

QUOTE REQUEST



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SHIPPER / EXHIBITOR INFORMATION												
Company name							Boot	th				
Pick up address							City					
State			Zip Code		Cou	Country						
Contact				Phone		E-ma	E-mail					
Pick up date				Pick up Hours			Freig optio					
SHIPMENT/CARGO INFORMATION												
Brief description of good:												
Total Pieces			Weight (lb)				Weight (kg)					
Commercial Value (USD)					Insurance Required?							
We strongly recommend hiring insurance for your freight, for MTI will not be responsible for loss or damage during transit, exhibition display or storage												
PACKAGE	LENGTH							EIGHT WEIGHT				
#	inch	ies	cm	inches	cm	inch	es	cm	lbs	kg		
1												
2						<u> </u>						
3						<u> </u>						
4												
5												
6												
7												
8												
9												
10												
11												
12	1											



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		IC INSTRUCTIONS / NOTE						
BILLING INFORMATION								
Company name			Tax ID					
Billing address		City						
State	Zip Code		Country					
Payment method	Contact Name & Phone #		E-mail					
RETURN INFORMATION								
Company name								
Delivery address	_		City					
State		Zip Code	Country					
Contact		Phone	E-mail					
Deadline date		Freight option	Delivery Hours					

Important Information

Permanent freights must be paid in full before exhibition begins Temporary freights must be paid in full before return freight.