZIP CODE TO WHICH CERTIFIED FORM IS TO BE MAILED (If Applicable)	ARTICLES EXPORTED FOR:	
	<div> <input type="checkbox"/> ALTERATION* <input type="checkbox"/> PROCESSING* </div> <div> <input type="checkbox"/> REPAIR* <input type="checkbox"/> OTHER, (specify) </div> <div> <input type="checkbox"/> USE ABROAD _____ </div> <div> <input type="checkbox"/> REPLACEMENT _____ </div>	
<p>* NOTE: The cost or value of alterations, repairs, or processing abroad is subject to CBP duty.</p>		

Number Packages	Kind of Packages	Description

SIGNATURE OF OWNER OR AGENT <i>(Print or Type and Sign)</i>	DATE
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EXAMINED		LADEN under my supervision	
DATE	PORT	DATE	PORT
SIGNATURE OF CBP OFFICER		SIGNATURE OF CBP OFFICER	

Duty-free entry is claimed for the described articles as having been exported without benefit of drawback and are returned unchanged except as noted: (use reverse if needed)

SIGNATURE OF IMPORTER (<i>Print or Type <u>and</u> Sign</i>)	DATE
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Paperwork Reduction Act Notice: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0010. The estimated average time to complete this application is 10 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington DC 20229.