5.7 GES BILL OF LADING (BOL) SAMPLE

At the break of the show, you must complete the GES Bill of Lading (BOL) fully and accurately as shown below. This is a requirement for ALL freight that is not being hand-carried out of the facility through the front door. Significant shipping delays, additional costs and potential loss of shipment may result from inaccurate or incomplete Bills of Lading

Step 1 Contact your freight carrier prior to the close of the show to schedule a pick-up at the show. Your driver needs to check in at the GES freight desk upon arrival. If you do not have a freight carrier, GES Logistics can handle your shipping needs

Step 2 After your empty containers have been returned, pack and label your freight for shipping

Step 3 Complete the entire GES BOL as shown below

Step 4 Bring the completed BOL to the GES Service Desk

Step 5 If your freight carrier driver has checked in at the GES freight desk at show site, GES will then contact the driver once GES has the completed BOL

FOR GES USE ONLY
LOGISTICS ROUTING
JOB#
CUSTOMER# CC ON FILE ☐
RECEIVED (DATE/TIME/NAME)

GES

GES FORM #1087 Rev. (07.06)
DRIVER AFFIX PRO NUMBER LABEL HERE

PRESS HARD - YOU ARE MAKING 5 COPIES
ORDER FORM FOR MATERIAL HANDLING SERVICES
STRAIGHT BILL OF LADING - NOT NEGOTIABLE

INSTRUCTIONS: MUST BE LEGIBLY PRINTED IN INK. COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO GES SERVICENTER™ WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

2825178

FROM:
Exhibiting Company Name YOUR COMPANY Booth No. YOUR BOOTH #
Shipping Location/Exhibit Facility CURRENT SHOW LOCATION City ____ State ____ Zip ____
Name of Event CURRENT SHOW YOU'RE ATTENDING Date Prepared ____

NUMBER OF SEPARATE SHIPMENTS IN BOOTH: 1 2 3 4 OR MORE

TO:
Consigned to (Ship to) ABC COMPANY Booth No. TO YOUR NEXT SHOW
Destination (Street Address) 1234 ANYWHERE ST.
City ANY CITY State ANY STATE Zip 12345
Attention JOHN DOE Name of Event EVENT SHIPMENT IS GOING TO, IF APPLICABLE

SHIP VIA: ☒ GES Logistics ☐ Other Carrier ____ ☐ Exhibitors Vehicle ____
MODE: ☐ Ground ☐ Air (☐ Next Day, ☐ 2nd Day, ☐ Deferred) ☐ Vanline ☐ International ☐ Other ____ ☐ Residential ☐ Inside Delivery
HAZARDOUS MATERIALS CONTACT NUMBER ( ) ____ - ____
↓ Mark "X" in the H/M column to designate hazardous materials as defined in Department of Transportation Regulations

CHECKER	H/M	PIECES	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT (Sub. to Cor.)
			Crates (wooden) Exhibition Material KD	
			Cartons (Cardboard)	
			Fiber Cases/Trunks	
			Skids/Pallets	
			Carpets (Color ____)	
			Padded Display	
			Machines	
			Miscellaneous (need description)	
			TOTAL Approximate weight of your shipment -->	

FOR GES USE ONLY
TRAILER NO.
DATE/TIME LOADED
CHECKER SIGNATURE

SAMPLE

Make sure to mark a service level.
Check one or both if applicable

BILL FREIGHT CHARGES TO: Company Name Your Company on File Attention ____
Permanent Address of Company: Street Your Address on file w/ GES
City Your City State ____ Zip ____
Telephone No. ( ) ____ - ____ Fax No. ( ) ____ - ____

IN THE EVENT SHIPMENT HAS NOT BEEN PICKED UP BY THE SHOW DEADLINE, GES IS AUTHORIZED TO:
☒ 1) Use GES Logistics or carrier of GES choice to provide transportation and charge credit card, or invoice according to GES payment policy.
☐ 2) Return shipment to warehouse, assess all associated charges and charge credit card, or invoice according to GES payment policy.
(FAILURE TO SELECT ONE OF THE ABOVE OPTIONS WILL RESULT IN ROUTING AT GES DISCRETION)

EXCEPTION INFO
CAUSE
ACTION
DATE/TIME
NAME

Mark if purchasing EDV.

NOTE 1: STOP! YOU MUST READ THE BACK OF THIS FORM BEFORE GOING ANY FURTHER....
I HAVE READ THE TERMS AND CONDITIONS SET FORTH ON THE BACK OF THIS FORM AND I UNDERSTAND THE CONTENTS THEREOF.
I HAVE THE AUTHORITY TO BIND THE ABOVE-REFERENCED EXHIBITING COMPANY, WHICH HEREBY ACCEPTS THE TERMS AND CONDITIONS SET FORTH ON BOTH SIDES OF THIS FORM.

NOTE 2: LIABILITY IS LIMITED TO $0.50 PER POUND PER PACKAGE, $100.00 PER PACKAGE, OR $1,500.00 PER OCCURRENCE, WHICHEVER IS LESS, UNLESS A HIGHER VALUE IS DECLARED.

NOTE 3: DECLARED VALUE ____. EXCESS DECLARED VALUE IS AVAILABLE FROM GES UP TO $100,000.00.
EXCESS DECLARED VALUE IS NOT AVAILABLE FOR ITEMS LISTED ON THE BACK OF THE FORM.
✔ CHECK HERE IF REQUESTING EXCESS DECLARED VALUE ($1.00 PER $100.00 OF EXCESS VALUATION WILL BE ASSESSED, $50.00 MIN CHG).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between GES and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by GES and are available to the shipper on request;

PRINT NAME: *JOHN DOE / MARY JANE* **DATE:** ____
EXHIBITOR SIGNATURE: *John Doe / Mary Jane*
This is to certify that the above named articles are properly packaged, marked and labeled, and are in proper condition for transportation according to the applicable government regulations.

Received in apparent good order, except as noted:
Carrier Name ____ Date ____
Agent/Driver (Signature) ____
Agent/Driver (Print) ____ Phone ____