



**SHEPARD EXPOSITION SERVICES**  
**MATERIAL HANDLING AUTHORIZATION**  
**AND TRANSPORTATION AGREEMENT**

RCVD \_\_\_\_\_ BY \_\_\_\_\_

**PLACE BOL # HERE**

CHECKER

RATE QUOTE  BASED ON \_\_\_\_\_ LBS

LOADER

**EXHIBITOR: PLEASE RETURN COMPLETED AGREEMENT TO THE SHEPARD CUSTOMER SERVICE CENTER**

Booth Number <b>123</b>	Carrier <b>Olympic Logistics</b>	Show <b>ProMat</b>	Exhibitor Phone # <b>312-555-5555</b>		
<b>FROM ABC Manufacturing</b>		<b>TO ABC Manufacturing</b>			
Facility/Show <b>McCormick Place</b>		Delivery Address <b>100 E Roosevelt</b>			
Facility Address <b>2301 Lake Shore Drive</b>					
City <b>Chicago</b>		City <b>Chicago</b>			
State <b>IL</b>	Zip <b>60616</b>	State <b>IL</b>	Zip <b>60605</b>	Phone <b>312-555-5555</b>	
Type of Service: <input checked="" type="checkbox"/> <b>Ground*</b> <input type="checkbox"/> <b>Next Day Air*</b> <input type="checkbox"/> <b>2nd Day Air*</b> * See limits of liability					
<b>SPECIAL INSTRUCTIONS</b> Use this area to give specific pickup or delivery information <b>Liftgate</b>					
No. Pcs.	Description of articles	Weight	Exceptions		
	Crates Exhibition Material (wooden) KD				
	Cases/Trunks (Fiber)				
<b>4</b>	Skids/Pallets	<b>900</b>			
	Carpet				
	Boxes and/or Cartons				
	TV/Monitors				
	Other:				
<b>4</b>	<b>&lt;--- TOTAL PIECES</b>	<b>900</b>	<b>&lt;--- TOTAL WEIGHT SUBJECT TO VERIFICATION AND CORRECTION</b>		
In the event your designated carrier fails to show by {forcefreight}, please select an option: <input type="checkbox"/> Reroute via carrier designated by Shepard <input checked="" type="checkbox"/> Deliver to local warehouse at exhibitor expense (\$400 minimum)		Fr. Charges Collect <input type="checkbox"/> Charges Prepaid <input type="checkbox"/> Bill To: ↓			
Exhibitor Signature <u>John Doe</u>		Exhibitor Company Name <b>ABC Manufacturing</b>			
Reroute via <u>Olympic Logistics</u> by _____		Billing Address <b>100 E Roosevelt</b>			
Date _____ Time _____		City <b>Chicago</b> State <b>IL</b> Zip <b>60605</b> NOTE: ADDITIONAL FREIGHT CHARGES MAY APPLY DUE TO FUEL SURCHARGES AND DELIVERY REQUIREMENTS			
<b>AUTHORIZATION FOR SERVICES IMPORTANT! PLEASE READ CAREFULLY</b> You are entering into a contract which defines the respective responsibilities and Liabilities of The Parties. Terms and Conditions of the contract are provided with this form. Charges for transportation services provided by Shepard Exposition Services shall be billed to the credit card on file: Type of card <u>Visa</u> ending in <u>5555</u> (last 4 digits). Shipper's signature indicates authorization for services, correctness of above information and receipt of and agreement to the Terms and Conditions of Contract.		<b>Above listed articles received in good condition. Except as noted.</b>			
Shipper (print) <b>John Doe</b>		Carrier Name (print)			
Signature <u>John Doe</u> Date <b>01/01/2026</b>		Driver (print)			
		Signature		Date	
		Carrier Telephone #		Time	