



SHIPMENT NOTIFICATION FORM (REQUIRED)

DEADLINE: MAY 6, 2011

SHIPMENTS WILL BE RECEIVED AND HANDLED IN ACCORDANCE WITH THE INFORMATION SET FORTH IN THE EXHIBITOR MANUAL. A METHOD OF PAYMENT FORM MUST ACCOMPANY THIS ORDER.

Booth Name: _____ Booth Number: _____

Contact Name: _____ Telephone: _____

ADVANCE SHIPMENTS TO THE WAREHOUSE \$66.00 per 100 lbs. (cwt)

Shipper/Carrier Name: _____ From City/ State _____

How will you ship: Common Carrier Van Line Company Truck Air Freight

Arrival Date: _____ Number of Pieces: _____ Weight: _____

Total Shipment: _____ lbs. @ \$66.00 per 100 lbs. = \$ _____

Carrier (If known): _____ PRO Number (if known): _____

Comments/Special Handling Requirements: _____

Attach separate sheet for multiple shipments if necessary.

DIRECT SHIPMENTS TO SHOW SITE \$70.30 per 100 lbs. (cwt)

Shipper/Carrier Name: _____ From City/ State _____

How will you ship: Common Carrier Van Line Company Truck Air Freight

Arrival Date: _____ Number of Pieces: _____ Weight: _____

Dimensions of Largest Piece: Height _____ Width _____ Length _____ Weight: _____

Total Shipment: _____ lbs. @ \$70.30 per 100 lbs. = \$ _____

Carrier (If known): _____ PRO Number (if known): _____

Comments/Special Handling Requirements: _____

Attach separate sheet for multiple shipments if necessary.

OUTBOUND SHIPMENTS

Shipper/Carrier Name: _____

How will you ship: Common Carrier Van Line Company Truck Air Freight

Departure Date: _____ Number of Pieces: _____ Weight: _____

Carrier (If known): _____ PRO Number (if known): _____

Mail or Fax this form to: NeoCon® World's Trade Fair 2011, Attn: Maribel Rodriguez, 222 Merchandise Mart Plaza, Suite 470, Chicago, IL 60654, 312.527.7078, FAX: 312.527.7998 www.exhibitorinfo.com/operationshelp

