



Global Transport and Logistics

Main Contact:

**Fairs & Exhibitions, Events
Request For Quotation**

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Show Name: IMTS 2018 - CHICAGO

Exhibitor: _____

Hall: _____ Booth: _____ Move-in Date: _____

Pick-up requested from your facility? Yes No If yes, pick-up date: _____

Pick-up address: _____

Mode of Import in USA: Temp Definitive

Mode of transport: Ocean Air Truck

Insurance: Yes No If yes, value in USD: _____

Hazardous? Yes No If yes, type of haz mat: _____

Does the shipment contain lithium ion batteries? Yes No

Shipper Name: _____ Tel: _____ Email: _____

Shipper Address: _____ State: _____ Zip: _____

Billing name / address same as shipping? Yes No (If not, fill in the information below)

Billing Name: _____ Telephone: _____

Billing Address: _____ State: _____ Zip: _____

Billing Party Account Number: _____

Number of Packages	Description	Weight in lbs. (Gross/each)	Dimensions (LxWxH Inch)

Print name: _____ Date: _____

Email address: _____

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