**Sender:**

**Company:**

**Address:**

**City:**

**Country:**

**Zip/Postal Code:**

Sheraton Centre Toronto

Loading Dock

100 Richmond Street West

Toronto, Ontario, Canada, M5H 3K6

**Hold for:** (Name of Event & Event Dates)

**Contact:** (Name of event/guest contact, phone number, and email)

**Hotel Contact:** (Name of hotel event manager)

**\*If Delivering: Delivery Info:** (Date, Time, & Room/Booth)

**Content Description:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This shipment is for:** (circle one) Exhibitor Conference Sponsor Other: \_\_\_\_\_\_\_\_\_\_

Box \_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_