Order Form

Customs and Transportation Services

Please accept this as authority for ICECORP Logistics Inc. dba Mendelssohn Commerce of 1600 Courtneypark Dr. E., Mississauga, ON L5T 2W8; business number 121767677RM0001, 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 ICECORP Logistics Inc. Standard Trading Conditions, including but not limited to:



One Source, One Solution

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

The transportation, warehousing, and distribution of such goods.

In signing this form, I grant ICECORP Logistics Inc. dba Mendelssohn Commerce full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to the event and/or shipment(s) detailed below. Event Name: **Event Dates:** Services Required: (please check one) Customs Clearance and Transportation Customs Clearance Only ☐ Transportation Only **Shipper Information Delivery Information** Company Name: Exhibitor/Company Name: IRS # or U.S. Tax Identification #: Booth #: **Event Name:** Facility Name: Address: Address: City: Province/State: Postal/Zip: Province/State: Postal/Zip: City: On-Site Contact: Cell #: Contact Name: Tel: E-mail: Fax: E-mail: **Billing / Invoicing Information Return Freight** ☐ Same as Shipper ☐ Same as Shipper Company Name: Company Name: IRS # or U.S. Tax Identification #: Importer # (if applicable): Address: Address: Province/State: City: Province/State: Postal/Zip: City: Postal/Zip: Contact Name: Tel: Contact Name: Tel: E-mail: E-mail: Fax Shipment Information Carrier Name (if not using Mendelssohn Commerce): Contact Name: Tel: Pick-Up Date: Hours of Operation: **Delivery Date:** Time: ☐ 2nd Dav □ Air ☐ Truck Requested Service Level: Additional Services Required: ☐ Lift Gate ☐ Inside Pick-Up/Delivery # of Pieces | Box/Crate/Skid etc. Length Width Height Per Piece Total @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: @ Dimensions (Inches) Each: @ Weight (lbs) Each: Total Total Weight: Cargo Insurance / Declared Value This shipment is covered under basic carrier liability, direct with the carrier. Maximum liability (declared value for carriage of this shipment) is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged, but not less than \$50.00 per shipment UNLESS additional Cargo Insurance has been arranged with Mendelssohn Commerce. Subject to the terms and conditions of liability for loss/damage, stated below. Please contact Mendelssohn Commerce for more Cargo Insurance information. Terms of Payment and Security Deposit (Must be completed) **Due to Payment Card Industry (PCI) compliance rules, we will only be able to obtain your Credit Card Number by phone or fax. A separate Credit Card Authorization form has been provided. Please check off the payment method that has been completed for this order: Completed Credit Card Authorization or Preliminary Invoice has been faxed. Incomplete Credit Card Authorization or Preliminary Invoice (without Credit Card #) has been e-mailed. I have provided Credit Card # by telephone. Terms and Conditions This order is placed with the specific understanding that we hereby release ICECORP Logistics dba Mendelssohn Commerce (Mendelssohn Commerce) and/or agents from all liability for loss, damage and/or theft to our merchandise and property, no matter how caused, and we have insured all such properties being handled; 1) Mendelssohn Commerce shall not be responsible for damage to uncrated materials, improperly packaged goods or concealed damage. 2) Mendelssohn Commerce will not be responsible for any loss/damage/delay due to fire, acts of god, strikes, lock outs of any kind beyond its control. 3) Mendelssohn Commerce liability is outlined in the above Cargo Insurance / Declared Value section. We are self-insured, or have made other appropriate insurance arrangements and paid applicable charges. 4) Mendelssohn Commerce shall not be liable to any extent whatsoever for the actual, potential or assumed losses or profits or revenues, or for any collateral costs which may result from any loss or damage to materials. 5) All hazardous materials have been declared, and we abide by all Federal, Provincial, State and Local laws Client Signature Accepted by Mendelssohn Commerce I have read and agree to the Terms and Conditions of this Contract. Signature: Signature: Name: Name: Title: Title: Date: Date:

Order Form

Date:

01/29/2014

Customs and Transportation Services

Please accept this as authority for ICECORP Logistics Inc. dba Mendelssohn Commerce of 1600 Courtneypark Dr. E., Mississauga, ON L5T 2W8; business number 121767677RM0001, 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 ICECORP Logistics Inc. Standard Trading Conditions, including but not limited to:



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 The transportation, warehousing, and distribution of such goods.

MENDELSSOHN One Source. One Solution.

		relation to the event and/or chinment(s) de			oint a sub-age	nt, where required.			
This authority is granted for all shipments in relation to the event and/or shipment(s) detailed below Event Name: INT'L MARKETING EVENT				Event Dates: APR. 15-17, 2014					
	equired: (please check s Clearance and Tran		arance O	nly		☐ Transportation Or			
Shipper Information					Delivery Information				
	ame: ABC DISTRIBUT	TING COMPANY	 			Name: ABC DISTRIBUTIN	IG COMPAN	ΙΥ	
	S. Tax Identification #:					MARKETING EVENT	Booth #:		
	25 ELM STREET			Facility Na	ame: EVE	NT FACILITY			
D	OCK DOOR #2			Address:	278 SOM	EWHERE PLACE			
City: CHICA	AGO Province/S	tate: II Postal/7in: 6666	6	City: TOPONTO Province/State: ON Postal/7in: M5M 2R2					
City: CHICAGO Province/State: IL Postal/Zip: 66666 Contact Name: JOHN DOE Tel: 708-555-1200				City: TORONTO Province/State: ON Postal/Zip: M5M 2B2 On-Site Contact: SANDY SMITH Cell #:708-555-1234					
E-mail: JDC	DE@DOMAIN.COM	Fax: 708-555-222	22			OOMAIN.COM			
Return F			per			ing Information		as Shipper	
Company N	ame: ABC DISTRIBUT	FING COMPANY				BC DISTRIBUTING COMPA		ITING DEPT	
	S. Tax Identification #:	12-3456789				able): 123456789RT000	1		
1	25 ELM STREET OCK DOOR #2		 	Address:	345 UAK /	AVE.			
City: CHIC		tate: IL Postal/Zip: 6666	6	City: CHI	CAGO	Province/State: IL	Postal/Zip	: 66667	
Contact Nar	me: JOHN DOE	Tel: 708-555-120		Contact N	ame: JOE	SMITH	Tel: 708-5		
E-mail: JDC	DE@DOMAIN.COM			E-mail: JS	SMITH@D	OMAIN.COM	Fax: 708-	555-1266	
Shipmen	t Information	_							
	·	elssohn Commerce): MENDELSSOHN							
Pick-Up Dat	te: APR. 03/14	Hours of Operation: 8:00 AM -			ate: APR	. 14/14 Time: 11:	00 AM		
	Service Level:	☐ Air ☐ 2 nd Day		Truck					
Additional S	ervices Required:	☐ Lift Gate ☐ Inside Pid	ck-Up/Del	ivery					
# of Pieces	Box/Crate/Skid etc.		Length	Width	Height		Per Piece	Total	
2	SKIDS	@ Dimensions (Inches) Each:	48	48	48	@ Weight (lbs) Each:	375	750	
4	CRATES	@ Dimensions (Inches) Each:@ Dimensions (Inches) Each:	45	47	60	@ Weight (lbs) Each:@ Weight (lbs) Each:	500	2,000	
		@ Dimensions (Inches) Each:				@ Weight (lbs) Each:			
		@ Dimensions (Inches) Each:				@ Weight (lbs) Each:			
6	Total					To	tal Weight:	2,750	
Cargo In	surance / Decla	red Value							
This shipment is covered under basic carrier liability, direct with the carrier. Maximum liability (declared value for carriage of this shipment) is agreed to and understood to be \$0.50 per pound multiplied by the number of pounds for that part of the shipment lost or damaged, but not less than \$50.00 per shipment UNLESS additional Cargo Insurance has been arranged with Mendelssohn Commerce. Subject to the terms and conditions of liability for loss/damage, stated below. Please contact Mendelssohn Commerce for more Cargo Insurance information.									
Terms of	f Payment and S	Security Deposit (Must b	e com	oleted)					
		(PCI) compliance rules, we will or as been provided. Please check of						eparate	
	Credit Card Authorization form has been provided. Please check off the payment method that has been completed for this order: Completed Credit Card Authorization or Preliminary Invoice has been faxed.								
Incomplete Credit Card Authorization or Preliminary Invoice (without Credit Card #) has been e-mailed. I have provided Credit Card # by telephone.									
Terms ar	nd Conditions								
This order is plated loss, damage at responsible for acts of god, stril have made other assumed losses	aced with the specific unders nd/or theft to our merchandis damage to uncrated materia kes, lock outs of any kind be er appropriate insurance arra	standing that we hereby release ICECORP I see and property, no matter how caused, and ils, improperly packaged goods or conceale eyond its control. 3) Mendelssohn Commer angements and paid applicable charges. 4) or any collateral costs which may result from	d we have in d damage. ce liability is Mendelsso	sured all such 2) Mendelssol outlined in the hn Commerce	properties be nn Commerce above Cargo shall not be I	ing handled; 1) Mendelssohn Co will not be responsible for any lo b Insurance / Declared Value sec iable to any extent whatsoever fo	mmerce shall no coss/damage/delaction. We are se for the actual, pot	ot be lay due to fire, elf-insured, or tential or	
Client Signature Accepted by Mendelssohn Commerce									
I have read and a	agree to the Terms and Conditi	ons of this Contract.	─ ┤						
Signature:	Signature: Ans. Signature				Signature:				
	Name: JOE SMITH				Name:				
Title: OWNER / PRESIDENT				Title:					

Date:



Agence des services frontaliers du Canada

CANADA CUSTOMS INVOICE FACTURE DES DOUANES CANADIENNES

PROTECTED PROTÉGÉ	В	when completed une fois rempli
	Page	_

						of de	
Vendor (name and address) - Vendeur (nom et adresse)			direct shipment to	Canada - Date	e d'expédition directe ve	•	
			ferences (include éférences (inclure		rder No.) nande de l'acheteur)		
Consignee (name and address) - Destinataire (nom et adresse)			er's name and ac adresse de l'ache				
		6. Country of transhipment - Pays de transbordement					
		7. Country of origin of goods Pays d'origine des marchandises IF SHIPMENT INCLUDES GOODS OF DIFFERENT ORIGINS ENTER ORIGINS ACAINST ITEMS IN 12. SI L'EXPÉDITION COMPREND DES MARCHANDISES D'ORIGINES DIFFÉRENTES, PRÉCISEZ LEUR PROVENANCE EN 12.					
Transportation: Give mode and place of direct shipment to Canada Transport : Précisez mode et point d'expédition directe vers le Canada			9. Conditions of sale and terms of payment (i.e. sale, consignment shipment, leased goods, etc.) Conditions de vente et modalités de paiement (p. ex. vente, expédition en consignation, location de marchandises, etc.)				
		10. Currenc	y of settlement -	Devises du paie	ement		
11. 12. Specification of commodities (kind of packages, marks and r	numbers, general		13. Quan		Selling pr	ice - Prix de vente	
Number of packages Nombre de colis description and characteristics, i.e., grade, quality) Désignation des articles (nature des colis, marques et numére et caractéristiques, p. ex. classe, qualité)	ros, description générale		(state Quan (précisez	tité	14. Unit price Prix unitaire	15. Total	
18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box Si tout renseignement relativement aux zones 1 à 17 figure sur une ou des factures commerciales ci-attachées, cochez cette case Commercial Invoice No N° de la facture commerciale			Net		Gross - Brut	17. Invoice total Total de la facture	
 Exporter's name and address (if other than vendor) Nom et adresse de l'exportateur (s'il diffère du vendeur) 		20. Originato	or (name and add	dress) - Expédit	eur d'origine (nom et ac	(resse)	
21. Agency ruling (if applicable) - Décision de l'Agence (s'il y a lieu)			22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cochez cette case				
(i) Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada (ii) Costs for construction, erection and assembly incurred after importation into Canada (iii) Amounts for commissions			otal à la zone 17, précisez : es, expenses and insurance shipment to Canada t, dépenses et assurances dition directe vers le Canada sions other than buying Cochez (s'il y a lieu) : (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser Des redevances ou produits ont été ou seront versés par l'acheteur			iaser ' ont été ou seront	
d'assemblage après importation au Canada pour l'achat (iii) Export packing (iii) Export packing			es que celles versées (ii) The purchaser has supplied goods or services for use in the production of these goods L'acheteur a fourni des marchandises ou des services pour la production de ces marchandises			hese goods chandises ou des	
Le coût de l'emballage d'exportation Le coût de l'emballag Dans ce formulaire, toutes les expressions désignant des p				nmes et les fem	mes.		

Agence des services frontaliers du Canada

CANADA CUSTOMS INVOICE FACTURE DES DOUANES CANADIENNES

PROTECTED PROTÉGÉ	В	when completed une fois rempli

						1 of de 1	
Vendor (name and address) - Vendeur (nom et adresse)			Date of di	irect shipment to Canada - Da	te d'expédition directe ve	ers le Canada	
ABC Distributing Company			4/3/2007				
125 Elm Street							
Chicago,		3.	Other references (include purchaser's order No.) Autres références (inclure le n° de commande de l'acheteur)				
66666-6	666	10	10-999999				
4. Consign	nee (name and address) - Destinataire (nom et adresse)	5.		er's name and address (if other			
ABC Dis	tributing Company / Booth 234		Nom et a	dresse de l'acheteur (s'il diffèr	e du destinataire)		
	ional Computing Event	N	No sale ir	nvolved			
c/o Even	t Facility						
	where Street						
Toronto,		6.	Country of transhipment - Pays de transbordement				
M7W 2P	0	١	N/A				
		7.	Country o	of origin of goods	IF SHIPMENT INCLUDES G	GOODS OF DIFFERENT ORIGINS	
				igine des marchandises ious - See Below	SI L'EXPÉDITION COMPRE DIFFÉRENTES, PRÉCISEZ	ITEMS IN 12. END DES MARCHANDISES D'ORIGINES LEUR PROVENANCE EN 12.	
	ortation: Give mode and place of direct shipment to Canada ort : Précisez mode et point d'expédition directe vers le Canada	9.		s of sale and terms of paymer consignment shipment, lease			
Mandala	sohn Commerce, Chicago, IL			s de vente et modalités de pa nte, expédition en consignatio		ises, etc.)	
Menueis	sonn commerce, chicago, 1L		No sale ir		,	,	
				of settlement - Devises du pa	ement		
			JSD				
11.	12. Specification of commodities (kind of packages, marks and numbers, g	general		13. Quantity	Selling pri	ice - Prix de vente	
Number of packages	description and characteristics, i.e., grade, quality) Désignation des articles (nature des colis, marques et numéros, descri	iption générale		(state unit) Quantité	14. Unit price Prix unitaire	15. Total	
Nombre de colis	et caractéristiques, p. ex. classe, qualité)			(précisez l'unité)	Fitx utilitalite		
2 pcs	Wooden Crates - Display Booth (backwalls, lights, gra	phics carpets) - U	5A	1	\$5,000.00	\$5,000.00	
- 700		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			40,000.00	40,000.00	
2 pcs	Cartons - Advertising Brochures / Catalogs / Technic	al Literature - USA	A	1000	\$0.10	\$100.00	
·							
1 pc	Carton - Plastic Key Chains - CHINA			50	\$0.50	\$25.00	
1 pc	Carton - Books - USA			50	\$1.00	\$50.00	
3 pcs	Cases - Computers - CHINA			3	\$1,000.00	\$3,000.00	
2 pcs	Cases - Computer Monitors - JAPAN fields 1 to 17 are included on an attached commercial invoice, check this bo	OV.		2 16. Total weight - Poid	\$500.00	\$1,000.00 17. Invoice total	
Si tout re	enseignement relativement aux zones 1 à 17 figure sur une ou des factures			Total weight - Poid Net	Gross - Brut	Total de la facture	
	ciales ci-attachées, cochez cette case rcial Invoice No N° de la facture commerciale			N/A	300 lbs	\$9,175.00	
	r's name and address (if other than vendor)	20	. Originator	r (name and address) - Expéd	teur d'origine (nom et ad	lresse)	
Nom et	adresse de l'exportateur (s'il diffère du vendeur)	A	ABC Distributing Company				
			125 Elm Street				
		C	hicago, I	IL 66666-6666			
21 Amanau	willing (if analizable). Désiring de ll'Arange (all un lieu)	22					
21. Agency ruling (if applicable) - Décision de l'Agence (s'il y a lieu)			22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cochez cette case				
23. If include	ed in field 17 indicate amount: 24. If no	ot included in field 17 indic			(if applicable):		
Si compris dans le total à la zone 17, précisez : Si non compris dans le total à la					(s'il y a lieu) :		
(i) Transportation charges, expenses and insurance (i) Transportation charges from the place of direct shipment to Canada Les frais de transport, dépenses et assurances Les frais de transport, depenses et assurances			ss, expenses and insurance (i) Royalty payments or subsequent proceeds are shipment to Canada paid or payable by the purchaser Des redevances ou produits ont été ou seront				
à partir du point d'expédition directe vers le Canada jusqu'au point d'expédit			enses et as i directe ver	rs le Canada vers	és par l'acheteur	ont ete ou seront	
i	Costs for construction, erection and assembly ncurred after importation into Canada (ii).	Amounts for commissions om lissions	other than I	buying A			
Les coûts de construction, d'érectin et d'assemblage après importation al Canada d'assemblage après importation al Canada de l'assemblage après importation d'assemblage après importation			goods or services hese goods				
		<u> </u>	JL		i s pour la production d	nandises ou des le ces	
(iii) Export packing (iii) Export packing				mar	chandises		
Le coût de l'emballage d'exportation Le coût de l'emballage			xportation				
					<u>—</u>		
	Dans ce formulaire, toutes les express	sions désignant des person	nes visent a	à la fois les hommes et les fer	nmes.		



Credit Card Authorization Form

- **Due to Payment Card Industry (PCI) compliance rules, we will only be able to obtain your Credit Card Number by phone or fax.
- **DO NOT e-mail this form. If you are unable to fax, please contact our office for instructions.

**Please complete this form, and fax it to 514-396-5547.

NOTE: This fax # is used ONLY for receipt of Payment Information. It is located in a secured area that is NOT accessible for receipt of other documents and shipment information. All non-payment information (Order Forms, Invoices, Bills Of Lading, etc.) should be sent via e-mail, or faxed to 514-849-3446.

Event Name:					
Event Dates:					
Invoicing Information					
Exhibitor / Company Name:					
Address:					
City:	Province/State:				
Postal/Zip Code:	Telephone:				
E-mail:					
Credit Card Information					
Charge to:	☐ American Express				
Cardholder Name:					
Card Account Number:					
Expiry Date:	Security Number:				
I hereby authorize the use of this credit card for payment of services relative to this event. I understand that a 2% administrative fee (minimum \$50.00) will be charged for all credit card declines.					
Cardholder's Signature:	DateÁÇ { BàåĐ^^^D				

Mendelssohn Event Logistics dba MENDELSSOHN COMMERCE, Division of ICECORP Logistics Inc.

TORONTO, Head Office MTCC, North Building MTCC, South Building **MONTREAL CALGARY** VANCOUVER 2116 - 27TH Ave. N.E., 255 Front St. W. 1600 Courtneypark Dr. E 222 Bremner Blvd., 276 Rue St. Jacques, 608 Annance Court, Mississauga, ON Toronto, ON Room 825B Suite 818, Suite 325 Unit 3 L5T 2W8 M5V 2W6 Toronto, ON Montreal, QC Calgary, AB Delta, BC T: 416.863.9339 T: 905.673.5445 M5V 3L9 H2Y 2G4 T2E 7A6 V3M 6Y8 F: 905.673.2574 F: 416.863.5149 T: 416.863.9339 T: 514.987.2700 T: 403.291.1694 T: 604.687.5535 Payment Fax (Credit Payment Fax (Credit F: 416.591.8589 F: 514.849.3446 F: 403.291.7028 F: 604.687.1463 Card Secure): Payment Fax (Credit Payment Fax (Credit Payment Fax (Credit Payment Fax (Credit Card Secure): 416.863.0301 1.855.762.1145 Card Secure): Card Secure): Card Secure): Card Secure): 416.863.0301 514.396.5547 1.855.762.1145 1.855.762.1145