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**TICKET #**  
 (Start with 001)

**Circle Each Option & Fill Out Completely**

EXHIBITOR AS LISTED IN SHOW	
SHIPPED FROM CITY/STATE	SHIPPER NAME
CARRIER	TRACKING NO.(S)

WAREHOUSE / SHOW SITE CHECK IN: Time \_\_\_\_\_ AM / PM Su Mo Tu We Th Fr Sa

DATE REC'D	
BOOTH #	
SHOW NAME	
SHOW DATE	
FACILITY	

**DESCRIPTION:** Crated Uncrated Machinery Literature Other: \_\_\_\_\_  
**FORKLIFT LABOR:** Start \_\_\_\_\_ Finish \_\_\_\_\_

CHECKER	NO	ITEM	WEIGHT
		CRATES	
		CARTONS	
		CARPETS	
		CASES/TRUNKS	
		SKIDS/PALLETS	
		MISCELLANEOUS	

EXCEPTIONS, REMARKS, OR OTHER
All shortages, damage or other exceptions must be written on ALL copies of the trucking company's delivery receipt and signed for by the driver before the checker signs the delivery.
IMPORTANT
<ol style="list-style-type: none"> <li>Count the pieces.</li> <li>List the shortages on delivery receipt.</li> <li>Look for damages and list on delivery receipt.</li> <li>Get drivers signature.</li> </ol>

**Exceptions, damages, shortages noted at Show Site & Warehouse**

<b>This is to certify the above listed items were unloaded and exceptions, if any, are correct.</b>

		<b>TOTALS</b>	
ACTUAL RECEIVED	PER B/L		WEIGHT PER B/L

DRIVER SIGNATURE	DATE	NAME OF CARRIER
CHECKER SIGNATURE- WAREHOUSE	DATE	SHOW SITE UNLOADING DATE/TIME
CHECKER SIGNATURE- SHOW SITE	DATE	PREFERRED CARRIER DRIVER SIGNATURE

**ATTENTION EXHIBITOR**  
 You are being charged for this service  
 For the handling of merchandise, exhibit material, etc.  
 (1-Office) (2-Dock/Show site) (3-Exhibitor)