



THE NATIONAL FRANCHISE SHOW LONDON

Appointed by:

RBC Place
London, ON,
March 22 - 23, 2025



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

Kyle Mekhuri

Phone: 647-470-4763
E-mail: info@crossconnectcl.com

Josh Maclean

Phone: 416-710-5618
E-mail: info@crossconnectcl.com

Anthony D'Alessandro

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



THE NATIONAL FRANCHISE SHOW - LONDON 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: \$45.00 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 NATIONAL FRANCHISE SHOW - LONDON
ABF FREIGHT
218 SAMUELSON STREET
CAMBRIDGE ON
N1R 1K8**

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 NATIONAL FRANCHISE SHOW - LONDON
RBC PLACE
300 YORK STREET
LONDON ON
N6B 1P8**



CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

!!! ATTENTION !!!

The Customs & Transportation Services Order Form is a legally required document. It must be completed and signed by the importer/owner before Customs Brokerage or Transportation Services are provided. When completing the form, please pay close attention to the following:

- **Wet (ink on paper) signatures are required.** Digital or Font-based signatures are not allowed.
- Company names must be the full/complete LEGAL business name, as registered with the Government in the country of operation.
- IRS#/U.S. Tax ID/EIN must be provided for all U.S. companies. Please attach a copy of the company W-9.
- GST/HST# must be provided for all Canadian companies.

E-MAIL: INFO@CROSSCONNECTCL.COM
TEL: 416-639-2176
WEBSITE: WWW.CROSSCONNECTCL.COM

Customs & Transportation Services Order Form



CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 8001 Weston Road, Unit 2, Woodbridge, ON L4L 9C8; business number 709076475RM0002, a Customs Broker licensed under the Customs Act, to act as my true and lawful agent and 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. Assist to set up Client's CARM business account, and/or manage and administer Client's CARM account;
2. 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;
3. The transportation, warehousing, and distribution of such goods; and
4. Undertake, facilitate, assist with and/or perform such other business, tasks, duties, powers and authorities for which Client provides written instructions to Cross Connect at any time and from time to time.

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

THIS FORM MUST BE COMPLETED & SIGNED BY THE CLIENT* (OWNER/IMPORTER).

For events (i.e. trade shows, conventions, etc.) where there is "no sale involved", the Transactional Owner of the Goods must complete this form

Services Required (please check all that apply):

Customs Clearance Transportation Advance Warehouse

Event & Exhibitor	Shipment Delivering to (please check one):	<input type="checkbox"/> Direct to Event/Show Site	<input type="checkbox"/> Advance Warehouse
	Exhibitor Name:		Booth #:
	Event Name:		Event Dates: _____ to _____
	Facility/Venue Name:		U.S. IRS # (if applicable):
	Facility/Venue Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	On-site Contact:	Cell #:
	E-mail:		

Client* (Owner/Importer)	Legal Business / Entity Name (as registered):		
	Does this company have a Canadian Office?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Legal Address (as registered):		
	City:	State/Province:	Zip/Postal Code:
	Country:	Importer/GST# (if applicable):	U.S. IRS# (if applicable):
	Officer Name (Owner, Partner, Director or Signing Officer):		Title:
	E-mail:		Tel:
	Contact Name (if different from above):		Tel:

Shipper	<input type="checkbox"/> Same as Client		
	Company Name:		U.S. IRS #:
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	Contact Name:	Tel:
	E-mail:		

Return Freight	<input type="checkbox"/> No Return Shipment <input type="checkbox"/> Same as Shipper <input type="checkbox"/> Same as Client		
	Company Name:		IRS/Importer #:
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	Contact Name:	Tel:
	E-mail:		

PLEASE SEE ADDITIONAL PAGES FOR BILLING, PAYMENT, TRANSPORTATION & ADVANCE WAREHOUSING

Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent pursuant to this General Agency Agreement/Power of Attorney ("GAA"). Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" ("CTC") as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/POST-CARM-CUSTOMS-STC.pdf>. Cross Connect performs its transportation services in the role of agent pursuant to its "Transportation Trading Conditions" ("TTC"), as published online at <https://crossconnectcl.com/wp-content/uploads/2024/10/STC-TRANSPORTATION-POST-CARM.pdf>. The parties hereby irrevocably and unconditionally attorn to the jurisdiction of the courts of the Province of Ontario and all courts competent to hear appeals therefrom. The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits.

Notwithstanding any (a) other provision of this GAA, (b) provision of the CTC or TTC, or (c) delegation of authority in CARM, including to manage Client's CARM business account, in any circumstances howsoever and whenever arising, and regardless of whether The Company uses its own business number or Client's business number for importation/exportation, and regardless of who any Government Authority identifies as the importer, owner, or importer of record for any shipment, and regardless of any liability assessed by any Government Authority: Client expressly acknowledges and agrees that: (a) The Company shall not be liable for any error in judgment or for anything which it may do or refrain from doing or for any resulting direct, indirect, consequential, punitive or exemplary damage or loss caused by any act or omission, or the negligence of The Company or by an act of God or other act or cause beyond the reasonable control of The Company, even if The Company has been advised of the possibility of such damage or loss; and (b) The Company shall not be liable for any failure to provide the services which is a result of the operation of the applicable laws of Canada or any other country or a change in the policies of Canada Customs.

In the event of a breach or other failure by The Company to perform its obligations for which The Company is held liable, including, but not limited to, acts or omissions of The Company employees, agents and representatives providing services, the Client's sole remedy hereunder, whether in contract, tort or otherwise, shall, in any and all events, be limited to termination hereof and damages not to exceed CAD 1000 (One Thousand Canadian Dollars).

In no event shall The Company's obligation or liability hereunder extend to direct, indirect, punitive, special, incidental and consequential damages or losses the Client may suffer or incur in connection herewith, such as, but not limited to, loss of revenue or profits, damages or losses as a result of the Client's inability to fulfill obligations to third parties, injury to good will, claims of customers and the like, even if The Company has been advised or is otherwise aware of the possibility thereof, nor shall it extend to damages or losses the Client may suffer or incur as a result of claims, suits or other proceeding made or instituted against the Client by third parties.

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 (Importer/Owner) Signature	
NOTE: Wet ink signature required – Digital signature NOT allowed	
I have read and agree to the terms of this contract and grant Cross Connect the authority to act on my behalf. I hereby certify that I have authority to transact business on behalf of The Client.	
Signature:	Date:
Printed Name:	
Title:	

Cross Connect Internal Use Only	
Notes:	
Signature:	Date:
Printed Name:	
Title:	



Billing & Payment Information

CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Event & Exhibitor	Exhibitor Name:	Booth #:	
	Event Name:	Event Dates:	to
	Facility/Venue Name:		
	Facility Venue Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:	On-site Contact:	Cell #:
	E-mail:		

Billing Information	<input type="checkbox"/> Same as Shipper (page 1)	<input type="checkbox"/> Same as Client (page 1)	
	Company Name:		
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Country:		
	Contact Name:	Tel:	
	E-mail:		
	Second Contact Name (if applicable):	Tel:	
E-mail:			

MUST BE COMPLETED				
Payment Information	Charge to:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
	Cardholder Name:	CVV Number:		
	Credit Card Number:	Expiry Date:		(mm/yyyy)
	I authorize use of this card for payment or pre-payment of services relative to this form. I understand that pre-payments on estimated amounts are subject to adjustment, and that this card will be charged for adjustments and/or future invoices generated for services not outlined on, or in addition to, any estimates provided.			
	I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).			
	Cardholder Signature:	Date:		

Remittance Information	Remit To:			
	HST/GST#:			
	Tel:			
	Attention:			
	E-mail:			

Customs & Transportation Services Order Form



CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 8001 Weston Road, Unit 2, Woodbridge, ON L4L 9C8; business number 709076475RM0002, a Customs Broker licensed under the Customs Act, to act as my true and lawful agent and 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. Assist to set up Client's CARM business account, and/or manage and administer Client's CARM account;
2. 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;
3. The transportation, warehousing, and distribution of such goods; and
4. Undertake, facilitate, assist with and/or perform such other business, tasks, duties, powers and authorities for which Client provides written instructions to Cross Connect at any time and from time to time.

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

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For events (i.e. trade shows, conventions, etc.) where there is "no sale involved", the Transactional Owner of the Goods must complete this form

Services Required (please check all that apply):

Customs Clearance Transportation Advance Warehouse

Event & Exhibitor	Shipment Delivering to (please check one): <input type="checkbox"/> Direct to Event/Show Site <input checked="" type="checkbox"/> Advance Warehouse
	Exhibitor Name: ABC COMPANY Booth #: 1001
	Event Name: NAME OF THE EVENT/SHOW Event Dates: 25-Oct-24 to 29-Oct-24
	Facility/Venue Name: THE EVENT FACILITY U.S. IRS # (if applicable):
	Facility/Venue Address: 600 CONVENTION CENTRE DRIVE
	City: TORONTO State/Province: ON Zip/Postal Code: M0X 0X0
	Country: CANADA On-site Contact: JOHN SMITH Cell #: 555-555-0000
	E-mail: JSMITH@DOMAIN.COM

Client* (Owner/Importer)	Legal Business / Entity Name (as registered): ABC COMPANY, INC.
	Does this company have a Canadian Office? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Legal Address (as registered): 123 SOMEPLACE AVENUE, SUITE 3
	City: NEW YORK State/Province: NY Zip/Postal Code: 10093
	Country: USA Importer/GST# (if applicable): N/A U.S. IRS# (if applicable): 12-3456789
	Officer Name (Owner, Partner, Director or Signing Officer): JOHN SMITH Title: CEO
	E-mail: JSMITH@DOMAIN.COM Tel: 555-555-0000
Contact Name (if different from above): Tel:	
E-Mail:	

Shipper	<input checked="" type="checkbox"/> Same as Client
	Company Name: ABC COMPANY, INC. U.S. IRS #: 12-3456789
	Address: 123 SOMEPLACE AVENUE, SUITE 3
	City: NEW YORK State/Province: NY Zip/Postal Code: 10093
	Country: USA Contact Name: JOHN SMITH Tel: 555-555-0000
E-mail: JSMITH@DOMAIN.COM	

Return Freight	<input type="checkbox"/> No Return Shipment <input type="checkbox"/> Same as Shipper <input checked="" type="checkbox"/> Same as Client
	Company Name: ABC COMPANY, INC. IRS/Importer #: 12-3456789
	Address: 123 SOMEPLACE AVENUE, SUITE 3
	City: NEW YORK State/Province: NY Zip/Postal Code: 10093
	Country: USA Contact Name: JOHN SMITH Tel: 555-555-0000
E-mail: JSMITH@DOMAIN.COM	

PLEASE SEE ADDITIONAL PAGES FOR BILLING, PAYMENT, TRANSPORTATION & ADVANCE WAREHOUSING

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Notwithstanding any (a) other provision of this GAA, (b) provision of the CTC or TTC, or (c) delegation of authority in CARM, including to manage Client's CARM business account, in any circumstances howsoever and whenever arising, and regardless of whether The Company uses its own business number or Client's business number for importation/exportation, and regardless of who any Government Authority identifies as the importer, owner, or importer of record for any shipment, and regardless of any liability assessed by any Government Authority: Client expressly acknowledges and agrees that: (a) The Company shall not be liable for any error in judgment or for anything which it may do or refrain from doing or for any resulting direct, indirect, consequential, punitive or exemplary damage or loss caused by any act or omission, or the negligence of The Company or by an act of God or other act or cause beyond the reasonable control of The Company, even if The Company has been advised of the possibility of such damage or loss; and (b) The Company shall not be liable for any failure to provide the services which is a result of the operation of the applicable laws of Canada or any other country or a change in the policies of Canada Customs.

In the event of a breach or other failure by The Company to perform its obligations for which The Company is held liable, including, but not limited to, acts or omissions of The Company employees, agents and representatives providing services, the Client's sole remedy hereunder, whether in contract, tort or otherwise, shall, in any and all events, be limited to termination hereof and damages not to exceed CAD 1000 (One Thousand Canadian Dollars).

In no event shall The Company's obligation or liability hereunder extend to direct, indirect, punitive, special, incidental and consequential damages or losses the Client may suffer or incur in connection herewith, such as, but not limited to, loss of revenue or profits, damages or losses as a result of the Client's inability to fulfill obligations to third parties, injury to good will, claims of customers and the like, even if The Company has been advised or is otherwise aware of the possibility thereof, nor shall it extend to damages or losses the Client may suffer or incur as a result of claims, suits or other proceeding made or instituted against the Client by third parties.

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 (Importer/Owner) Signature	
<i>NOTE: Wet ink signature required – Digital signature NOT allowed</i>	
I have read and agree to the terms of this contract and grant Cross Connect the authority to act on my behalf. I hereby certify that I have authority to transact business on behalf of The Client.	
Signature: <i>John Smith</i>	Date: 30-Sep-24
Printed Name: JOHN SMITH	
Title: CEO	

Cross Connect Internal Use Only	
Notes:	
Signature:	Date:
Printed Name:	
Title:	



Billing & Payment Information

CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

Event & Exhibitor	Exhibitor Name: ABC COMPANY	Booth #: 1001	
	Event Name: NAME OF THE EVENT/SHOW	Event Dates: 25-Oct-24 to 29-Oct-24	
	Facility/Venue Name: THE EVENT FACILITY		
	Facility Venue Address: 600 CONVENTION CENTRE DRIVE		
	City: TORONTO	State/Province: ON	Zip/Postal Code: M0X 0X0
	Country: CANADA	On-site Contact: JOHN SMITH	Cell #: 555-555-0000
	E-mail: JSMITH@DOMAIN.COM		

Billing Information	<input type="checkbox"/> Same as Shipper (page 1)	<input checked="" type="checkbox"/> Same as Client (page 1)	
	Company Name: ABC COMPANY, INC.		
	Address: 123 SOMEPLACE AVENUE, SUITE 3		
	City: NEW YORK	State/Province: NY	Zip/Postal Code: 10093
	Country: USA		
	Contact Name: JOHN SMITH	Tel: 555-555-0000	
	E-mail: JSMITH@DOMAIN.COM		
Second Contact Name (if applicable): SUSAN JONES	Tel: 555-555-1111		
E-mail: SJONES@DOMAIN.COM			

MUST BE COMPLETED			
Payment Information	Charge to: <input checked="" type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express
	Cardholder Name: JOHN SMITH	CVV Number: 123	
	Credit Card Number: 1234 5678 9123 4567	Expiry Date: 11/2026	(mm/yyyy)
	I authorize use of this card for payment or pre-payment of services relative to this form. I understand that pre-payments on estimated amounts are subject to adjustment, and that this card will be charged for adjustments and/or future invoices generated for services not outlined on, or in addition to, any estimates provided.		
	I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).		
	Cardholder Signature: <i>John Smith</i>	Date: 30-Sep-2024	

Remittance Information	Remit To: Cross Connect Customs and Event Logistics Inc. 8001 Weston Road, Unit 2 Woodbridge, ON L4L 9C8
	HST/GST#: 709076475RT0001
	Tel: (416) 639-2176
	Attention: Accounting Department
	E-mail: payments@crossconnectcl.com

FOR CUSTOMS CLEARANCE BY:
Cross Connect Customs And Event Logistics Inc.

CARRIER ONLY PARS E-mail: pars@crossconnectcl.com

COMMERCIAL INVOICE / PACKING LIST



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): Importer/Owner of Goods: <input type="checkbox"/> Same as Shipper		Shipped Via: 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:		*REMARKS ("X" each item) *A – TEMPORARY IMPORT *B – PERMANENT IMPORT *C – GIVEN AWAY / SOLD												
Does this company have a Canadian Office?																
# 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"

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

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:
 PERMANENT IMPORT VALUE:

Signature: _____ Date: _____ 12/22



FOR CUSTOMS CLEARANCE BY:
Cross Connect Customs And Event Logistics Inc.
CARRIER ONLY PARS E-mail: pars@crossconnectcl.com **COMMERCIAL INVOICE / PACKING LIST**

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.

***IMPORTANT:**
MUST be completed in full.

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 SHOW/EVENT VENUE NAME VENUE ADDRESS ONSITE CONTACT NAME & CELL PHONE #	Importer/Owner of Goods: <input checked="" type="checkbox"/> Same as Shipper ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000	Shipped Via: <input type="checkbox"/> TRANSPORTATION COMPANY NAME Shipped To: <input checked="" type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site 12-34-56789 IRS #: Pieces: 3 Weight: 1,800 <input type="checkbox"/> lbs <input checked="" type="checkbox"/> kg Currency: USD Ship Date: 06/15/2021 (mm/dd/yyyy)	*REMARKS ("X" each item) *A - TEMPORARY IMPORT *B - PERMANENT IMPORT *C - GIVEN AWAY / SOLD
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# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name & Model # for all electronic equipment.</small>	Origin	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	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	41	52	50	1.75	8528.72	X			700.00	1,400.00
1	SKID	2	WEIGHTED METAL TV STANDS	JAPAN	48	48	48	1.81	9403.20	X			500.00	1,000.00
		5000	ADVERTISING LITERATURE	USA	48	48	48		4911.10		X		0.15	750.00
		1000	BALL POINT PENS	CHINA					9608.10		X		0.35	350.00
		400	CATALOGS	USA					4911.10		X		3.00	1,200.00
		2	POSTERS	USA					4911.91		X		25.00	50.00

***Each commodity MUST be listed on its own line; DO NOT group items.**

***Specific descriptions required; 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); NOT the country of purchase.**

***Values need to reflect the cost of goods (price paid), or the selling price of the goods (price payable); whichever is greater.**

***\$0 values will NOT be accepted.**

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

**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

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: 06/10/2021