

Transportation Order Form

Haulistic formerly Quad Express is pleased to be named the OFFICIAL transportation company for:



SPONSORED BY IFA INTERNATIONAL FRANCHISE ASSOCIATION

REQUESTER NAME: _____ REQUESTER PHONE: _____

PLEASE ARRANGE TRANSPORTATION FOR MY EXHIBIT MATERIALS
RATE INQUIRY ONLY AT THIS TIME

PICK UP ADDRESS:

BILLING INFORMATION

COMPANY _____
STREET NO. _____
SUITE/FL. NO. _____
CITY/STATE/ZIP _____
CONTACT _____
PHONE _____

COMPANY _____
STREET NO. _____
SUITE OR FL. NO. _____
CITY/STATE/ZIP _____
CONTACT _____
PHONE _____
FAX _____
EMAIL _____

PICK UP DATE _____

READY TIME _____ CLOSE TIME _____ BOOTH # _____ DECLARED VALUE: _____

SHIP TO: ADVANCE WAREHOUSE DIRECT TO SHOW SITE

NO. OF PIECES	DESCRIPTION	DIMENSIONS			WEIGHT
		L	x	W x H	

SERVICE LEVEL REQUIRED:

NEXT DAY 2 DAY 3-5 DAY DEFERRED (LTL)

Please arrange shipping after show to the following address

Company: _____
Street address: _____
City, State, Zip: _____
Contact Name: _____
Phone: _____

Providing REAL solutions to your transportation problems!



987 Primrose Court, Lexington, KY 40511
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Email: LEX@shiphaulistic.com

Please Print & Sign Authorized Name