

CANADA CUSTOMS INVOICE

PAGE _____ **of** _____

1. Vendor (Name and Address)	2. Date of Direct Shipment to Canada
	3. Other Reference (include Purchaser's Order No.)

4. Consignee (Name and Address)	5. Purchaser's Name and Address (if other than consignee)
	6. Country of Transshipment

8. Transportation: Give Mode and Place of Direct Shipment to Canada	7. Country of Origin of Goods	If shipment includes goods of different origins enter origins against items in 12.
	9. Conditions of Sale and Terms of Payment (i.e. Sale Leased Goods Consignment Shipment, etc..)	
	10. Currency of Settlement	

11. No. of Pkgs.	12. Specification of Commodities (Kind of Packages, Marks and Numbers, General Description and Characteristics, i.e. Grade, Quantity)	13. Quantity (state unit)	Selling Price	
			14. Unit Price	15. Total

18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box. Commercial Invoice No. <input style="width: 50px; height: 20px;" type="checkbox"/>	16. Total Weight	17. Invoice Total
	Net <input style="width: 50px;" type="text"/>	Gross <input style="width: 50px;" type="text"/>
		\$ <input style="width: 50px;" type="text"/>

19. Exporter's Name and Address (if other than Vendor)	20. Originator (Name and Address)
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21. Departmental Ruling (if applicable)	22. If fields 23 to 25 are not applicable, check this box. <input style="width: 40px; height: 25px;" type="checkbox"/>
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23. If included in field 17, indicate amount: (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada \$ _____ (ii) Costs for construction, erection and assembly incurred after importation into Canada \$ _____ (iii) Export Packing \$ _____	24. If not included in field 17, indicate amount: (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada \$ _____ (ii) Amounts for commissions other than buying commissions \$ _____ (iii) Export Packing \$ _____	25. Check (if applicable) (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser (ii) The purchaser has supplied goods or services for use in the production of these goods
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North American Free Trade Agreement

CERTIFICATE OF ORIGIN

Please Print or type

(Instructions Attached)

<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> 1 Exporter's Name and Address: 2 Blanket Period: </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div style="text-align: center;"> D D M M Y Y <table border="1" style="margin: 0 auto; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> From </div> <div style="text-align: center;"> D D M M Y Y <table border="1" style="margin: 0 auto; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> To </div> </div> </div>											<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> 3 PRODUCERS NAME AND ADDRESS 4 Importer's Name and Address: </div> <div style="text-align: center; font-size: 1.2em; margin-top: 20px;"> AVAILABLE UPON REQUEST </div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; border-top: 1px solid black; padding-top: 5px;">Tax Identification Number:</div> <div style="width: 45%; border-top: 1px solid black; padding-top: 5px;">Tax Identification Number:</div> </div> </div>
<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between; border-bottom: 1px solid black;"> 5 Description of Goods 6 HS Tariff Classification Number 7 Preference Criterion 8 Producer 9 Net Cost 10 Country Of Origin </div> <div style="height: 200px;"></div> </div>											
<div style="border: 1px solid black; padding: 5px;"> <p>I certify that:</p> <ul style="list-style-type: none"> <input type="checkbox"/> The information on this document is true and accurate and I assume the responsibility for proving such representations. I understand that I am liable for any false statements or material omissions made on or in connection with this document; <input type="checkbox"/> I agree to maintain, and present upon request, documentation necessary to support this certificate, and to inform, in writing all persons to whom the Certificate was given of any changes that would effect the accuracy or validity of this Certificate; <input type="checkbox"/> The goods originated in the territory of one or more of the Parties, and comply with the origin requirements specified for those goods in the North American Free Trade Agreement, and unless specifically exempted in Article 411 or Annex 401, there has been no further production or any other operation outside the territories of the Parties; and <input type="checkbox"/> This Certificate consists of ____1____ pages, including all attachments. </div>											
<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; border-bottom: 1px solid black;"> <div style="width: 45%; border-right: 1px solid black; padding-right: 5px;">Authorized Signature:</div> <div style="padding-left: 5px;">Company:</div> </div> <div style="display: flex; border-bottom: 1px solid black;"> <div style="width: 45%; border-right: 1px solid black; padding-right: 5px;">Name:</div> <div style="padding-left: 5px;">Title:</div> </div> </div>	<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; border-bottom: 1px solid black;"> <div style="width: 55%; border-right: 1px solid black; padding-right: 5px;">Date(DD/MM/YY): D D M M Y Y <table border="1" style="margin: 0 auto; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></div> <div style="width: 40%; padding-left: 5px;">Telephone:</div> </div> <div style="border-bottom: 1px solid black; padding-left: 5px;">FAX:</div> </div>										



R.E. ROGERS CANADA INC.

EXPORTS

CHARGES FROM PICKED UP SHOW SITE TO DELIVERED OUTBOUND CARRIER INCLUDING: PICK UP FROM SHOW SITE, DELIVERY TO OUR TERMINAL, CANCELLATION OF CANADIAN CUSTOMS BONDS, DELIVERY TO CARRIER (applicable to air & ocean freight shipments only)

AIRFREIGHT	\$1.00 / Kilo – Minimum \$225.00
OCEANFREIGHT	\$80.00 / CBM – Minimum \$225.00
20' Containers	- \$600.00
40' Containers	- \$750.00

All above charges are in Canadian Dollars

Note any exhibitor using R.E. Rogers Canada for both freight and customs services will receive a 10% discount on the above Customs tariff.



R.E. ROGERS CANADA INC.

R.E. ROGERS ORDER FORM ISA EDMONTON 2012

CUSTOMS AND FREIGHT: ___ **CUSTOMS ONLY** ___ **FREIGHT ONLY** ___

EXHIBITOR NAME: _____ **BOOTH #** _____

BUSINESS TAX ID # _____

ADDRESS: _____

CONTACT: _____ **TELE:** _____ **FAX:** _____

PICK UP DATE: _____ **PCS** _____ **WEIGHT** _____ **LBS/KGS**

DIMENSIONS: _____

CARRIER: _____ / **PICK UP BY R.E. ROGERS** _____

INVOICE TO: _____

ADDRESS: _____

ATTENTION: _____ **TELE:** _____ **FAX:** _____

RETURN SHIPMENT: RETURN TO PICK UP DESTINATION: _____

RETURN TO OTHER DESTINATION: (Please give address) _____

PAYMENT OPTIONS: ___ **PAYMENT IN ADVANCE, CHEQUE ATTACHED**
___ **PAYMENT IN ADVANCE, BY CREDIT CARD**

CARDHOLDER: _____ **VISA** ___ **AMEX** ___ **MASTERCARD** ___

CARD NUMBER _____ **EXPIRY DATE:** _____

CARDHOLDER SIGNATURE: _____

I/WE HEREBY AUTHORIZE R.E. ROGERS CANADA INC. AND OUR AGENTS TO ACT ON OUR BEHALF REGARDING CUSTOMS CLEARANCE/FREIGHT FORWARDING / ADVANCE RECEIVING FOR THE ISA 2012 , AND AGREE TO PAYMENT OF R.E. ROGERS CANADA INC'S CHARGES AS PER THE TARIFF SET OUT IN THESE SHIPPING INSTRUCTIONS.ADVANCE RECEIVING AT NO COST TO EXHIBITORS USING R.E. ROGERS AS THEIR CARRIER. FOR THOSE USING OTHER CARRIERS AND STILL WANTING TO USE THE ADVANCE WAREHOUSE A CHARGE OF \$20.00 CDN / CWT WILL BE CHARGED FOR THE DELIVERY TO SHOW SITE.



R.E. ROGERS CANADA INC.

ADVANCE RECEIVING WAREHOUSE

FOR: WHOC 2011

Shipping Information

Warehouse shipping address

Exhibitor Name – WHOC 2011 – Booth number
R.E. Rogers Canada Inc.
C/O Derrick Exhibit
7710 34th Street
Edmonton, Alberta
Canada T6B 3J6

R.E. Rogers will accept crated, boxed or skidded materials beginning March 16, 2012 until Noon of April 16, 2012 at the above address.

Exhibitor Name: _____ **Booth Number** _____

Address: _____

Business tax ID# _____

Number of Pcs _____ **Weight:** _____

Carrier that will deliver to warehouse: _____

Payment Method: _____ **In advance by cheque attached**

Credit Card: Visa _____ American Express _____ Mastercard _____

Card Number: _____ **Expiry** _____

Name of card holder: _____

Signature or card holder: _____

We hereby agree to the charges of \$20.00 / CWT or portion thereof to be charged to the above credit card (Rates are subject to 5% GST. Rule of 10 lbs per cubic foot or carriers bill of lading weight to apply, whichever is greater. Minimum charge \$60.00)



R.E. ROGERS CANADA INC.

COST ESTIMATE

Quotation for: Customs clearance only ____ Freight Only ____ Both ____

Company Name: _____ Booth _____

SHOW: **ISA 2012**

Contact: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

_____ # of Pieces @ _____ Lbs / Kgs Method: () Ocean () Air () Truck
please circle - Lbs or Kgs Total shipment weight

Dimensions (L x W x H) CM / Inches Stackable Yes ____ No ____

Temporary Importation Value \$ _____ Consumption Importation Value \$ _____

Pick up Location: City: _____ State _____ Country _____

Special Requirements: (please check whichever may apply to your shipment)

Ground Level dock only ____ Inside Pick up ____ Power tailgate Required ____

RETURN SHIPMENTS

Method of return required () Air () Ocean () Truck

Destination: City _____ State _____ Country _____

When do you require the goods to be returned by Date: _____

Please complete and fax to 403-291-0397 or email to abennett@rerogers-canada.com or mling@rerogers-canada.com

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