Outbound Material Handling

E Z EXPO SERVICES

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Company Name		Booth #	
Please fill out Ou	ıtbound Shipping In	formation below.	
Ship To:			
Exhibitor's Carr	eier:		
	responsible to sched ake sure that the cari ime.	• •	•
Date	Time		_
Please fill in the pick up your ship	date and time that pment.	you have schedul	led your carrier to
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ALL FREIGHT MUST SUBJECT TO FORCE	BE PICKED UP BY(D REMOVAL AT EXHIBITO	ON OR'S EXPENSE.	_ OR WILL BE