

FREEMAN

9900 Business Parkway
 Lanham, MD 20706
 (301) 918-7975 Fax: (469) 621-5609



**OUTBOUND MATERIAL HANDLING
 AND SHIPPING LABELS**

NAME OF SHOW: **2019 ASCB|EMBO MEETING / DECEMBER 10 - 12, 2019**

COMPANY NAME: _____ BOOTH #: _____ BOOTH SIZE: _____ X

CONTACT NAME : _____ PHONE #: _____

E-MAIL ADDRESS : _____

For Assistance, please call (301) 918-7975 to speak with one of our experts.

For fast, easy ordering, go to www.freeman.com

EVERY OUTBOUND SHIPMENT WILL REQUIRE A MATERIAL HANDLING AGREEMENT AND SHIPPING LABELS. WE WOULD BE HAPPY TO PREPARE THESE FOR YOU AND DELIVER THEM TO YOUR BOOTH PRIOR TO SHOW CLOSE. TO TAKE ADVANTAGE OF THIS SERVICE, PLEASE COMPLETE AND RETURN THIS FORM TO THE FREEMAN SERVICE CENTER.

SHIPPING INFORMATION

SHIP TO: COMPANY NAME: _____

DELIVERY ADDRESS: _____

CITY: _____ STATE/ PROVINCE: _____ ZIP/ POSTAL CODE: _____

PHONE#: _____ ATTN: _____

SPECIAL INSTRUCTIONS: _____

BILL TO: Same as Ship to:

COMPANY NAME: _____

DELIVERY ADDRESS: _____

CITY: _____ STATE/ PROVINCE: _____ ZIP/ POSTAL CODE: _____

METHOD OF SHIPMENT

Select a Carrier:

Freeman Exhibit Transportation **Other Carrier**

No need to schedule your outbound shipment. Carrier Name: _____
 Charges will appear on your Freeman invoice. Carrier Phone: _____

Freeman will make arrangements for all Freeman Exhibit Transportation shipments.
 Arrangements for pick-up by other carriers is the responsibility of the exhibitor.

Select a Level of Service:

1 Day: Delivery next business day Standard Ground
 2 Day: Delivery by 5:00 PM second business day Specialized: Pad wrapped, uncrated, or truckload
 Deferred: Delivery within 3-5 business days

Select Shipment Options (if applicable)

Have loading dock Lift gate required
 Inside delivery Air ride required
 Pad wrap required Residential
 Do not stack

Select Desired Number of Labels: _____

Once your shipment is packed and ready to be picked up from your booth, please return completed the Material Handling Agreement to the Freeman Service Center. Shipments without a Material Handling Agreement turned in will be returned to our warehouse at exhibitor's expense.

F R E E M A N

R U S H

D O N O T D E L A Y

RECEIVING DATE BEGINS: NOVEMBER 05, 2019

DEADLINE DATE IS: NOVEMBER 27, 2019

TO: _____

EXHIBITOR NAME

**C/O: FREEMAN
9900 BUSINESS PARKWAY
LANHAM, MD 20706**

**WAREHOUSE
(481239)**

EVENT: **2019 ASCB|EMBO MEETING**

BOOTH NO. _____ NO. _____ OF _____ PCS.

F R E E M A N

R U S H

D O N O T D E L A Y

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DEADLINE DATE IS: NOVEMBER 27, 2019

TO: _____

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**C/O: FREEMAN
9900 BUSINESS PARKWAY
LANHAM, MD 20706**

**WAREHOUSE
(481239)**

EVENT: **2019 ASCB|EMBO MEETING**

BOOTH NO. _____ NO. _____ OF _____ PCS.

THE ABOVE LABELS ARE PROVIDED FOR YOUR CONVENIENCE.
PLACE ONE ON EACH PIECE SHIPPED TO ENSURE PROPER DELIVERY.
IF MORE LABELS ARE NEEDED, COPIES ARE ACCEPTABLE.

F R E E M A N

R U S H

D O N O T D E L A Y

CANNOT DELIVER BEFORE DECEMBER 05, 2019

TO: _____
EXHIBITOR NAME

C/O: FREEMAN
WALTER E. WASHINGTON CONV CTR
801 MOUNT VERNON PLACE NW
WASHINGTON, DC 20001

SHOW SITE
(481239)

EVENT: 2019 ASCB|EMBO MEETING

BOOTH NO. _____ NO. _____ OF _____ PCS.

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