

1. Vendor / Shipper (Name & Address) 4. Consignee (Name & Address) 5a. Federal Tax ID / IRS No. or Individual's Social Security No. 5b. Customs Cleared by Agent, POE or _____ 5c. NAFTA Eligible <input type="checkbox"/> <input checked="" type="checkbox"/> if yes per signature X	2. Date of Direct Shipment / Shipping Date 3. Reference Nos. (P.O., Shippers, Etc.) 5. Importer of Record (Name & Address if other than Consignee) 6. Country of Origin (Manufacture) 7. Country of Transhipment 8. Terms of Payment & Terms of Sale 9. Currency of Sale
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CUSTOM SERVICES: Refer to www.cfmvmt.com for service availability from your area. Urgent or Air Quote No. _____
 (Additional Charges will apply) If a custom service is not selected, this shipment will move according to CFMM regular service standards.

Early Morning Delivery Service: before 10:30 AM <input type="checkbox"/> before 9:00 AM <input type="checkbox"/> before 7:00 AM <input type="checkbox"/>	Shortcut <input type="checkbox"/>	Urgent <input type="checkbox"/> Quote No. required prior to shipping. Please call our Business Centre 1-888-868-7923	Air Services: Air 100 <input type="checkbox"/> Overnight <input type="checkbox"/> Second Day <input type="checkbox"/> 3-5 day <input type="checkbox"/>	Heat Required <input type="checkbox"/>
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10. Number Shipping Units	HM DM	11. Kind of Packaging, Description of Articles, Special Marks Exceptions and Serial No.	NMFC	Class	12. WEIGHT ___ Lbs ___ Kilos	13. QUANTITY State Unit	14. UNIT PRICE	15. TOTAL

WEIGHT TOTAL ▶	16A. Net	16B. Gross	INVOICE TOTAL ▶
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18. Exporter (if other than vendor/shipper) 20. If Commercial Invoice is attached, check this box Commercial Invoice Number _____ <input type="checkbox"/> 21. Department Ruling (if applicable) 22. Carrier Code 23. If fields 24 to 26 are not applicable, check this box <input type="checkbox"/>	19. Third Party Bill to for Freight Charges, if applicable (Name & Address) 24. If included in Field 17, indicate amount: a. Transportation charges, expenses and insurance from the place of direct shipment to USA b. Cost for construction, erection and assembly incurred after importation into USA c. Export Packing _____
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25. If included in Field 17, indicate amount: a. Transportation charges, expenses and insurance from the place of direct shipment to USA b. Amounts for commissions other than buying commissions. c. Export Packing _____	26. Check (if applicable) Royalty payments or subsequent proceeds are paid or payable by purchaser <input type="checkbox"/> The purchaser has supplied goods or services for use in the production of these goods. <input type="checkbox"/>
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<p style="font-size: 2em; color: lightblue; text-align: center;">PLACE PRO LABEL HERE</p>	27. COD AMOUNT: COD FEE: <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect Is Customer's Check Acceptable for COD? <input type="checkbox"/> Yes <input type="checkbox"/> No FREIGHT CHARGES (check appropriate box) <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect If not indicated, shipment will automatically move prepaid
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DECLARED VALUATION:
 Maximum liability of carrier is \$2.00 per lb. (\$4.41 per kilogram) unless declared valuation states otherwise \$

NOTICE OF CLAIM: (a) No carrier is liable for loss, damage or delay to any goods under the Bill of Lading unless notice thereof setting out particulars of the origin, destination and date of shipment of the goods and the estimated amount claimed in respect of such loss, damage or delay is given in writing to the originating carrier or the delivering carrier within sixty (60) days after the delivery of the goods, or, in the case of failure to make delivery, within nine (9) months from the date shipment. (b) The final statement of the claim must be filed within nine (9) months from the date of shipment together with a copy of the paid freight bill.

RECEIVED at the point of origin on the date specified, from the consignor mentioned herein, the property herein described, in apparent good order, except as noted (contents and conditions of contents of package unknown) marked, consigned and destined as indicated below, which the carrier agrees to carry and to deliver to the consignee at the said destination, if on its own authorized route or otherwise to cause to be carried by another carrier on the route to said destination, subject to the rates and classification in effect on the date of shipment.

It is mutually agreed, as to each carrier of all or any of the goods over all or any portion of the route to destination, and as to each party of any time interested in all or any of the goods, that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, including conditions set aside by the standard bill of lading, in power at the date of issuing, which are hereby agreed by the consignor and accepted for himself and his assigns.

The contract for the carriage of the goods listed in the bill of lading is governed by regulation in force in the jurisdiction at the time and place of shipment and is subject to the conditions set out in such regulations.

DEBTOR RESPONSIBILITY: The carrier Limited reserves the right to seek payment from the shipper on any balances owed where a Freight Forwarder, Broker, or Logistics Company fails to meet the terms of payment indicated.

28. Shipper 30. Authorized Signature	29. Carrier 31. Authorized Signature
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DATE: _____
TIME: _____
 ARRIVE DEPART

Instruction for Bill of Lading Preparation

1. Vendor / Shipper name and address in Canada
2. Date of Direct Shipment - date shipment began transit from origin.
3. Reference. May be used for shippers P.O. number, etc.
4. Consignee name and address in U.S.A.. U.S.A. Custom Broker.
5. Importer of Record (party responsible for payment of duty and taxes.)
- 5a. Federal Tax ID No. or IRS No. or Consignee's Social Security No..
- 5b. Cleared by agent at Port of Arrival, unless a different Broker is noted.
- 5c. If shipment is NAFTA eligible, the box must be checked and shipper must sign next to the X.
6. Country of origin. (Manufacturer) Critical for Free Trade Agreement purposes.
7. Country of transshipment. Example Canada if goods are originating in a country other than Canada.
8. Terms of payment: e.g., 30 days, FOB origin / destination, etc.
9. Currency of sale.
10. Number of shipping units or devices; e.g., 1 pallet, 2 drums, 50 cartons.
11. Description of product and packaging. NMFC / freight class needed for purposes.
12. Weight, including packaging.
13. Quantity or units of product; e.g., "25 boxes", "1 set," 10 components, 18 boxes on 2 skids, etc.
14. Price per product unit as ref. in 13.
15. Invoice price for product. column 13 times 14.
- 16A. Weight net of packaging.
- 16B. Weight including packaging.
17. Sum of column 15.
18. Exporter. (Complete only if different than Vendor / Shipper in 1.)
19. Third party, Bill to for Freight Charges and brokerage. This is who is to pay freight charges and brokerage.
20. Check if commercial invoice is attached and state invoice number.
22. Carrier code
23. Please check if fields 24 - 26 are applicable.
 24. I.-Break out transportation charges and insurance if included in field 17. II.-Break out cost of construction or assembly at site if included in field 17. III.-Cost of packing, if not included in field 17.
 25. I.-Transportation cost from place of manufacture to actual point of direct shipment to Canada. II.-Commissions applicable, other than buying commissions. III.-Cost of packing, if not included in field 17.
 26. Check only if applicable.
27. - 31. Bill of lading terms and conditions, COD, Prepaid / Collect freight (please check one), shipper and carrier signatures.