



MALCA-AMITUSA,LLC("MALCA-AMIT")

A MEMBER OF THE MALCA-AMIT GROUP OF COMPANIES

NEW YORK

580 Fifth
Avenue, New York
, NY
Ph. (212)840-8330
Fax(212)840-4155

LOS ANGELES

550 South Hill
Street, Los Angeles,
CA
Ph.(213) 627-1103
Fax(213)627-1047

KENTUCKY

911
Grade Lane, Loui
sville, KY
Ph. (502)361-3331
Fax(502)361-3445

MIAMI

38
N.E., 1st Avenue, Mia
mi, FL.
Ph. (305)358-8610
Fax(305)358-8612

CHICAGO

5 South
Wabash Ave, Chicago,
IL
Ph. (312)346-1507
Fax(312)346-1896

JCK SHOW – LAS-VEGAS 06/05/2017 – 06/08/2017

Dear Customers,

Malca-Amit USA LLC, will be providing secured transportation to and
From the JCK SHOW please refer below for schedule and contract information:

PickUp:

Chicago, Dallas, Houston & Miami:

Pick up will be on Thursday June 1st from 9:00am – 6:00pm.

Los Angeles:

Pick up will be on Friday June 2nd from 9:00am – 6:00 pm.

New York:

Pick up will be on Wednesday, May 31st from 9:00am– 6:00pm.

Delivery:

Will be made at the show on Sunday, June 4th , from 10:00am–6:00pm
and Monday June 5th from 7:00am – 10:00:00am.

If you have any questions or need additional information, please do not hesitate to call us.

New York: at 212-840-8330 –ext.514&515.

Los Angeles: at 213-627-1103

Miami: at 305-358-8610

Chicago: at 312-346-1504

Dallas & Houston: 972-600-2270



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SERVICE REQUEST SHOW FORM

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www.malca-amit.com

Please fax the completed Form to above office nearest your location at least one(1) week in advance to the opening dates of the following show:

SHOW NAME: JCK Las-Vegas		Pick Up Date:	
PICKUP TIMES: <input type="checkbox"/> 9:00am-11:00am <input type="checkbox"/> 11:00am-1:00pm <input type="checkbox"/> 1:00pm-3:00pm <input type="checkbox"/> 3:00pm-4:00pm Malca-Amit will make a reasonable effort to pick up the Property at the time requested by Customer, but Malca-Amit maintains the complete freedom and right to change or vary the time, without prior notice to Customer. In no case will Malca-Amit assume any responsibility or liability for any change in respect of the pick up time as requested by Customer.			
COMPANY NAME (CUSTOMER):			
ADDRESS:			CITY:
STATE:	ZIP:	PHONE:	FAX:
CONSIGNEE:		CELL PHONE:	E-MAIL:
		PHONE:	FAX:
		BOOTH #:	
AUTHORIZED PERSON # 1:		ID-NUMBER:	
AUTHORIZED PERSON # 2:		ID-NUMBER:	
DESCRIPTION OF PROPERTY:			<input type="checkbox"/> ONEWAY <input type="checkbox"/> ROUND TRIP
# OF ITEMS:	WEIGHT:	DECLARED VALUE:	
REMARKS:			

On behalf of Customer, the undersigned, hereby instructs MALCA-AMIT to arrange for:

The Forwarding of the Property described herein in accordance with and subject to a completed "MALCA-AMIT Domestic Secured Service (DSS) Shipping Instruction(s)"

Print Name: _____

Signature: _____

Place: _____

Date: _____