8001 Weston Rd Unit 2
Woodbridge ON
L6L 9C8

(416) 639-2176
info@crossconnectcl.com

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

THE NATIONAL FRANCHISE SHOW EDMONTON

APPOINTED BY:

The National Franchise Show

EDMONTON EXPO CENTRE
EDMONTON, AB
NOVEMBER 7-8, 2026

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 Advanced 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 Clearence, when required.

For more information, *please* contact:

Anthony D'Alessandro
Phone: 416-670-6606
E-mail: info@crossconnectcl.com

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

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CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

The National Franchise Show, Edmonton, 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. The advance warehouse cutoff date is October 30th at 3:00 p.m. Shipments received after this deadline will be subject to a 30% off-target rate surcharge. 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: PRICE $52 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 - Edmonton
ABF Freight
14941 131 Ave NW
Edmonton, AB
T5V 1S9

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 - Edmonton
Edmonton Expo Centre
7515 118 Ave NW
Edmonton, AB
T5B 0J2

8001 Weston Rd Unit 2
Woodbridge ON
L6L 9C8

(416) 639-2176
info@crossconnectcl.com

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

PRE-ALERT / CUSTOMS DOCUMENTATION REQUIREMENTS

Please complete the **Cross Connect Order Form** and if shipping from outside of **Canada the Commercial Invoice Packing List (CIPL)** in this manual.

The CIPL should contain full detailed description of the contents, serial numbers, customs HS/tariff codes, and quality/weight/value of each item listed. Invoices should be in the currency of country shipped from clearly showing which items are for temporary import and which are for permanent import. Examples of both forms are provided for assistance.

The consignee section on the Commercial Invoice Packing List should be addressed as follows:

The National Franchise Show - Edmonton
(Insert Here: Exhibiting Company Name, Booth #)
c/o Edmonton Expo Centre
7515 118 Ave NW
Edmonton, AB
T5B 0J2

***Please send Cross Connect draft copies of you CIPL prior to shipping so it may be reviewed and pre-approved ***

All document checks and pre-alerts should be emailed to info@crossconnectcl.com

IMPORTANT: Certain commodities such as foodstuff, beverages, certain electronic, telecommunication, military items, animal & plant products (CITES), medical devices, and cosmetics will be subject to import license or other certification requirements. Kindly contact Cross Connect at least 2 months prior to the show if sending any of the above items.

Failure to pre-alert us of your shipment means we are unaware it exists and cannot be held responsible for your materials arriving to the show late, or not at all.

INSURANCE

We are not responsible for any loss, pilferage, or damage while goods are left unattended at your booth. The handling of goods is carried out at the exhibitor/contractors risk. We, therefore, strongly recommend that all exhibitors arrange insurance coverage to include transit to and from the exhibition, also while on display during the exhibition. Warehouse standard coverage is $250.00 maximum per shipment or 10 cents per pound maximum of $250.00. We recommend to purchase additional cargo insurance while in transit and while shipment is at the warehouse (3rd party warehouse coverage).

PAYMENT

Unless agreed in advance payment for all services must be made prior to, or during the show. We accept the following three methods of payment:

1. **Bank Wire** - Bank details can be sent upon request.
2. **Credit Card** - We can accept payment by credit card. Please inform us of the card details in advanced on our Order Form. Credit Card transactions are subject to a 5% service fee.

PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS. WE LOOK FORWARD TO SEEING YOU IN EDMONTON!

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):	☐ Direct to Event/Show Site	☐ 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/shown on your income tax return):		
Does this company have a Canadian Office? ☐ Yes ☐ No	Company headquarters located in Canada? ☐ Yes ☐ 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:
E-Mail:		

Shipper

☐ Same as Client		
Company Name:		U.S. IRS #:
Address:		
City:	State/Province:	Zip/Postal Code:
Country:	Contact Name:	Tel:
E-mail:		

Return Freight

☐ No Return Shipment ☐ Same as Shipper	☐ 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:

Transportation Quote Request

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

Shipper Information

Company:
Address:
City:
State/Prov: Zip/Postal Code:
Country:

Contact: Tel:
E-mail:

Date Shipment Available for Pick-up:
Operating Days *(e.g. Monday - Friday)*:
Operating Hours *(e.g. 8 am - 4 pm)*:
Loading Dock Onsite? ☐ Yes ☐ No

Delivery Information

Exhibitor Name:
Booth #:
Event Name:
Venue Name:
Venue Address:
City:
State/Prov: Zip/Postal Code:
Country:

Contact: Cell #:
E-Mail:

Must Deliver By (dd-mmm-yyy h:mm tt):

Service Requirements

Requested Service: ☐ Air ☐ Truck ☐ Other: _____

Additional Requirements: ☐ Lift Gate ☐ Inside Pick-up ☐ Inside Delivery ☐ Weekend Pick-up ☐ Weekend Delivery

☐ Please include Cargo Insurance on the estimate/quote.

Total Shipment Value*: _____ Currency: _____ *Detailed Commercial Invoice/Packing List, with values, must be provided.

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.

Shipment/Freight Information

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

Notes

Notes/Additional Information:

Advance Warehouse Information: To be completed if Cross Connect is NOT booking your transportation

Shipment Info.

Shipped Via (Carrier/Courier Name):
Carrier/Courier Service Type: ☐ Air/Express ☐ Ground
Total # of Pieces: Total Weight (lbs):
Tracking #'s:

- You are responsible for tracking your shipment to ensure timely arrival.
- Goods sent via Post or shipped C.O.D. will NOT be accepted for delivery.
- If you are shipping from outside of Canada, to avoid Customs Clearance delays, please ensure that you check the "Customs Clearance" box on the first page of this form and notify your Carrier/Courier that Cross Connect is your Customs Broker. Customs documents are required (please see your Exhibitor Manual).

Advance Warehouse Services include delivery to show site, but DO NOT include material handling services and charges. Your carrier must pick up your materials, directly from show site, at the end of the event.

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

Advance Warehouse Services are charged per delivery received. If you are shipping via courier, it is recommended that you ship on a single Waybill to avoid additional advance warehouse charges.

Billing & Payment Information

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

Company Name:			
Address:			
City:	State/Province:	Zip/Postal Code:	
Country:			
Contact Name:		Tel:	
E-mail:			
Second Contact Name (if applicable):		Tel:	
E-mail:			

Payment Information

MUST BE COMPLETED
Delinquent accounts will be charged for all collection, legal and administration fees

Charge to: ☐ Visa ☐ MasterCard ☐ 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: 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

Customs & Transportation Services Order Form

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

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS
Tel: 416-639-2176
E-mail: info@crossconnectcl.com

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):	☐ Direct to Event/Show Site	☒ 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?	☐ Yes ☒ 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

☒ 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

☐ No Return Shipment ☐ Same as Shipper	☒ 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

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: John Smith Date: 30-Sep-24

Printed Name: JOHN SMITH

Title: CEO

Cross Connect Internal Use Only

Notes:

Signature: Date:

Printed Name:

Title:

EXAMPLE

Transportation Quote Request

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

Shipper Information

Company: ABC COMPANY, INC.
Address: 123 SOMEPLACE AVENUE, SUITE 3
City: NEW YORK
State/Prov: NY Zip/Postal Code: 10093
Country: USA

Contact: JOHN SMITH Tel: 555-555-0000
E-mail: JSMITH@DOMAIN.COM

Date Shipment Available for Pick-up: 04-Oct-2024
Operating Days *(e.g. Monday - Friday)*: Monday - Friday
Operating Hours *(e.g. 8 am - 4 pm)*: 9 am - 5 pm
Loading Dock Onsite? ☒ Yes ☐ No

Delivery Information

Exhibitor Name: ABC COMPANY
Booth #: 1001
Event Name: NAME OF THE EVENT/SHOW
Venue Name: THE EVENT FACILITY
Venue Address: 600 CONVENTION CENTRE DRIVE
City: TORONTO
State/Prov: ON Zip/Postal Code: M0X 0X0
Country: CANADA

Contact: JOHN SMITH Cell #: 555-555-0000
E-Mail: JSMITH@DOMAIN.COM

Must Deliver By (dd-mmm-yyy h:mm tt): **28-Oct-2024 @ 10:00 am**

Service Requirements

Requested Service: ☐ Air ☒ Truck ☐ Other: _____

Additional Requirements: ☐ Lift Gate ☐ Inside Pick-up ☐ Inside Delivery ☐ Weekend Pick-up ☐ Weekend Delivery

☒ Please include Cargo Insurance on the estimate/quote.

Total Shipment Value*: 10,000.00 Currency: USD *Detailed Commercial Invoice/Packing List, with values, must be provided.

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.

Shipment/Freight Information

# 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		
		@ 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		
		@ 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		
		@ 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		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
3	**Total Pieces**						**Total Weight:**	1,800

Notes

Notes/Additional Information:
PLEASE INCLUDE BLANKETS & STRAPS

EXAMPLE

Advance Warehouse Information: To be completed if Cross Connect is NOT booking your transportation

Shipment Info.

Shipped Via (Carrier/Courier Name):
Carrier/Courier Service Type: ☐ Air/Express ☐ Ground
Total # of Pieces: Total Weight (lbs):
Tracking #'s:

- You are responsible for tracking your shipment to ensure timely arrival.
- Goods sent via Post or shipped C.O.D. will NOT be accepted for delivery.
- If you are shipping from outside of Canada, to avoid Customs Clearance delays, please ensure that you check the "Customs Clearance" box on the first page of this form and notify your Carrier/Courier that Cross Connect is your Customs Broker. Customs documents are required (please see your Exhibitor Manual).

Advance Warehouse Services include delivery to show site, but DO NOT include material handling services and charges. Your carrier must pick up your materials, directly from show site, at the end of the event.

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

Advance Warehouse Services are charged per delivery received. If you are shipping via courier, it is recommended that you ship on a single Waybill to avoid additional advance warehouse charges.

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

☐ Same as Shipper (page 1) ☒ 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		

Payment Information

MUST BE COMPLETED

Charge to: ☒ Visa ☐ MasterCard ☐ 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: *John Smith* 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

EXAMPLE

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

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

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.

COMMERCIAL INVOICE / PACKING LIST

!!! IMPORTANT CUSTOMS BROKER NOTE: THIS CIPL IS **ONLY FOR CANADIAN CUSTOMS CLEARANCE** S C STOMS CLEARANCE RE IRES A DIFFERENT FORM **!!!**

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

Shipper:	Consignee (Ship To):	Importer/Owner of Goods: ☐ Same as Shipper	Shipped Via:		*REMARKS ("X" each item)
			Shipped To:	☒ Adv. Whse ☐ Show Site	
			IRS #:		
			Pieces:		*A – TEMPORARY IMPORT
			Weight:	☐ kg ☒ lbs	*B – PERMANENT IMPORT
			Currency:	USD	*C – GIVEN AWAY / SOLD
			Ship Date:		
		Does this company have a Canadian Office?		(mm/dd/yyyy)	

# of Pieces	Type of Pieces	Qty	Description of Contents Please include Brand Name & Model # for all electronic equipment.	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

**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.

Signature: _____ Date: _____ (mm/dd/yyyy)

TEMPORARY IMPORT VALUE:

PERMANENT IMPORT VALUE:

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.

CROSSCONNECT
CUSTOMS & EVENT LOGISTICS

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

Shipper:	Consignee (Ship To):	Importer/Owner of Goods: ☒ Same as Shipper
ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000	ABC COMPANY, BOOTH # 1001 C/O NAME OF SHOW/EVENT VENUE NAME VENUE ADDRESS ONSITE CONTACT NAME & CELL PHONE #	ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093 JOHN SMITH - 555-555-0000 Does this company have a Canadian Office? No

Shipped Via:	TRANSPORTATION COMPANY NAME
Shipped To:	☒ Adv. Whse ☐ Show Site
IRS #:	12-3456789
Pieces:	3
Weight:	1,800 ☐ kg ☒ lbs
Currency:	USD
Ship Date:	06/15/2021 (mm/dd/yyyy)

*REMARKS ("X" each item)
*A – TEMPORARY IMPORT
*B – PERMANENT IMPORT
*C – GIVEN AWAY / SOLD

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

***Electronic equipment MUST include Brand Name & Model #.**

***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.**

***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.**

EXAMPLE

**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: 06/10/2021

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