



CROSSCONNECT

CUSTOMS & EVENT LOGISTICS

**Pacific Dental
Conference**
Vancouver, Canada

March 7-9, 2024

in conjunction with the
Canadian Dental Association



SHIPPING - CUSTOMS - ADVANCE WAREHOUSE

INTRODUCTION

Dear Exhibitor,

Cross Connect Customs & Event Logistics has been appointed the **OFFICIAL TRANSPORT CARRIER, CUSTOMS BROKER,** and **ADVANCE WAREHOUSE** for the **2024 Pacific Dental Conference (PDC 2024)** taking place at the **Vancouver Convention Centre** over the dates of **March 7-9, 2024**. To ensure your materials arrive "on time" in the most cost-efficient manner we suggest that you read these instructions in conjunction with the on-line exhibitor's manual provided by the PDC organizers. Our helpful instructions will assist you in preparing for the correct, and timely, dispatch of your exhibits to and from the **VANCOUVER CONVENTION CENTRE**. The PDC highly recommends that you use the services of Cross Connect for a complete logistics package. Our complete package will move your exhibit(s) door-to-door, from your office or warehouse, and back to your location after the exhibition.

Benefits of using Cross Connect:

- ✓ **PRIORITY MOVE-IN PRIVILEGES**: Exhibitors that use Cross Connect Shipping services receive priority delivery to the venue on Monday March 4th (exhibitor move-in begins Tuesday March 5th).
- ✓ **COMPLIMENTARY WAREHOUSING**: Exhibitors that use Cross Connect Shipping services receive complimentary advance warehousing.
- ✓ **WAREHOUSE WEIGHT CALCULATIONS**: Exhibitors that use Cross Connect Warehousing services pay less as we charge to the exact pound, we do not round up to the next 100 pounds.

IMPORTANT: Failure to comply with the deadlines, consignee, and document instructions, will cause unnecessary delays in customs clearance and may lead to additional charges. For this reason, if you will be using a freight forwarder or carrier other than Cross Connect, please be sure to pass these instructions on to them so they know to direct their pre-alerts to us.

The **Pacific Dental Conference** and **Cross Connect Customs & Event Logistics** will not accept responsibility for late arrivals, or non-deliveries, to the venue if these guidelines and/or recommendations are not followed.

Sincerely,

Cross Connect Event Logistics

E-mail: info@crossconnectcl.com

Website: www.crossconnectcl.com



SHIPPING INSTRUCTIONS / ARRIVAL DATES

ADVANCE WAREHOUSE LOCATIONS

For ease of receiving all advance shipments should be sent to Cross Connects **GROUND** or **AIR** advance warehouse. Cross Connect will deliver all materials we receive at the following advance warehouse locations directly to the Vancouver Convention Centre loading dock prior to exhibitor move-in. You must complete the Levy Show Service "Show Site Receiving" Material Handling forms.

Prior to shipping to either warehouse you must submit a completed Order Form to: info@crossconnectcl.com

GROUND SHIPMENTS

PDC 2024

(Insert Exhibiting Company Name, Booth # _____)

c/o Cross Connect / ABF

Unit # 174 - 17735 1st Avenue

Surrey, BC V3Z 9S1

CANADA

Rates: \$20.00 per 100 Lbs. (per Bill of Lading), min. charge 1,000 Lbs. (\$200.00)

Example: 1,137 Lbs. (\$20.00 x 11.37* = \$227.40)

*Note: Cross Connect does not round up to next 100 pounds, charged per pound.

(please use shipping label on page 4)

AIR & COURIER SHIPMENTS

PDC 2024

(Insert Exhibiting Company Name, Booth # _____)

c/o Cross Connect / Aero Pacific Express YVR

Unit # 102 - 4831 Miller Road

Richmond, BC V7B 1K7

CANADA

Rates: \$20.00 per 100 Lbs. (per Air Waybill), min. charge 500 Lbs. (\$100.00)

Example: 614 Lbs. (\$20.00 x 6.14* = \$122.80)

*Note: Cross Connect does not round up to next 100 pounds, charged per pound.

(please use shipping label on page 5)

- ➔ **Ground & Air Warehouse Receiving Dates:** January 29, 2024 – February 26, 2024
- ➔ **Warehouse Hours:** Monday - Friday, 9:00am-3:00pm (Closed: Evenings, Weekends, Stat Holidays)
- ➔ **Off-target Surcharge:** 25% applied to base rate for shipments received outside set receiving dates.
- ➔ **Shipments sent "C.O.D. – CASH ON DELIVERY" to either warehouse will not be accepted.**
- ➔ **Hot Shot Delivery Fee (Advance Warehouse to Vancouver Convention Centre):** Minimum \$625.00
- Freight received at either Advance Warehouse location after March 1, 2024 will incur this delivery fee for a dedicated truck to deliver late freight to the Vancouver Convention Centre.



PRE-ALERT / CUSTOMS DOCUMENTATION REQUIREMENTS

Please complete the **Cross Connect Order Form** and **Commercial Invoice Packing List (CIPL)** in this manual.

The CIPL should contain full detailed description of the contents, serial no.'s, customs HS/tariff codes, and quantity/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" on the Commercial Invoice Packing List should be addressed as follows:

PDC 2024
(Insert Exhibiting Company Name, Booth # _____)
c/o Vancouver Convention Centre
1055 Canada Place
Vancouver, BC V6C 0C3
CANADA

*****Please send Cross Connect draft copies of your 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 medical devices, pharmaceutical products, cosmetics, foodstuffs, beverages, certain electronic and telecommunication and military items, animal & plant products (CITES) will be subject to import licence 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/contractor's 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.

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 Customs & Transportation Order Form. Credit Card transactions are subject to a 5% service fee.
3. **Company Checks**

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

RUSH

PDC 2024

SHIPMENT FOR "GROUND" ADVANCE WAREHOUSE

SHIPPER: _____
(Name of company where shipment originates)

TO: _____
(Name of exhibiting company at the show)

BOOTH #: _____
(Insert your booth # at the show)

c/o: Cross Connect / ABF
Unit # 174 - 17735 1st Avenue
Surrey, BC V3Z 9S1
CANADA

CARRIER: _____
(Name of your Transportation Company)

NUMBER **OF** **PIECES**

GROUND ADVANCE WAREHOUSE SHIPMENTS SHOULD ARRIVE BETWEEN:
January 29, 2024 - February 26, 2024

RUSH

PDC 2024

SHIPMENT FOR "AIR" ADVANCE WAREHOUSE

SHIPPER: _____
(Name of company where shipment originates)

TO: _____
(Name of exhibiting company at the show)

BOOTH #: _____
(Insert your booth # at the show)

c/o: Cross Connect / Aero Pacific Express
Unit # 102 - 4831 Miller Road
Richmond, BC V7B 1K7
CANADA

CARRIER: _____
(Name of your Transportation Company)

NUMBER **OF** **PIECES**

AIR ADVANCE WAREHOUSE SHIPMENTS SHOULD ARRIVE BETWEEN:
January 29, 2024 - February 26, 2024

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

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:

City: 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:

City: State/Province: Zip/Postal Code:

Contact Name: Tel:

E-mail:

Billing

☐ Same as Shipper

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

Address: State/Province: Zip/Postal Code:

City: 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.) | 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 (wet ink signature required - digital signature NOT allowed)

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:

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

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): | <input type="checkbox"/> Direct to Event/Show Site | <input checked="" type="checkbox"/> Advance Warehouse | |
| | Exhibitor Name: | ABC COMPANY | | |
| | Event Name: | PACIFIC DENTAL CONFERENCE (PDC 2024) | | |
| | Facility/Venue Name: | VANCOUVER CONVENTION CENTRE - WEST | | |
| | Facility/Venue Address: | 1055 CANADA PLACE | | |
| | City: | VANCOUVER | State/Province: | BC |
| | On-site Contact: | JOHN SMITH | Zip/Postal Code: | V6C 0C3 |
| E-mail: | JSMITH@DOMAIN.COM | Cell #: | 555-555-0000 | |
| | | 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 | <input checked="" type="checkbox"/> Same as Shipper <input type="checkbox"/> No Return Shipment | |
| | Company Name: | ABC COMPANY |
| | Address: | 123 SOMEPLACE AVENUE, SUITE 3 |
| | City: | NEW YORK |
| | Contact Name: | JOHN SMITH |
| | E-mail: | JSMITH@DOMAIN.COM |
| | IRS / Importer #: | 12-3456789 |
| | Zip/Postal Code: | 10093 |
| | Tel: | 555-555-0000 |

| | | |
|---------|---|-------------------------------|
| Billing | <input checked="" type="checkbox"/> Same as Shipper | |
| | Company Name: | ABC COMPANY |
| | Address: | 123 SOMEPLACE AVENUE, SUITE 3 |
| | City: | NEW YORK |
| | Contact Name: | JANE DOE, ACCOUNTS PAYABLE |
| | E-mail: | JDOE@DOMAIN.COM |
| | GST/HST# (if applicable): | 123456789RM0001 |
| | Zip/Postal Code: | 10093 |
| | Tel: | 555-555-0001 |

MUST BE COMPLETED

| | | |
|-----------------------|--|--|
| Payment | Charge to: | <input checked="" type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express |
| | Cardholder Name: | JOHN SMITH |
| | Credit Card Number: | 1234 5678 9123 4567 |
| | CVV Number: | 123 |
| | 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: | <i>John Smith</i> | |
| Date: | 10-Jan-24 | |

| Freight | # 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 | | |
| | 3 | | | | | | | | 1,800 |

| | | |
|-----------------------------|-------------------------------|---|
| Shipment / Freight | Requested Service Level: | <input type="checkbox"/> Air <input type="checkbox"/> 2nd Day <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Other: |
| | Additional Services Required: | <input checked="" type="checkbox"/> Lift Gate <input type="checkbox"/> Inside Pick-up <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> 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: | 17-Jan-24 | Shipper Hours of Operation: 8:00 am to 4:00 pm Must Deliver By: Jan. 29 to Feb. 26, 2024 |

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-Jan-24

Title: CEO

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: | | | Consignee (Ship To): | | | Importer/Owner of Goods: <input type="checkbox"/> Same as Shipper | | | 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: | | | | | |
| | | | | | | | | | 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: _____

COMMERCIAL INVOICE / PACKING LIST



CROSSCONNECT
 CUSTOMS & EVENT LOGISTICS

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 PDC 2024 VANCOUVER CONVENTION CTR. 1055 CANADA PLACE VANCOUVER, BC V6C 0C3 ATTN: JOHN SMITH - 555-555-0000 | 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 Does this company have a Canadian Office? No | Shipped Via: TRANSPORTATION COMPANY NAME 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: 17-JAN-2024 (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 <small>Please include Brand Name & Model # for all electronic equipment.</small> | Origin | Weight in <u>lbs</u> (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 |

***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.**

***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.**

***Indicate the Country of Manufacture (where the goods are made); NOT the country of purchase.**

**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-JAN-2024