N° CLIENT DATE RELEVÉ N° RELEVI CUSTOMER NO. JJ MM AA STATEMENT						RETOURNER	CETTE COPIE	AVEC VOTRE PAIR	MEN	NT
	l .	5116	04/11/2		737295	RETURN THIS	COPY WITH	YOUR PAYMENT	PA	.GE: 1
DATE FACTI JJ MM	JRE AA		ACTURE BILL NO.	MONT	ANT - AMOUNT	TPS-GST	TVQ-PST	TOTAL	N° CIE	NOTES-NOTE
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RELEVÉ DE COMPTE STATEMENT

PAYABLE SUR RÉCEPTION PAYABLE ON RECEIPT

TRINET TRSPT C/O MARQUIS IMP

2101 ST REGIS DOLLARD DES ORMEAUX QC H9B 2M9

DESCRIPTION DE (N° CIE) AU VERSO

GROUPE GUILBAULT LTEE.,



N° CLIENT DATE RELEVÉ N° RELEVÉ CUSTOMER NO. JJ MM AA STATEMENT N								AVEC VOTRE PAIE	MEN	JT
		5116	04/11/2		737295	RETURN THIS	COPY WITH	YOUR PAYMENT	PA	.GE: 2
DATE FACTU JJ MM	JRE AA		ACTURE BILL NO.	MONT	ANT - AMOUNT	TPS-GST	TVQ-PST	TOTAL	N° CIE	NOTES-NOTE
03/11/2 03/11/2 03/11/2 03/110/2 03/110/2 03/110/2 03/110/2 03/111/2 01/11/2 01/11/2 01/11/2 01/11/2 01/11/2 01/11/2 02/11/2 02/11/2	00000000000000000000000000000000000000	60-1 60-1 60-1 60-1 60-1 60-1	957995882333234-420 995782267-955882333234-420 995782267-95588333234-420 995883333333333333333333333333333333333		677.922 677.9927 6671.967 11880.9922 11880.9922 11992 11671.99 11771.88 11771.188 11771.198			67922 9.992276 677997 1.997219922 1.99722 1.999222 1.999	011111111111111111111111111111111111111	
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RELEVÉ DE COMPTE STATEMENT

PAYABLE SUR RÉCEPTION PAYABLE ON RECEIPT

TRINET TRSPT C/O MARQUIS IMP

2101 ST REGIS DOLLARD DES ORMEAUX QC H9B 2M9

DESCRIPTION DE (N° CIE) AU VERSO

GROUPE GUILBAULT LTEE.,



	N° CLIENT USTOMER NO.	DATE RELEV		RETOURNER (CETTE COPIE A	VEC VOTRE PAIE	MEN	IT
-	65116	04/11/2	AA STATEMENT NO.023 737295	RETURN THIS	COPY WITH Y	OUR PAYMENT	PA	GE: 3
DATE FACTURE JJ MM A		ACTURE BILL NO.	MONTANT - AMOUNT	TPS-GST	TVQ-PST	TOTAL	N° CIE	NOTES-NOTE
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RELEVÉ DE COMPTE STATEMENT

PAYABLE SUR RÉCEPTION PAYABLE ON RECEIPT

TRINET TRSPT C/O MARQUIS IMP

2101 ST REGIS DOLLARD DES ORMEAUX QC H9B 2M9

DESCRIPTION DE (N° CIE) AU VERSO

GROUPE GUILBAULT LTEE.,



TRANSPORT GUILBAULT INC FACTURE - INVOICE														
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL:: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198			FA	CION	L - 11440	JICL .	01	50-022	2936	5-9				
DATE CONNAISSEMENT - B/L CUEILLETTE TRANS	SFERT F	FACT. TA	ARIF. ORIG.	DEST.	CATEG.	CONSOLIDATI	NC	A PERCEVOIR COLLECT	PORT F	PAYE 'AID				
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GRAYURE CHOQUET INC.	MAR	QUIS	IMPRI	MEU!	RING	ζ.		B/L 2	2310)31				
8777 RUE CHĀMP D'EAU ST LEONARD (MONTREAL)		DES TMAGN	ENTRE Y	PRE	NEUR	5		EXPE9	7651	116				
PQ H1P 3A6			· -		P	Q G5V 4T	1	DEST TRAN		393 —				
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTH				}										
TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORMEAUX														
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.														
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO		PORTION	DESTINATIO	N		NOTRE PART								
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QTÉ DESCRIPTION		WEIGHT L-K		AS L-K		TAUX-RATE L	·K	TOTAL		F/P				
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	(CARB	LTL		CRB	28.30		41.69	9					
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3		<u>ME</u> 552 I	SURE/	MEA	SURE	50 P	C/CI		aa					
PALETTES: CHEP = CPC = AUTRE =														
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FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.8	32% ANNUA	ALLY)	LECTVICINI			TOTA	AL_							

Copie Draufeur
BILL OF LADING
NOT NEGOTIABLE

)		Date: 10										
_				S	HIP TO							
		Name: Marqui	s Imprimeur I	nc.								
•		r		reneu	rs							
State: QC	Zipcode: H1P 3A6	City: Montm	agny			State: Zipcode: QC G5V 4T1						
Refere	nce/PO:	Tel: 418241	1760			Referense/PO:						
_		1			(16)							
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		Special I	nst:									
BILL THIRD PARTY					HT CHAR	RGES						
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						Phone:						
incombe au transporteur engagé. La responsabilité maximale du transporteur est 2 des frais de transport supplémentaires sont pavés. / Trinet Transportation Inc. /s no						re au présent connaissement et que of or damage to cargo lies with the						
GRAVURE CHOQUET GUILBAVLT					Consignee; Marquis Imprimeur Inc.							
Signature & Date: Signature & Date: Signature & Date:					ure & Date:							
is is to certify that the above named materials are perity classified, described, packaged, marked and neeled, and are in proper condition for transportation cording to the applicable regulation of the Department Transportation.												
	eaux, I State: QC Phone les pertes dimale du 1 net Transpor 4.41\$/k Carrie GUII Signa Carrie placan	State: Zipcode: QC H1P 3A6 Reference/PO: Paux, H9B 2M9 State: Zipcode: QC H9B 2M9 SPECIAL IN SHIPPING SHIPPING Phone: les pertes ou dommages caus timale du traportation lucis not or 4.41\$/kg unless a declared to Carrier: GUILBAULT Signature & Date: Carrier declared to placard sc. Carrier declared to placard sc	Name: Marqui Address: 350, Ru State: Zipcode: City: QC H1P 3A6 Montm Reference/PO: Tel: 418241 Contact Lucie E Ref: Special I Special I State: Zipcode: QC H9B 2M9 State: Zipcode: QC H9B 2M9 SPECIAL INSTRUC SHIPPING INFORM escription Contact N Phone: Email Address: Description Email Address: Description Contact N Phone: Email Address Phone: E	Name: Marquis Imprimeur I Address: 350, Rue des Entrep State: Zipcode: City: Montmagny Tel: 4182411760 Contact Name: Lucie Belanger Ref: Special Inst: CTY Fi 3rd party Billing: State: Zipcode: QC H9B 2M9 State: Zipcode: QC H9B 2M9 SPECIAL INSTRUCTIONS SHIPPING INFORMATION Contact Name: H9B 2M9 SPECIAL INSTRUCTIONS SHIPPING INFORMATION Phone: Email Address: Les pertes ou dommages causé(e)s à la cargaison. La response imale du transporteur est/208/lb ou 4.418/kg à mois qu'une de transport	Name: Marquis Imprimeur Inc. Address: 350, Rue des Entrepreneu City: QC H1P 3A6 Montmagny Reference/PO: Tel: 4182411760 Contact Name: Lucie Belanger Ref: Special Inst: CTY FREIGI State: Zipcode: QC H9B 2M9 State: Zipcode: QC H9B 2M9 SPECIAL INSTRUCTIONS SHIPPING INFORMATION escription NMFC No. Cis. Phone: Email Address: les pertes ou dommages causé(e)s à la cargaison. La responsabilité de dimale du transporteur est 2705/16 ou 4.415/kg à moins qu'une valeur de transportation Inc./s not ligble for 105 set of admage to cargo. The lor 4.415/kg unless a declared value is grown on this bill of lading and addrequire cargo. The lor 4.415/kg unless a declared value is grown on this bill of lading and addrequire cargo and required collected is Carrier cettifies energency response information for Carrier acknowledges reseit of packages and required carrier acknowledges reseit of packages and required collected is Carrier cettifies energency response information for Carrier acknowledges reseit of packages and required signature Signature Signature Reference response information for Admarque to Carrier acknowledges reseit of packages and required signature Signature Reference response information for Admarque to Carrier acknowledges reseit of packages and required signature Signature Reference response information for Admarque to Carrier acknowledges reseit of packages and required signature	Name: Marquis Imprimeur Inc. Address: 350, Rue des Entrepreneurs State: Zipcode: City: QC H1P 3A6 Montmagny Reference/PO: Tel: 4182411760 Contact Name: Lucie Belanger Ref: Special Inst: Special Inst: TY FREIGHT CHAF 3rd party Billing: X eaux, H9B 2M9 State: Zipcode: QC H9B 2M9 SPECIAL INSTRUCTIONS SHIPPING INFORMATION SHIPPING INFORMATION escription NMFC No. Cls. Weight (LB) 552 DRMATION HAZARDOUS MATERIAL Contact Name: Phone: Email Address: les pertes ou dommages causé(e)s à la cargaison. La responsabilité de la perte ou de minale du transporteur est/2708/lb ou 4.418/kg à moins qu'une valeur déclarée ne figurent transportation Inc, és not lièple for loss of or damage to cargo. The liability for loss of 4.418/kg niess a préciared vitu gis proven on this bill oil lading and additional freight; Carrier: GUILBAULT Signature & Date: Carrier acchowledges receipt of packages and required collacards. Signature & Date: Carrier: GUILBAULT Signature & Date: Carrier acchowledges receipt of packages and required collacards. Signature & Date:						



TRANSPORT GUILBAULT INC FACTURE - INVOICE															
4	35, FARADAY, SAINTE-FOY, QC EL.: 418-681-0575 TÉLÉCOPIEU	G1N 4G6 IR: 418-681-919	18			170	, 1 0111	- 11440	JIOL	01	50-73	5818	3-7		
DATE	CONNAISSEMENT - B/L	CUEILLETTE	TRANSFERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDAT	ION	A PERCEVOIR COLLECT	PORT F PREP	PAYE AID		
30102	023 MAR0733681	12266V	17831	7 YF6	CLO	4	10	LTL	9765116	- 1	PORT	PAY	E.		
EXPÉDITEU	R ET ADRESSE - SHIPPER AND A	DDRESS	CON	ISIGNATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7615	 577		
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	AUTRE QUE EXPÉDITEUR/CONSI					SIGNER									
TRINE	TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORMEAUX JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.														
JCT. DEST.	TRANSPORTEUR DESTINATION - BEYOND CARRI	ER N° PRO			ON DEST				NOTRE PART						
QTÉ	DESCRIP	FION	PC	DIDS-WEIGHT		MME-A	S L-K			K	TOTAL		F/P		
84	PKGS/2SKIDS			2200	L			FRT	9.71		213	. 62			
	416 951 9445 DELI. MON-FRI			CARI	3 LT	L		CRB	28.30		60.4	5			
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TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)

TRANSPORT GUILBAULT INC

435 RUE FARADAY, QUEBEC, QC G1N 4G6

CONSIGNATAIRE

TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198 to 10 32 CONSIGNEE ME CONNECESTENT BUT OF THE MANN BLOODER CONTROL OF THE MAN BUT DE COMMANDE - P.O. DELLETE - PICK-UP 30102023 MAR0733681 50-7358187 178317 4 10 L 12266V EXPÉDITEUR ET ADRESSE - SHIPPER AND ACORESS CONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ATTIRESS INHABIT GROUP WAREHOUSE A PERCEVOIR - COLLECT PORT PAYE - PREPAID MULTI RELIURE SF 1285 CALEDONIA RD 2112 AVE DE LA TRANSMISSION PORT PAYE NORTH YORK SHAWINIGAN VALHE DECLARÉE LETLAPED LALLE ON M6A 1Z4 . PQ G9N 8N8 FACTUREA - BILL TO TRINET TRSPT 2101 ST REGIS TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER NO PRO -JCT, ORIG. NO PRO- INHABIT GROUP WAREHOUSE (North Yo POD-PLT33910751 JCT DEST TRANSPORTEUR DESTINATION - BEYOND CARRIER OTE-OTY. DESCRIPTION POIDS - WEIGHT L-K COMME-AS PKGS/2SKIDS 2200 84 MATT WILLS 416 951 9445 DELI. MON-FRI FUEL LTL] SMALL TRUCK []INTERIOR DELIVERY []OTHERS

REQUEN BON ETAT PAR - RECEIVED IN GOOD ORDER BY 202310 06 MESURE MEASURED TOTAL 98 PC/CF YF 84 2200 I.
DATE LIVRÉE - DELIVERY DATE LIVE PAR - DELIVERY BY ING MICROSAUK - NBP PIECE DEBUT - BEGINNING FIN - END GÜ DIMENSION

48X 40X 44/ 48X 40X 44/

AUCUNE RÉCLAMATION NE SERA ACCEPTÉE & MOINS D'AVISER AU MOMENT DE LA LIVRAISON - NO CLAIM WILL BE ACCEPTED UNLESS NOTED AT TIME OF DELIVERY

209 733 (1013)





BILL OF LADING NOT NEGOTIABLE

Date: 10/30/2023 Trinet Pro # MAR07 33681 SHIP FROM SHIP TO Name: Name: **MULTI-RELIURE** INHABIT GROUP WAREHOUSE Address: 2112 DE LA TRANSMISSION 1285 Caledonia Road Zipcode: State: Zipcode: State: City: SHAWINIGAN QC **G9N 8N8** North York ON M6A 1Z4 Reference/PO: Tel: Reference/PO: Tel: 8195376008 4169519445 Contact Name: Contact Name: Aira-Jaey Tamayo Matt Wills Ref: 255374 Special Inst: Special Inst: **BILL THIRD PARTY** FREIGHT CHARGES Declared Value: \$0 Name: 3rd party Billing: Trinet Transportation Per: Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS Receiving 10AM to 3PM Monday - Friday SHIPPING INFORMATION Items:

Qty. Pgk.	Handl. Unit	is the state of th	Description	NMFC	No.	CIs.	Weight (LB)	Dimensions (IN)		
84	2.00 SKID	books					2200	48.00X40.00X44.00		
	CUS	TOMS BROKE	ER INFORMATION	HAZA	RDO	JS M	ATERIAL	CONTACTS		
Compa	Company Name:			Солtact Name: Phone:						
Contact	Contact Name: Phone:			Email Address:						

Note: Trinet Transportation Inc. n'est pas responsable des pertes ou dommages causé(e)s à la cargaison. La responsabilité de la perte ou de l'endommagement de la cargaison incombe au transporteur engagé. La responsabilité maximale du transporteur est 2.00\$/lb ou 4.41\$/kg à moins qu'une valeur déclarée ne figure au présent connaissement et que des frais de transport supplémentaires sont payés. / Trinet Transportation Inc. is not liable for loss of or damage to cargo. The liability for loss of or damage to cargo iles with the hired carrier. The carrier's maximum liability is 2.00\$/lb. or 4.41\$/kg unless a declared value is shown on this bill of lading and additional freight paid.

	J. C		Consignee; INHABIT GROUP WAREHOUSE
į	This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation	Signature & Date: Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and or carrier has de DOT emergency response guidebook or reverent document in the vehicle.	Signature & Date:

	TRANSPORT GUILBAULT INC FACTURE - INVOICE																
1	135, FAI	RADAY, SAINTE-FOY, QC 8-681-0575 TÉLÉCOPIEL	G1N 4G6 JR: 418-681-919	98				FAC	JIUN	E - INV	JICE		0	1 5	50-73	35820	0-3
DATE		CONNAISSEMENT - B/L		TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	COI	NSOLIDA	ATION	Α	PERCEVOIR COLLECT	PORT PREF	PAYE PAID
31102	023	MAR0733778	12266V		CC6	CC6	CLO	4	6	LTL	976	5511	6-	2	PORT	PA	ľΕ
EXPÉDITEU	RETAI	DRESSE - SHIPPER AND A	ADDRESS	L	CONSI	GNATAIR	E ET ADF	RESSE -	CONS	GNEE AN	D ADDI	RESS			COMP	7668	368
	AVE		SMISSIO		12	NTRE -137! BRUI	5 MA	RIE	VI	CTOR:	IN LLE	: 3V 6:	в7	H	B/L B/L EXPES DEST TRAN	231 231 765	101
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TO THE THAN SHIPPER/CONSIGNER TO THAN SHIPPER/CONSIGNER TO THE THAN S																	
TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES O														ORME	AUX		
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE															C.O.D.		
JCT. DEST.	TRANSPO	RTEUR DESTINATION - BEYOND CARR	IER N° PRO			PORTK	ON DEST	INATIO	N		NOTRE	PART					
QTÉ		DESCRIP	TION			S-WEIGHT		MME-A	S L-K				L-K		TOTAL		F/P
142		S/ 3 SKIDS RME VENDRED			CARB LTL CR						3.30			170 48.3	30		
P.O. 260055 MESURE/MEASURED 150 PC/CF																	
142 PALETTES: CHEP = CPC = AUTRE = 3882 L												218	3.97				
PALETTES - AUT N° TPS/GST N° TVQ/PST												**************************************		,			
EDAIC ADMINI	CTDATIC	C DE 20 DAD MOIC CUD TOUTE	CLEC CACTURES D	veette so	IOLIDS /	26 92% AN	NILIEL I ENVI	ENITY	73	7295					218	3.97	

TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



			<u> </u>	
Signature: KALL'N		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 25 01 11:31	
Signé par / Signed by: <u>kallin</u>	_	No. Factu	re / Probill: 507358203	
INFORMATION				8
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		8
MULTI RELIURE SF		Date:	2023/10/31	
2112 AVE DE LA TRANSMISSION		Arrivée/Arrival:	15:01	
SHAWINIGAN		Début/Start:	15:02	
ST, PQ, G9N8N8 6S4M5		Départ/Departure:	15:12	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
CENTRE DU PILOTE VIP INC		RDV/Appt.:	0000/00/00	
12-1375 MARIE VICTORIN ST BRUNO DE MONTARVILLE		Data:	07:00 12:00 2023/11/01	
CHAMBLY, PQ, J3V6B7		Date: Arrivée/Arrival:	11:00	
CHAMBELL, FQ, 33VODI		Début/Start:	11:00	
Required Service Requis HHL PCL LII		Départ/Departure:	11:09	
Facture / Probill		<u> </u>		_
Terme / Term Remorque / Trailer PPD 12502V		t / Bill of Lading B R0733778	on commande / Purchase Order 260055	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.			tion / Beyond Carrier No.Fact - Probill No	
DÉTAILS / DETAILS				
Qté/Qty Description	Poids/Weight	Dimension	s Guilbault	200
142 PCS/ 3 SKIDS	3882 L	48x 40x		
		48x 40x 48x 40x		
		40X	40	
FERME VENDREDI				
Facturé à / Bill to				
TRINET TRSPT	2101 ST REG	SIS		
	2101 01 NEC			_





BILL OF LADING NOT NEGOTIABLE

Trin	et Pro	# MAR07_33778			Date: 10/31/2								
		SHIP FROM					•	SHIP TO	•	-			
Name: MULT	I-RELIUF	RE		• • •	Name: CENTF	RE DU PILOTI	E VIP !	NC.					
Addres		RANSMISSION			Address 1375- 1	2 MARIE VIC	TORIN	1					
City: SHAV	VINIGAN		State: QC	Zipcode: G9N 8N8	City: SAINT-	BRUNO	·		State: QC	Zipcode: J3V6B7			
Tel: 81953	376008		Refere	nce/PO:	Tel: 450461	1888			Referen	ce/PO:			
	t Name: Jaey Tam	ayo			Contact Name: Kellen Okwe								
Ref:		•			Ref:								
26005 Specia					Special	nst:							
	,a.	BILL THIRD PAR	TY			F	REIG	HT CHAR	GES	راعيوان بالمدار			
Name:					3rd party	Billing:	X]		Declared	d Value: \$0			
Addres	Transpo	rtation			-				Per:				
1		Blvd, Dollard-Des-Orme	aux, F	19B 2M9						į			
City:	rd-Des-O	rmeally	State: QC	Zipcode: H9B 2M9									
-			1		LINSTRUCTIONS								
		. TEI√i	raison	avant midi. P			lre <u>di</u> .						
·		<u>[8</u>		SHIPPING									
Items:			•						-	<u></u>			
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	Cis.	Weight (LB)	Di	mensions (IN)			
142	3.00 SKID	books						3882	48.00	X40.00X45.00			
· ·	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIAL	CONT	ACTS			
Compa	ny Name:				Contact N	ame:			Phon	e:			
	t Name:		Phone		Email Add								
Note: Trinet Transportation Inc. n'est pas responsable des pertes ou dommages incombe au transporteur engagé. La responsabilité maximale du transporteur est des frais de transport supplémentaires sont payés. / Trinet Transportation Inc. is hired carrier. The carrier's maximum liability is 2.00\$/fb. or 4.41\$/kg unless a decla					\$/lb ou 4.41\$/ able for loss o	kg à moins qu'une of or damage to car	valeur de go. The i	iclaree ne tigur iability for loss	e au presen of or damag	gement de la cargaison I connaissement et que e to cargo lies with the			
	Shipper: Carrier: GUILBAULT					Consignee; CENTRE DU PILOTE VIP INC.							
Signatu	Signature & Date: 3/-/0 - 202 3 Signature & Date:				e: Signature & Date:								
This is to properly labeled, a according	s is to certify that the above named materials are perty classified, described, packaged, marked and placards. Car leads, and are in proper condition for transportation was made av				receipt of packages and required fies emergency response information and or carrier has de DOT emergency or reverent document in the vehicle.								

	TRANSPORT GUILBAULT INC FACTURE - INVOICE N° CIE N° FACTURE - PROBILL NO													LL NO.		
	1	35, FARADAY, SA EL.: 418-681-057	AINTE-FOY, QC	G1N 4G6 JR: 418-681-919	98				FAC	JONE	IIVV	JICL	01	50-84	7830	0-7
	DATE		SEMENT - B/L		TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT PRE P	PAYE PAID
	30102	023 MARC	733724	RD2306	2:	306	AT3	XXX	16	4	LTL	9765116	- 2	PORT	PAY	ľΕ
	EXPÉDITEUI	R ET ADRESSE - S	SHIPPER AND A	ADDRESS		CONSI	GNATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7615	 596
	350 D MONTM		EPRĒNEU	RS PQ G5V		211 SHA	12 AY AWIN		E Li	SF A TI		MISSI Q G9N 8N	8	B/L 2	2310 2310 7651	031
		AUTRE QUE EXPÉ	•						SIGNER							
_		T TRSPT	<u> </u>		2101	ST						DOLLARD			AUX	
anammada	JCT. ORIG.	TRANSPORTEUR D'ORIGIN	NE - CONNECTING CAR	RIER N° PRO			PORTIG	ON D'ORI	GINE			VALEUR DÉCLAR	ĖE	C.O.D.		
רפשיו-ספר	JCT. DEST.	TRANSPORTEUR DESTINA	ATION - BEYOND CARR	IER N° PRO			PORTK	ON DESTI	NATIOI	V		NOTRE PART				
Ü	QTÉ	PCS / 2 TEL 819	DESCRIP 2 PLTS	TION		POIDS	S-WEIGHT		MME-A	S L-K	CODE	TAUX-RATE L	-K	TOTAL		F/P
	8		CARI			ME AS	UNT CRB	28.30	C/CF	101 28.7						
	8	PALETTES: CHE	P CP	C = AUT	RE =		648	L						130	.43	
	PALET		r – CP	AU AU					TPS/GS TVQ/P							
	FRAIS ADMINIS ADMINISTRATI	STRATIFS DE 2% PAR VE FEES OF 2% PER I	: MOIS SUR TOUTE MONTH ON ALL II	ES LES FACTURES P NVOICES AFTER 30	ASSÉES 30 DAYS (26.8)	JOURS (2 2% ANNU	26.82% AN JALLY)	NUELLEME	ENT)	737	7295	ТОТ	AL	130	.43	-



			G. C.
Signature: (19		rmation recueillie par / oyé / sent:2023/10/3	Information received by
	CITA		
Signé par / Signed by: <u>michel</u>	_	No. Factu	re / Probill: 508478307
INFORMATION			
Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/10/30
350 DES ENTREPRENEURS		Arrivée/Arrival:	19:47
MONTMAGNY		Début/Start:	19:47
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	19:51
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
MULTI RELIURE SF		RDV/Appt.:	0000/00/00
2112 AVE DE LA TRANSMISSI			00:00 00:00
SHAWINIGAN		Date:	2023/10/31
ST , PQ , G9N8N8		Arrivée/Arrival:	10:19
Barryinad Carries Barryin		Début/Start:	10:19
Required Service Requis HHL PCL LII		Départ/Departure:	10:27
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12266V		t / Bill of Lading B R0733724	on commande / Purchase Order
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fac			tion / Beyond Carrier No.Fact - Probill No.
			,
•			
DETAILS / DETAILS			
Qté/Qty Description	Poids/Weight	Dimension	s Guilbault
8 PCS / 2 PLTS	648 L	48x 40x	19-
TEL 819 537 6008		48x 40x	19-
Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	
The state of the s	2.51 51 11	J.J	



Trin	et Pro	# MAR07_33724			Date: 10/30/20						
		SHIP FROM				· · · · · · · · · · · · · · · · · · ·	5	SHIP TO			
Name: Marqu	uis Imprii	meur Inc.			Name: MULTI-	RELIURE					
Addres 350 ru		ntrepreneurs			Address 2112 D	: E LA TRANSI	nissio	ЭN			
	magny		State: QC	Zipcode: G5V 4T1		NIGAN			State: Zipcode: QC G9N 8N8		
Tel: 41824	111760		Referer	nce/PO: 	Tel: 8195376008 Reference/PO:						
Nanc	t Name: y Messer	vier			Contact Name: Multi-reliure						
Ref: 25900	7-028-75	7			Ref:						
Specia		· • • • • • • • • • • • • • • • • • • •			Special Inst:						
		BILL THIRD PAR	TY			F	REIGI	HT CHAF	RGES		
Name: Trinet	Transpo	rtation			3rd party	Billing:			Declared Value: \$0 Per:		
Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9			19B 2M9					Fer.			
City: State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9				H9B 2M9				,			
ļ				SPECIAL II	NSTRUC	TIONS					
				GUILBAUI	LT 50-847	830-7					
				SHIPPING	INFORM	ATION					
Items:	-										
Qty. Pgk.	Handi. Unit	De	scriptic	on		NMFC No.	Cls.	Weight (LB)	Dimensions (IN)		
8	2.00 SKID	FORMES						648.00	48.00X40.00X19.00		
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIA	L CONTACTS		
<u> </u>	any Name:				Contact N				Phone:		
Contact Name: Phone:				Email Add	· · · · · · · · · · · · · · · · ·						
Note: Tri Incombe des frais hired car	ínet Transport au transport de transport mer, The carr	iation inc. n'est pas responsable de eur engagé. La responsabilité maxi supplémentaires sont payés. / Trir ier's maximum liability is 2.00\$/lb. o	es pertes male du li et Transp r 4.41\$/kg				oblité de valeur de go. The l g and ad	la perte ou de éclarée ne figu liability for loss ditional freight	e l'endommagement de la cargais re au présent connaissement et q of or damage to cargo lies with t pald.		
Shippe Marq	uis Impri	meur inc. PL				D2506CZ		I-RELIUR	E		
Signature & Date: 30 Lo - 2023 This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department			eipt of package emergency res r camer has d	ponse information e DOT emergency	Signat	ure & Date:					
according to the applicable regulation of the Department response guidebook or of Transportation.					J. J. G. G. GOOGING						

T	'RANSPOI	RT GUI	LBAUL'	r in		THE	E - INVO	NCE	N° CIE	N° FACTURE	PROBIL	LL NO.
435, FARADAY, SAINTE-FOY, QC (TÉL.: 418-681-0575 TÉLÉCÓPIEUI	31N 4G6 8- 418-681-9198	8			FAC	IONI	- 11440	JICL	01	50-84	7831	L-5
	CUEILLETTE	TRANSFER	T FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATION	NC	A PERCEVOIR COLLECT	PORT PREP	PAYE AID
30102023 MAR0733729	RD2306	230	6 AT3	XXX	16	8	LTL	9765116	- 2	PORT	PAY	Œ
EXPÉDITEUR ET ADRESSE - SHIPPER AND AD	DRESS	COI	NSIGNATAIR	E ET ADF	ESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7615	597
MARQUIS IMPRIMEUR IN 350 DES ENTREPRENEUF		4	OCADI:	E ST						B/L	2310 2310)31)31
MONTMAGNY F	Q G5V 4		T LAU	RENT	(M0	ONTI	REAL) P(7	EXPE9 DEST TRAN		116 393
FACTURER AUTRE QUE EXPÉDITEUR/CONSIG	NATAIRE - BILL	TO OTHER	THAN SHIPP	ER/CONS	IGNER				,			
TRINET TRSPT C/O MAR	QUIS 2	2101 S	T REG	IS				DOLLARD	DES	S ORME	XUA	
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIE	R N° PRO		PORTI	ON D'ORI	GINE			VALEUR DÉCLARI	ĒE	C.O.D.	***	
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIES	N° PRO		PORT	ON DESTI	IOITAN	N		NOTRE PART				
						a I	0005			TOTAL	—Т	
OTÉ DESCRIPT 37 PCS / 1 PLT	ON	IP	OIDS-WEIGHT		MME-A	S L-K	CODE	52.94	·K	TOTAL	. 94	F/P
	00		040	-			ONI	52.94		32	. 94	
			61 D	_	-		ann	00 00		14 0	_	
			CARI	B LT	L		CRB	28.30		14.98	8	
		İ	1	MESIT	RE/N	MF.Δ9	SUREI	50 PC	CZ	7		
PALETTES: CHEP = CPC	= AUTF	RE =	848	L	· · · · / · ·						. 92	
PALETTES-	AU'	L		N° .	TPS/GS	т						
					TVQ/PS							
FOLIO ADMINISTRATICO DE SAS DAO MOIS SUS TOUTES	LEG EACTURES DA	notro do los	De (0e e0e) ***	AU 15 1 5 4 4 4	- KITI	73	7295			67	. 92	
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INV	OICES AFTER 30 D	AYS (26.82% A	no (20.82% AN (NNUALLY)	NOTILEIVI	IN F			TOTA	AL_			



gonodok 🚃			6
Signature:		rmation recueillie par oyé / sent: 2023/10/	/ Information received by 23 31 14:00
		-	
Signé par / Signed by:mRtimn	_	No. Fact	ure / Probill: 508478315
INFORMATION			
Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/10/30
350 DES ENTREPRENEURS		Arrivée/Arrival:	19:47
MONTMAGNY		Début/Start:	19:47
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	19:51
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
SOCADIS		RDV/Appt.:	0000/00/00
420 RUE STINSON		Datas	00:00 00:00
ST LAURENT (MONTREAL) MONTREAL , PQ , H4N3L7		Date: Arrivée/Arrival:	2023/10/31 13:29
MONTREAL, FQ, 114NJL7		Début/Start:	00:00
Required Service Requis HHL PCL LII		Départ/Departure:	13:34
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12352V		t / Bill of Lading [R0733729	Bon commande / Purchase Order
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.			ation / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS			
Qté/Qty Description	Poids/Weight	Dimensio	ns Guilbault
37 PCS / 1 PLT	848 L	48x 40x	45-
TEL 514 331 3300			
Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	



Trin	et Pro	# MAR07_33729							Date: 10/30/2023	
		SHIP FROM	1			····	S	SHIP TO		
Name:	tie Impele	neur Inc.			Name: SOCAI	nis.				
Addres		neur mc.			Address					
		ntrepreneurs				E STINSON	_	_		
City:	nagny	· · · · · · · · · · · · · · · · · · ·	State: QC	Zipcode: G5V 4T1	City:	LAURENT	11	Λ	State: Zipcode; QC H4N3L7	
Tel:	11760		Refere	nce/PO:	Tel: Reference/PO: Reference/PO:					
	t Name:		·		Contact					
Nanc	y Messer	vier			Receiv					
Ref: 26106	5-066				Ref:					
Specia	I Inst:				Special I	nst:	•			
		BILL THIRD PAR	TY			FI	REIGI	HT CHAF	RGES	
Name:					3rd party	Billing:			Declared Value: \$0	
	Transpo	rtation	_		_				Per:	
Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9				19B 2M9						
City: State: Zipcode:				1 '		<u> </u>			, , , , , , , , , , , , , , , , , , , 	
Dollard-Des-Ormeaux QC H9B 2M9					<u> </u>					
				SPECIAL IN	ISTRUC	TIONS				
	•			GUILBAUL	.T 50-847	831-5				
				SHIPPING I	NFORM	ATION		*		
Items:				•		•				
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	CIs.	Weight (LB)	Dimensions (IN)	
37	1.00 SKID	LIVRES						848	48.00X40.00X45.00	
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	IATERIA	CONTACTS	
Compa	ny Name:				Contact N	ame:			Phone:	
Contac	t Name:		Phone	e:	Email Add	Iress:				
Note: Tri incombe des frais hired car	net Transport au transport de transport rier. The carr	lation inc. n'est pas responsable de eur engagé. La responsabilité maxi supplémentaires sont payés. / Trin ler's maximum liability is 2.00\$/lb. o	es pertes male du t let Transp r 4.41\$/kg	ou dommages causi transporteur est 2.00 portation Inc. is not li g unless a declared	able for loss /alpe is show	of or damage to car n on this bill of ladin	abilité de valeur de go. The l g and ad	la perte ou de éclarée ne figu liability for loss ditional freight	e l'endommagement de la cargaisor re au présent connaissement et que c of or damage to cargo lies with the pald.	
Shipper: Marquis Imprimeur Inc. Carrier: GUILBAULT				SUC RD 23060 Consignee; SOCADIS						
properly classified, described, packaged, marked and placards. Carrier certifies e labeled, and are in proper condition for transportation was made available and or				Signature & Date: cecipt of packages and required s emergency response information or carrier has de DOT emergency reverent document in the vehicle.						

					Т	RANSPO	RT G	JILI	BAUL'	T IN	C	THR	E - INVO	NCE		N° CIE	N° FACTURE	- PROBII	LL NO.
	4	35, FAR EL.: 418	ADAY, SA 3-681-05	AINTĘ-FO 75 TÉLÉ	OY, QC G COPIEUR	1N 4G6 : 418-681-91	98				170	,,,		J.O.		01			
	DATE		CONNAIS	SEMEN	T - B/L	CUEILLETTE	TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CON	VSOLIDAT	ION	A PERCEVOIR COLLECT	PORT PREF	PAYE 'AID
	01112	023	TEX(0099	18	VH2200	37	500	AA6	XXX	6	16	LTL	976	5116	- 2	PORT	PA	ζE
	EXPÉDITEUI	RETAD	RESSE - :	SHIPPER	AND AD	DRESS		CONSI	GNATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDR	RESS		COMP	7718	387
	TECHN 3015 ST AL	BROI PHOI	DEUR NSE I	DE G		Q JOE		350 MO1	O DE:	S EN' GNY	TRE	MEUI PREI	R ING NEURS P(5	5V 4T	'1	B/L	2311 2311 7651	102
					•	NATAIRE - BI					SIGNER			507			a 05).=		
_	TRINE						2101	ST									S ORME.	AUX	
anamana	JCT. ORIG.	TRANSPOR	RTEUR D'ORIGI	ine - Connec	CTING CARRIE	N° PRO			PORTIO	ON D'ORI	GINE			VALEU	R DÉCLAF	REE	C.O.D.		
このあい-ひにし	JCT. DEST.	TRANSPOR	RTEUR DESTIN	IATION - BEY	OND CARRIER	N° PRO			PORTK	ON DESTI	IOITAN	N		NOTRE	PART				
ũ	QTÉ			DI	ESCRIPTI	ON		POID	S-WEIGHT	L-K CO	MME-A		CODE		-RATE I	L-K	TOTAL		F/P
	1		TE NO L 418		MP 6 56	66			190	L B LT	21(L	O L	UNT		3.30		69 19.6	.32	
						P.O.	180	9	1	ME SU	RE/1	MEAS	SUREI	D	21 P	c/c			
	1	PALET	TES: CHE	P =	CPC :	= AU	TRE =		190	L	•						88	.94	
	PALET				5. 0	JA		L			TPS/GS TVQ/PS								
	FRAIS ADMINIS ADMINISTRATI	STRATIFS VE FEES	DE 2% PAF OF 2% PER	R MOIS SUI MONTH O	R TOUTES ON ALL INV	LES FACTURES DICES AFTER 30	PASSÉES 30 DAYS (26.8:	JOURS () 2% ANNI	26.82% AN JALLY)	NUELLEME	ENT)	73	7295		тот	AL	88	.94	



			<u> </u>	
Signature:		rmation recueillie par oyé / sent: 2023/11/	/ Information received by 2002 09:01	
Signé par / Signed by: <u>jean</u>	_	No. Fact	ure / Probill: 508767956	
INFORMATION				
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		*
TECHNOROL INC		Date:	2023/11/01	
3015 BRODEUR		Arrivée/Arrival:	13:07	
ST ALPHONSE DE GRANBY		Début/Start:	13:07	
SHEFFORD , PQ , J0E2A0		Départ/Departure:	13:08	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery	0000/00/00	
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS		RDV/Appt.:	0000/00/00 00:00 00:00	
MONTMAGNY		Date:	2023/11/02	
MONTMAGNY, PQ, G5V4T1		Arrivée/Arrival:	08:20	
		Début/Start:	08:21	
Required Service Requis HHL PCL LII		Départ/Departure:	08:31	
Facture / Probill				_
Terme / Term Remorque / Trailer PPD 12547CV		nt / Bill of Lading E K 00991 8	Bon commande / Purchase Order 18009	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	Probill No.	Jct. Dest. Transporteur Destina	ation / Beyond Carrier No.Fact - Probill No	i.
DÉTAILS / DETAILS				
Qté/Qty Description P	oids/Weight	Dimensio	ns Guilbault	***
1 PLTE NON EMP	190 L	40x 51x	18-	
TEL 418 246 5666				
Facturé à / Bill to				
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS		

N° DE REMORQUE

N° ORDRE

CONNAISSEMENT NON NÉGOCIABLE TEX009918 1er nov. 2023 18009 NON NEGOTIABLE BILL OF LADING EXPÉDITEUR / SHIPPER **ORIGINE:** Nom/Name TECHNOROL Adresse/Address 3015, RUE BRODEUR OUEST Nom du transpo Ville/City ST-ALPHONSE DE GRANBY QC FUILBRULT TRATSPORT GUILBRULT RELIENTATION INC. B-024493-0 www.groupeguilbault.com Telescont Gunama: Intermetional Inc. R-004428-0 Code Postal Nº Tél.: 450-777-2203 J 0 E 2 A D Postal Code Tel. no. Courtier en douanes / Customs broker Transporteur conjoint / Interline DESTINATAIRE / CONSIGNEE **DESTINATION:** Name: Nom/Name MARQUIS IMPRIMEUR Nº Téléc.: Adresse/Address 350, RUE DES ENTREPRENEURS Tel. no. Fax no. Reçu au poi décrites en Reçu au point korigine, à la cute et de l'expéditeur mentionné aux présentes les marchandises ci-après décrites en bon état apparent (le contenu du cois et sa condition étant inconnex) marquées, contresignées et destimatés tel que ci-après mentionné, que le transporteur consent à transporter de délivrer à leur consignataire au point de destination si ce point se trouve sur la route qu'il est autorisé à désaenvir, sinon à laur transporter et délivrer par un autre transporteur autorisé à ce faire et ce, aux taux et à la classification en vigueur à la date de l'expédition. Ville/City MONTMAGNY QC Code Postal N° Tél.: 418-246-5666 G 5 V 4 T 1 Postal Code It also usassination in rivgues a lacticule supersion.

It est instruction mit convenient are chaque transporteur transportant lesdites marchandises, en tout ou en partie sur le procupation en la partie sur le procupation de la procession de la convenient de la **FACTURER À / BILL TO** Nom/Name Valeur déctarée / Declared valuation: _ (SUJETTE À DES FRAIS DE 3% DE L'EXCÉDENT DE \$2.00 LA LIVRE) Adresse/Address RESPONSABILITÉ MAXIMALE: À défaut d'autre montant, 4,41\$ par kilogramme/2,00\$ la livre représente la limite maximale de la valeur déclarée par l'expéditeur pour les marchandises décrites au présent connaissement. L'expéditeur reconnaît qu'en cas de perte, la responsabilité du transporteur ne pourre excéder cette valeur déclarée, calculée sur le poids total de l'expédition. Code Postal Ville/City Postal Code L'EXPÉDITEUR SERA RESPONSABLE DES INFRACTIONS ET DES AMENDES DÉCOULANT DES SURCHARGES TOTALES ET/OU AXIALES. MAXIMUM LIABILITY: If no other amount is declared, \$4.41 per kilo/\$2,00 per pound represents the maximum value declared by the shipper for the goods described in the present bill of lading and the shipper acknowledges that in case of loss, the liability of the carrier will not exceed such declared valuation, calculated solely on the total weight of the shipment. THE SHIPPER WILL BE LIABLE FOR OFFENCES AND FINES RESULTING IN OVERLOADING ON TOTAL WEIGHT AS WELL AS PER AXLE WEIGHT. Poids / Weight FRAIS DE TRANSPORT Nombre et type de saquets / Number and Description des marchandises, marques et particularités Particulars of goods, marks and exceptions Montant **FREIGHT CHARGES** Kilos Amount Livres type of package Palettes empilables **(•** 190 À percevoir Collect (\bullet) 1 PALETTES / PALLETS Payès d'avance Prepaid BOÎTES / BOXES es trais seront à la charge de l'expéditeur à noins d'avis contraire (40"X51"X18") moins d'avis contraire. Freight charges will be undertaken by shipper unless indicated otherwise. ENVOI CONTRE REMBOURSEMENT C.O.D. SHIPMENT Frais de recouvrement Collection charges SOUMISSION N°/QUOTE NO .: SI AU RISQUE DE L'EXPÉDITEUR, INDIQUEZ-LE ICI IF RISK IS SUPPORTED BY SHIPPER, PLEASE INDICATE HERE **INITIALES** INITIALS C.O.D. / C.R. ESPACE REQUIS PAR L'EXPÉDITEUR / SPACE REQUIRED BY SHIPPER Montant / Amount TEMPÉRATURE DEMANDÉE / REQUIRED TEMPERATURE: °C ()3/4 ()1/2 1/4 DÉCLARATION DE TRANSPORT DE MATIÈRES DANGEREUSES / DANGEROUS GOODS - DESCRIPTION Droits / Fees Numéro UN / UN number: ... Appellation réglementaire / Regulatory designation. Somme / Total _ Numéro de la classe / Class number: Groupe d'emballage GE / Packing group:_ Plaques requises / Placards required De / From POIDS :_ _ Téléphone urgence / Emergency telephone . . Je déclare que le contenu de ce chargement est décrit ci-dessus de façon complète et exacte par "I hereby declare that the contents of this consignment are fully and accurately described above by the Pappellation réglementaire adéquate et qu'il est convenablement classifié, emballé et muni proper shipping name, am properly classified and packaged, have dangerous goods safety marks d'indications de danger - marchandises dangereuses et à tous égards bien conditionné pour être property affixed or displayed on them, and are in all respects in proper condition for transport according A/To transporté conformément au Règlement sur le transport des marchandises dangereuses.» to the Transportation of Dangerous Goods Regulations TEMPS REQUIS POUR LA MANUTENTION / TIME REQUIRED FOR HANDLING N° VÉRICULE / UNIT NO.: TEMPS DE CUEILLETTE ET LIVRAISON / PICK UP AND DELIVERY TIME État apparent des marchandises Cueillette / P/U: _ _ Début / Start: ____ Livraison / Delivery ____ Visible freight's condition Bon / Good 💭 Arrivée / Arrival: __ _ Fin / End: ___ Mauvais / Bad ___ Fin / End: _ Arrivée / Arrival; _ AVIS DE RÉCLAMATION a) Le transportaur n'est pas re l'origine des marchandises, leur transporteur de destination, di réclamation fissée accompagnée, d'une preuve de pillement des trais de transport doit être soumée su transporteur dans un délai de neur (5) mois suivant le date de l'expédition. N.B. YOIR LES CONDITIONS Transporteur / Carrier: Date: N.B. NOTE CAREFULLY CON **DITIONS ON BACK HEREOF** INDIQUEZ PAR UN "X" SI LA QUANTITÉ REÇUE NE PEUT ÊTRE VÉRIFIÉE

N° RÉFÉRENCE DU CLIENT

			TRANSPO	RT G	UIL	BAUL'	r in	C	THE	E - INVO	NCE		N° CIE	N° FACTURI	- PROBI	LL NO.
1	135, FARADAY	, SAINTE-FOY, QC 0575 TÉLÉCOPIEU	G1N 4G6	98				FAC	JION	- II V V	JICL		01	60-11	1908	3-0
DATE		AISSEMENT - B/L		TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CON	SOLIDAT	ION	A PERCEVOIR COLLECT	PORT PREF	PAYE PAID
30102	023 MA	R0733687	CHERIF	178	237	HN6	XXX	6	16	LTL	976	5116	- 2	POR'I	PA?	ΥE
EXPÉDITEUI	R ET ADRESSE	- SHIPPER AND A	ADDRESS		CONSI	GNATAIRI	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDR	ESS		COMP	7615	508
SUPER	LUSTR	E GRAPHI	QUE INC	•	MAI	RQUIS	S IM	PRI	MEU!	R INC	⊋.			B/L	2310	
		GAGNON (MONTREA	T.A			O DES		TRE	PRE	NEUR	S			P/L EXPES	765	116
OI LE	ONAID	(HON HEA	PQ H1P	1Y5	1401	. 11.12.10	3111			PÇ	Q G5	V 4T	1	DEST TRAN		
		KPÉDITEUR/CONS		L TO OTH	ER THA	N SHIPPE	ER/CONS	SIGNER								
TRINE	T TRSP	T C/O MA	RQUIS	2101	ST	REG:	IS				DOL	LARD	DE	S ORME	AUX	
JCT. ORIG.	TRANSPORTEUR D'O	RIGINE - CONNECTING CAR	RIER N° PRO			PORTIC	ON D'ORI	GINE			VALEUF	DÉCLAF	ŔÉE	C.O.D.		
JCT. DEST.	TRANSPORTEUR DE	STINATION - BEYOND CARR	IER N° PRO			PORTK	ON DEST	INATIO	N		NOTRE I	PART				
	i															
QTÉ		DESCRIP	TION		POID	S-WEIGHT		MME-A	S L-K		TAUX-		K	TOTAL		F/P
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		41 1760 BELANGE	R													
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								RE/I	MEA	SUREI	b	4 P	c/c			
1	PALETTES: C	HEP = CP	C = AUT	TRE =		200	L							67	7.92	
PALET			AU				N°	TPS/GS	ST					78.119		
							N°	TVQ/P	ST							
EDATE ADMAIAN	CTDATICS DE 30	DAD MOIS SUD TOUTS	COLEC EACTURES D	ACCÉEC 20	IOLIDS /	26 9264 ANI	MIELLEMI	ENITY	73	7295				67	7.92	

TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



BILL OF LADING NOT NEGOTIABLE

Trine	et Pro	# MAR07_33687							Da	ite: 10/30/2023
() 化	ing ong Sussanian	SHIP FROM					·	HIP TO	,	
	R LUSTR	E			Name:	s Imprimeur I	nc			
		GAGNON	<u> </u>		Address:	ie des Entrep	reneu	rs	_	
	REAL		State: QC	Zipcode: H1P 1Y5	City: Montm	agny		_	State: QC	Zipcode: G5V 4T1
Tel: 51493	93404		Refere	nce/PO:	Tel: Reterence/PO: 4182411760					
	t Name: i <mark>n Prege</mark> r	nt			Contact Name: Lucie Belanger					
Ref: 26062 -	4				Ref:					
Special	Inst:				Special I	nst:				
		BILL THIRD PAR	TY					T CHAR	GES	
	Transpo	rtation			3rd party	Billing:			Declared	Value: \$0
Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9				19B 2M9					Per:	
City: Dollar	d-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9						
				SPECIAL IN	STRUC	TIONS		, .	-	·
	Med Teleph			SHIPPING II	NFORM	ATION				
Items:										
Qty. Pgk.	Handl. Unit	De	scriptic	on		NMFC No.	Cls.	Weight (LB)	Din	nensions (IN)
0	1.00 SKID	couverts			,			200	28.00X	22.00X11.00
	CUS	TOMS BROKER INFO	RMA	TION	2 No. 2	HAZARDO	US M	ATERIAL	CONTA	CTS
Compa	ny Name:				Contact N				Phone	:
	t Name:		Phone		Email Add					
Note: Trii incombe des frais hired can	net Transport au transport de transport rier, The carri	ation Inc. n'est pas responsable d eur engagé. La responsabilité max supplémentaires sont payés. / Trir er's maximum liability is 2.00\$/lb. o	es pertes imale du t net Transp or 4,41\$/k	ou dommages causé transporteur est 2.003 portation Inc. is not liz g unless a declated v	e(e)s à la car 6/lb ou 4.41\$ able for loss alue is show	gaison. La responsa kg à moins qu'une of or damage to car n on this bill of lading	abilité de valeur de go. The l g and ade	la perte ou de darée ne figur liability for loss ditional freight p	e l'endommage re au présent : of or damage paid,	ement de la cargaison connaissement et que to cargo lies with the
Shippe		TIAL	Carrie		MA		Consig			
Signati	ure & Date:	3000		ature & Date:		$I(X(\cdot))$	Signat	ure & Date:		
This is to properly labeled, according	o certify that in classified, de- and are in property portation	he above named materials are escribed, packaged, marked and oper condition for transportation icable regulation of the Departmen	Carrie placar was m respor	r acknowledges recei ds. Carrier certifies er nade available and or nse guidebook or reve	ptipital ackago nergancy res calmental as d erent gocume	es and required ponse information e SOT emergency int in the vehicle.				

TRANSPORT G	UILBAUL	I INC	CTURE - IN	VOICE	N° CIE	N° FACTURE - PI	ROBILL NO.	
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL: 418-681-0575 TÉLÉCÓPIEUR: 418-681-9198		100	JI OILE - III	VOIOE	01	60-1568	334-4	
DATE CONNAISSEMENT - B/L CUEILLETTE TRANS	SFERT FACT.	TARIF. ORIG.	DEST. CATE	G. CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT PAYE PREPAID	
30102023 MAR0733698 12207V	CC6 CC6	CLO 8	6 LT	L 9765116	- 2	PORT I	PAYE	
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONSIGNATAIRE	ET ADRESSE -	CONSIGNEE	AND ADDRESS		COMP 76	61578	
INC 922 RUE BERLIER LAVAL		ILE DE MONTREAL 1001 DE MAISONNEUVE #303 MONTREAL EXPE 976511						
PQ H7L 4K5	MONTRE	711		PQ H2L 4P	9	DEST TRAN	893	
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTE	HER THAN SHIPPE	R/CONSIGNER						
TRINET TRSPT C/O MARQUIS 2101	ST REGI	[S		DOLLARD	DES	S ORMEAU	JX	
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO	PORTIC	ON D'ORIGINE		VALEUR DÉCLAR	ĚΕ	C.O.D.		
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO	PORTIC	ON DESTINATION	N	NOTRE PART				
	DOIDS WEIGHT	L 1/ COMMAT A	6 L K 60D	E TAUX-RATE L	v T	TOTAL	F/P	
OTÉ DESCRIPTION 27 PCS / 1 SKID	800	L-K COMME-A	S L-K COD			48.1	-	
27 FCS/ I SKID	800	-	ON	40.10		40	18	
MARIE EVE LEFEBVRE								
	CAR	, T mT	CR	B 28.30		13.63		
	CAR	3 LTL	CR	B 26.30		13.63		
P.O. 256	247							
	1	ÆSURE/I	MEASUR	ED 58 P	C/CF			
27 PALETTES: CHEP = CPC = AUTRE =	800	L				61.8	31	
PALETTES- AUT	<u> </u>	N° TPS/GS						
		N° TVQ/P	ST					
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.8) JOURS (26.82% AN	NUELLEMENT)	73729	⁵ тот	۸۱	61.8	31	
ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.8)	32% ANNUALLY)				<u> </u>			



Signature:	-19
Signé par / Signed by:	marie eve

Information recueillie par / Information received by envoyé / sent : 2023/11/01 12:30



Signé par / Signed by: <u>marie eve</u>	_	No. Factu	re / Probill: 601568344
INFORMATION			
Expéditeur / Shipper		Cueillette / Pickup	
INC		Date:	2023/10/30
922 RUE BERLIER		Arrivée/Arrival:	13:48
LAVAL		Début/Start:	13:54
LAVAL , PQ , H7L4K5		Départ/Departure:	14:11
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
ILE DE MONTREAL		RDV/Appt.:	0000/00/00
1001 DE MAISONNEUVE #303			00:00 00:00
MONTREAL		Date:	2023/11/01
MONTREAL , PQ , H2L4P9		Arrivée/Arrival:	11:35
MONTALAL, I & , IIZLAI 3		Début/Start:	11:35
Required Service Requis		Départ/Departure:	11:51
HHL PCL LII		Depart/Departure.	11.51
Facture / Probill Terme / Term Remorque / Trailer PPD 11852 Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.	MA	R0733698	on commande / Purchase Order 256347 on / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS			
Qté/Qty Description	Poids/Weight	Dimension	s Guilbault
27 PCS/ 1 SKID	800 L	40x 48x	52-
MARIE EVE LEFEBVRE			
Facturé à / Bill to			
TRINET TRSPT			
TRINETTROLL	2101 ST RE	GIS	

/ Inside - Pickup

CII - Cueil. - Intérieure

TRANSPORT GUILBAULT INC



435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

11852

PREUVE DE LIVRAISON PROOF OF DELIVERY

www.c	groupeguilbault.com		<u> </u>			<u> </u>	
DATE	CONNAISSEMENT - BLL OF LADING	QUEILLETE - PIOX-UP	TRANSFERT - TRANSFER	ORIG DE	ST CATEG	BON DE COMMANDE - PO	FACTURE - PROBLE
y mmissas-dd/mm/yyy 30102023	MAR0733698	12207V	CC6	8 6	L	256347	60-1568344
EXPÉDITEUR ET A	DRESSE - SHIPPER AND ADDRESS		CONSIGNATAIRE ET ADRESS	E - CONSIGNE	E AND ADDRESS		<u> </u>
INC			ILE DE MONT		· · · · · · · · · · · · · · · · · · ·		A PERCEVOIR - COLLECT PORT PAYÉ - PREPAID
922 RUE	BERLIER		1001 DE MA	LSONNE	UVE #30	3	PORT PAYE
LAVAL			MONTREAL				VALAGE DÉCLARÉE
	PQ H	7L 4K5			PQ	H2L 4P9	DECLARED VALUE
ACTURE A - BILL TO	<u> </u>		<u> </u>				PAIEMENT SUR LIVRAISON - C 0 0
RINET T		2101 ST REGIS		_			
ICT, ORIG.	RANSPORTEUR D'ORIGINE - COI	NNECTING CARRIER	NO PRO - PRO NO.		RENDEZ-V	OUS - APPOINTMEN	IT HEURE-TIME
ICT, DEST.	RANSPORTEUR DESTINATION -	BEYOND CARRIER	NO PRO - PRO NO			:	0
atė-aty.	DESCRIPTION	<u>,</u>	POIDS-WEIGHT	L-K	COMME-AS		
	PCS/ 1 SKID		800	L			
•	MARIE EVE LEFEB	/RÉ	CARB LT	L		[]PET	ON HYDRAULIQ IT CAMION INTERIEURE RES
TOTAL 2.7	REÇU EN BON ÉTAT PAR - RECEIVED	IN GOOD ORDER BY 20231	OTAL POISSES TOTAL PER CO. OTAL			TOTAL	58 PC/CF CC
	DÉBUT - BEGINNING F	IN - END	DATE LAVRÉE - DELIVE	RY DATE	IVATE PAR IDELIVERY	BY NEADORCEAUX HIST PRESE	PALETTES-PALLETS mtl
DIMENSION	N 8Y 52/		Ug	W	u, o v		

BILL OF LADING NOT NEGOTIABLE

Trinet Pro # MAR07_33698 Date: 10/30/2023 SHIP TO SHIP FROM. Name: Name: INC ILE DE MONTREAL Address: Address: 922, Rue Berlier 1001 boul de maisonneuve est bureau 303 Zipcode: Zipcode: City: State: City: H7L 4K5 H2L 4P9 QC Montreal QC Laval Tet: Reference/PO: Tel: Reference/PO: 4504850035 5148099328 Contact Name: Contact Name: DÉCOUPAGE BM Marie-ève Lefebvre CIUSSS DU CENTRE SUD Ref: 256347 Special Inst: Special Inst: upati BILL THIRD PARTY FREIGHT CHARGES Declared Value: \$0 Name 3rd party Billing: [X]Trinet Transportation Per: Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 State: QC H9B 2M9 Dollard-Des-Ormeaux SPECIAL INSTRUCTIONS 4 14 J. Bon de commande 655953+655950+655949+655699 SHIPPING INFORMATION

Items:

Qty. Pgk.	Handl. Unit		Description		NMFC No.	CIs.	Weight (LB)	Dimensions (IN)
27	1.00 SKID	books		, ,			800	40.00X48.00X52.00
. 4	cus	OMS BROKE	RINFORMATION		HAZAŘDO	US N	ATERIA	CONTACTS
Compai	ny Name:			Contact	Name:			Phone:
Contact	Name:		Phone:	Email Ad	idress:			-

Note: Trinet Transportation Inc. n'est pas responsable des pertes ou dommages causé(e)s à la cargaison. La responsabilité de la perte ou de l'endommagement de la cargaison incombe au transporteur engagé. La responsabilité maximale du transporteur est 2.005/lb ou 4.415/kg à moins qu'une valeur déclarée ne figure au présent connaissement et que des frois de transport supplémentaires sont payés. / Trinet Transportation Inc. is not liable for loss of or damage to cargo. The liability for loss of or damage to cargo lies with the hired carrier. The carrier's maximum liability is 2.005/lb. or 4.415/kg unless a declared value is shown on this bill of lading and additional freight paid.

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Shipper:	Carrier: 30/6/37	Consignee;
INC	IGUILBAULT	ILE DE MONTREAL
Signature & Date:	Signature & Date GM Jh	Signature & Date:
This is to certify that the above named materials are	Carriel acknowledges receipt of packages and required	
	placards. Carrier certifies emergency response information was made available and or carrier has de DOT emergence	
according to the applicable regulation of the Department	response guidebook or reverent document in the vehicle.	
of Transportation.		



TRANSPORT GUILBAULT INC FACTURE - INVOICE										
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL:: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198		•	ACTOIL	11444	5102	01	60-156	6835	5-1	
DATE CONNAISSEMENT - B/L CUEILLETTE TRANSF	ERT FACT.	TARIF. OF	RIG. DEST.	CATEG.	CONSOLIDATIO	ON	A PERCEVOIR COLLECT	PORT F PREP	PAYE AID	
30102023 MAR0733699 12207V C	CC6 CC6	CLO	8 8	LTL	9765116-	- 2	PORT	PAY	ľΕ	
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONSIGNATAIRI	E ET ADRES	SE - CONSI	GNEE AN	D ADDRESS		COMP '	7615	 579	
INC	PROLOGU						B/L 2	2310		
922 RUE BERLIER LAVAL	3785 LA		TE O	JEST			P/L EXPE9	7651	116	
PQ H7L 4K5	201021			P	Q J7H 1N7	7	DEST TRAN		393 ——	
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHE			NER							
TRINET TRSPT C/O MARQUIS 2101	ST REG	IS			DOLLARD		S ORME	XUA		
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO	PORTIC	ON D'ORIGIN	E		VALEUR DÉCLARÉ	E	C.O.D.			
JCT, DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO	PORTK	ON DESTINA	TION		NOTRE PART					
QTÉ DESCRIPTION	POIDS-WEIGHT		IE-AS L-K		TAUX-RATE L-	K	TOTAL		F/P	
41 PCS/ 1 SKID	950	L		UNT	55.10		55	.10		
450 434 0306 404 STEPHANE SIROIS	TAII	L GATE	:	HHL	35.00		35	.00		
DO NOT DOUBLE STACK SKIDS			-	CRB	28.30		15.59	إ ```ف		
LIFTGATE										
P.O. 2563	347									
41	950	4Ę SURE	:/MEA:	SURE	58 PC	C∤CI	105	60		
PALETTES: CHEP = CPC = AUTRE =	950	L					105	. 69		
PALETTES- AUT		N° TPS	•							
		N° TV	1/PS1							
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (2882	JOURS (26.82% ANI	NUELLEMENT)	73	7295	TOTA	\ I	105	. 69		
ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82	2% ANNUALLY)					<u> </u>				

BILL OF LADING NOT NEGOTIABLE

8

Trinet Pro # MAR07 33699 Date: 10/30/2023 SHIPTO SHIP FROM - - -Name: INC DIFFUSION PROLOGUE Address: Address: 922, Rue Berlier 3785, Rue La Fayette Ouest State: Zipcode: Zipcode: City: City: State: J7H 1N5 Laval QC H7L 4K5 **Boisbriand** QC Reference/PO: Reference/PO: Tei: Tel: 4504850035 4504340306404 Contact Name: Contact Name: DÉCOUPAGE BM Stephane Sirois Ref: 256347 Special Inst. Special Inst: BILL THIRD PARTY FREIGHT CHARGES Declared Value: \$0 Name: 3rd party Billing: X Trinet Transportation Per: Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 State: Zipcode: Liftgate Delivery LTL Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS

SHIPPING INFORMATION

Items:

Qty. Pgk.	Handl. Unit		Description	N	MFC No.	Cls.	Weight (LB)	Dimensions (IN)
41	1.00 SKID	books					950	40.00X48.00X52.00
و او	cus	TOMS BROKER	INFORMATION	HA	ZARDO	US M	ATERIAL	.CONTACTS
Сопіраі	ny Name:			Contact Name:				Phone:
Contact	Name:		Phone:	Email Address:				

Note. Trill et Transportation Inc. n'est pas responsable des pertes ou dommages causé(e)s à la cargaison. La responsabilité de la perte ou de l'endommagement de la cargaison incombe ou transporteur engagé. La responsabilité maximale du transporteur est 2.005/fb ou 4.415/kg à moins qu'une valeur déclarée ne figure au présent connaissement et que des transport supplémentaires sont payés. / Trinet Transportation Inc. is not liable for loss of or damage to cargo. The liability for loss of or damage to cargo fies with the hired currier. The carrier's maximum liability is 2.005/fb, or 4.415/kg unless a declared value is shown on this bill of lading and additional freight paid.

Shipper: INC	Carrier: GUILBAULT	Consignee: DIFFUSION PROLOGUE
Signature & Date:	Signature & Date M. Signature	Signature & Date:
properly classified, described, packaged, marked and abelian and are in proper condition for transportation	Carrier acknowledges receipt of packages and re placards. Carrier certifies emergency response in was made available and or carrier has de DOT e response guidebook or reverent document in the	formation mergency



				T)	RANSPO	RT G	JILI	BAUL'	T IN		TUD	E - INVO	NCE		N	° CIE	N° FACTUR	E - PRO	BILL NO.
4	35, FARAD)AY, SAII 81-0575	NTĘ-FOY, TÉLÉCO	QC G PIEUR:	1N 4G6 418-681-91	98				'^	. i Oiti	11440	J.O.L			01	60-1	9577	77-8
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JCT. DEST.	TRANSPORTEL	IR DESTINATI	ION - BEYOND	CARRIER	N° PRO				ON DEST					E PART					
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TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



FUILBRULT 60-195777-8 CONNAISSEMENT BILL OF LADING

Trin	et Pro	# MAR07_33745							(Date: 10/30/2023
		SHIP FROM						SHIP TO		
Name: Marqu	ıis Imprii	meur Inc.			Name: DIFFU:	SION PROLO	GUE			
Addres 350 ru		ntrepreneurs			Address 3785, F	: Rue La Fayett	e Que	st		
City: Montr	nagny		State: QC	Zipcode: G5V 4T1	City: Boisbr	iand	7	$\overline{\lambda}$	State: QC	Zipcode: J7H 1N5
Tel:	11760		Referer	nce/PO:	Tel: 450434	0306	7)		Referen	ce/PO:
	t Name: / Messer	vier	<u>'</u>		Contact Stepha	Name: ine Sirois		7	······	
Ref: 26078	3-254644	1-259747			Ref:					
Specia	l inst:				Special	Inst:				
		BILL THIRD PAR	TY			F	REIG	HT CHAR	GES	
Name: Trinet	Transpo	ortation			3rd party	/ Billing: [X]			d Value: \$0
Addres	s:	Blvd, Dollard-Des-Orme	aux. H	9B 2M9					Per:	
City:	rd-Des-O		Zipcode: H9B 2M9							
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				GUILBAUL	T 60-195	777-8				
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items:			•							
Qty. Pgk.	Handl. Unit	De	scriptio	n		NMFC No.	CIs.	Weight (LB)	D	imensions (IN)
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<u> </u>	iny Name:	•			Contact N				Phon	ie:
	t Name:		Phone		Email Add	,				
Note: Tri incombe des frais hired car	net Transport au transport de transport der. The carr	tation Inc. n'est pas responsable de eur engagé. La responsabilité maxi supplémentaires sont payés. / Trin ler's maximum liability is 2.00\$/ib. o	es pertes male du tr et Transp r 4.41 \$/ kg	ou dommages cause ransporteur est 2.005 ortation Inc. Is not jie unless a declared v	e(e)s à la car s/lb ou 4.41\$ able for loss apue is show	rgaison. La respons /kg à moins qu'une of or damage to ca n on this bill of ladin	abilité de valeur d rgo. The g and ad	e la perte ou de éclarée ne figur liability for loss ditional freight	l'endomma re au préser of or dama paid.	gement de la cargaison it connaissement et que ge to cargo lies with the
Shippe Marqu		meur Inc. PC	Carrie GUIL	EBAULT	JSLC	ROBBEZ	Consid DIFF	^{jnee} ; USION PR	OLOGUE	=
	ure & Date:		1 -	ture & Date: 3	9/10/2	23	Signat	ure & Date:		
properly labeled, accordin	classified, do and are in pr	he above named materials are sscribed, packaged, marked and oper condition for transportation icable regulation of the Department	placard was ma	acknowledges receipes. Carrier certifies er ade available and or ese guidebook or reve	nergency res carrier has d	ponse information e DOT emergency				

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TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO OTÉ DESCRIPTION 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 14 PALETTES - CPC = AUT PALETTES - AUT	435, FARADAY, SAINTE-FOY, QC G1N 4G6 TEL: 418-681-0575 TELECOPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFER 30102023 MAR0733693 RD2306 23 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHE TRINET TRSPT C/O MARQUIS 2101 JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO OTÉ DESCRIPTION 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 4609 PALETTES - CPC = AUTRE = PALETTES - AUT	435, FARADAY, SAINTE-FOY, OC GIN 4G6 TEL: 418-681-0575 TELECOPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT 30102023 MAR0733693 RD2306 2306 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTRE PRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAT TRINET TRSPT C/O MARQUIS 2101 ST JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO JCT. DEST. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO QTÉ DESCRIPTION POID 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 460958 14 PALETTES - CPC = AUTRE = PALETTES - AUT	A35. FARADAY, SAINTE-FOY, OC G1N 466 TEL: 418-681-0575 TELECÓPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT FACT. 30102023 MAR0733693 RD2306 2306 AT3 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPI TRINET TRSPT C/O MARQUIS 2101 ST REG: JCT. ORIG. TRANSPORTEUR DORIGINE - CONNECTING CARRIER N° PRO PORTION OTÉ DESCRIPTION POIDS-WEIGHT 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 460958 P.O. 460958 PALETTES - AUTRE - AUTR	A35. FARADAY, SAINTE-FOY, QC GIN 4G6 TEL: 418-681-0575 TELECOPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT FACT. TARIF. 30102023 MAR0733693 RD2306 2306 AT3 XXX EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTRE PRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONS TRINET TRSPT C/O MARQUIS 2101 ST REGIS JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIG 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 460958 MESUI 14 PALETTES: CHEP = CPC = AUTRE = PALETTES - AUT N° N° 1000 PALETTES - AUTRE 1456 L PALETTES - AUTRE 1456 L	435, FARADAY, SAINTE-FOY, QC G IN 466 TEL: 418-681-0575 TELECOPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT FACT. TARIF. ORIG. 30102023 MAR0733693 RD2306 2306 AT3 XXX 16 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS JCT. ORIG. TRANSPORTEUR DORIGINE - CONNECTING CARRIER N° PRO OTÉ DESCRIPTION OTÉ DESCRIPTION OTÉ DESCRIPTION PORTION D'ORIGINE OTÉ DESCRIPTION POIDS-WEIGHT L-K COMME-A 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 460958 ME SURE /N PALETTES: CHEP = CPC = AUTRE = PALETTES - AUT	### A35, FARADAY, SAINTE-FOY, OC GIN 466 TEL: 418-681-0575 TELECOPIEUR: 418-681-9198 DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT FACT. TARIF. ORIG DEST. 30102023 MAR0733693 RD2306 2306 AT3 XXX 16 4 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS JCT ORIG TRANSPORTEUR DURIGINE CONNECTING CARRIER N° PRO JCT. DEST. 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GIN 466 TEL: 418-681-0575 TELECOPIEUR 418-681-9198 DATE CONNAISSEMENT BYL CUEILLETTE TRANSFERT FACT. TARIF. ORIG DEST. CATEG. CONSOLIDATION ORIGINES 30102023 MAR0733693 RD2306 2306 AT3 XXX 16 4 LTL 9765116 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURE AUTRE OUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARI JCT ORIG. TRANSPORTEUR DORIGINE - COMMETING CARRIER N° PRO PORTION D'ORIGINE TRANSPORTEUR DESTRACTION - BEYOND CARRIER N° PRO PORTION D'ORIGINE POUS-WEIGHT L-K COMME-AS L-K CODE TAUX-RATE 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TEL 800 361 2161 P.O. 460958 MESURE/MEASURED 57 E PALETTES - AUTRE - AUTR	435. FARADAY. SAINTE-FOY. OC GIN 466 TEL. 418-681-0575 TELECOPIEUR 418-681-9198 DATE CONNAISSEMENT BY CUEILLETTE TRANSFERT FACT. TARRIF ORIG DEST. CATEG CONSOLIDATION 30102023 MARO733693 RD2306 2306 AT3 XXX 16 4 LTL 9765116-2 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 MARQUIS GACNE TO AVE DEVEAULT LOUISEVILLE PQ J5V 3C2 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DE JCT. ORIG TRANSFORTEUR DESTINATION. SEYONG CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE 14 PCS / 1 PLT ATTN CLAUDINE BOIRE TELL 800 361 2161 P.O. 460958 ME SURE /MEASURED 57 PC/C PALETTES: CHEP - CPC - AUTRE - AUT	### ACTURE - INVOICE 01 60 - 19	### ACTURE - INVOICE 01 60-195771 DATE CONNAISSEMENT BLE COURTED 18881-9198 02 60-195771 DATE CONNAISSEMENT BLE COURTED 18881-9198 03 60-195771 DATE CONNAISSEMENT BLE COURTED 18881-9198 04 18881-9198 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188 05 18881-9188



·		# MAR07_33693	- 1						Date: 10/30/2023				
		SHIP FROM		<u></u>	SHIP TO								
Name: Marqui	is Imprir	neur Inc.			Name: MARQI	JIS GAGNÉ							
Address 350 ru e	-	trepreneurs			Address: 750 Ru	e Deveault							
City: Montm	agny	·	State: QC	Zipcode: G5V 4T1	City: Louise	ville	Δ		State: Zipcode: QC J5V 3C2				
Tel: 418241	11760		Refere	nce/PO:	Tel: 800361	2161	\vee	1)	Reference/PO:				
Contact M Pelle				<u></u>		Name: ne Boire			·				
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Special		-			Special I	nst:							
		BILL THIRD PAR	TY	-		FF	REIGI	HT CHAR	RGES				
Name: Trinet	Transpo	rtation		· · · · · · · · · · · · · · · · · · ·	3rd party	Billing:			Declared Value: \$0				
Address		Bivd, Dollard-Des-Orme	aux, l	19B 2M9				_	Per:				
City: Dollare	d-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9									
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	-			SHIPPING	INFORM	ATION							
Items:													
Qty. Pgk.	Handl. Unit	De	scripti	on		NMFC No.	Cis.	Weight (LB)	Dimensions (IN)				
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<u> </u>	CUS.	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIA	CONTACTS				
Compar	ny Name:				Contact N	ame:			Phone:				
Contact		<u> </u>	Phone		Email Add								
Note: Trin incombe a des frais o hired carri	et Transport au transport de transport ier. The carr	tation Inc. n'est pas responsable de eur engagó. La responsabilité maxi supplémentaires sont payés. / Trir ier's maximum liability is 2.00\$/ib. o	es pertes male du l let Trans; r 4,41\$/k	ou dommages caus transporteur est 2.00 portation Inc. is not I g unless a declare	e(e)s a la car 0\$/1b ou 4.41\$ iable for loss value is show	gaison. La responsa rkg à moins qu'une of or damage to can n on this bill of lading	abilité de valeur de go. The and ad	i la perte ou de éclarée ne figu liability for loss ditional freight	e l'endommagement de la cargaiso re au présent connaissement et qui of or damage to cargo lies with thi paid.				
Shipper Marqu	: iis Impri	metr inc. 10-30	Carrie GUII	er. LBAULT	SICH	D2306CZ	Consig MAR	inee; QUIS GAG	né				
Signatu	re & Date:	Michael Welletin	1 Signa	ature & Date: 🐧	30/10	P 3	Signat	ure & Date:					
property of	dassified, do and are in pr to the appl	the above named materials are escribed, packaged, marked and oper condition for transportation icable regulation of the Department	placar was m	r acknowledges rece ds. Carrier certifies e rade avallable and or nse guidebook or rev	mergency res carrier has d	ponse information a DOT emergency							

	TRANSPORT GUILBAULT INC FACTURE - INVOICE															
4	135, FARADAY, SAINTĘ-F FÉL.: 418-681-0575 - TÉL	OY, QC G1 ÉCOPIEUR:	IN 4G6 418-681-919	8				,,,,					01	60-19		_
DATE	CONNAISSEMEN	NT - B/L C	UEILLETTE	TRANSF	ERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONS	OLIDAT	ION	A PERCEVOIR COLLECT	PORT F PREP	AID
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	AUTRE QUE EXPÉDITEU	,						SIGNER								
TRINE	T TRSPT C/C) MARÇ	QUIS 2	2101	ST	REGI	S				DOLI	.ARD	DES	S ORME	XUA	
JCT. ORIG.	TRANSPORTEUR D'ORIGINE - CONN	ECTING CARRIER	N° PRO			PORTIO	N D'ORI	GINE			VALEUR	DÉCLAR	ŔĚE	C.O.D.		
JCT. DEST.	TRANSPORTEUR DESTINATION - BE	YOND CARRIER	N° PRO			PORTIO	N DESTI	IOITAN	V	.,,	NOTRE PA	ART		I _·		
QTÉ		DESCRIPTIO	·N		POIDS	S-WEIGHT I	-K CO	MME-A	S L-K	CODE	TAUX-R	ATE L	K	TOTAL		F/P
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29	PALETTES: CHEP =	CPC =				CARE M 968	ŒSU L	RE/1		CRB	28.		C/CI	14.9°		
PALET	TES-		AU'	T				TPS/GS TVQ/P:								

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)

737295

137.92

TOTAL



Signature:	C-19	

Information recueillie par / Information received by envoyé / sent : 2023/11/01 14:01



Signé par / Signed by: <u>martine</u> INFORMATION			
		No. Factu	re / Probill: 601957794
Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/10/31
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:37
MONTMAGNY		Début/Start:	16:37
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	16:40
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
FED PROF DES JOURNALISTES DE	U Q	RDV/Appt.:	0000/00/00
1255 BL ROBERT BOURASSA			00:00 00:00
MONTREAL		Date:	2023/11/01
MONTREAL , PQ , H3B3V8		Arrivée/Arrival:	13:05
WONTHEAL, FG, HJDJVO			
Required Service Requis		Début/Start:	13:06
HHL X PCL LII X		Départ/Departure:	13:40
Facture / Probill Terme / Term Remorque / Trailer PPD 11852	MAI	nt / Bill of Lading Bo R0733810	on commande / Purchase Order
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fa			ion / Beyond Carrier No.Fact - Probill No
DETAILS / DETAILS Qté/Qty Description	Poids/Weight	Dimension	s Guilbault
	Poids/Weight 968 L	Dimension 48x 40x	
Qté/Qty Description 29 CS/1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/ 1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/ 1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/1 PLTE NON EMP MARTINE DESJARDINS	_		
Qté/Qty Description 29 CS/1 PLTE NON EMP MARTINE DESJARDINS	_		



435 RUE FARADAY, QUEBEC, QC G1N 4G6

www.groupeguilbault.com

TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

11852

CONSIGNATAIRE CONSIGNEE

CONNAISSEMENT - BLL OF LADING CUEILLETE - PICK-UP BON CE COMMANDE - PO FACTURE - PROBLE DATE TRANSFERT - TRANSFER ORIG DEST CATEG jylmm/eada-dd/mm/yyyy 428460 428460 31102023 MAR0733810 60-1957794 16 6 EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS CONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ADDRESS MAROUIS IMPRIMEUR INC. FED PROF DES JOURNALISTES DU Q A PERCEVOIR - COLLECT PORT PAYÉ - PREPAID 350 DES ENTREPRENEURS 1255 BL ROBERT BOURASSA PORT PAYE MONTMAGNY MONTREAL VALMA DECLAREE DECLARED VALUE PO G5V 4T1 PO H3B 3V8 PAIBMENT SUR LIVRAISON - COD FACTURE A - BILL TO TRINET TRSPT C/O MAR 2101 ST REGIS NO PRO - PRO NO. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER JCT, ORIG. RENDEZ-VOUS - APPOINTMENT HEURE -TIME JCT, DEST. NO PRO - PRO NO TRANSPORTEUR DESTINATION - BEYOND CARRIER QTÉ-QTY. L-K COMME - AS DESCRIPTION POIDS - WEIGHT CS/ 1 PLTE NON EMP 968 MARTINE DESJARDINS TEL 418 271 5345 CARB LTL]HAYON HYDRAULIQUE []PETIT CAMION []LIV.INTERIEURE [] AUTRES RECUEN BON ÉTAT PAR - RECEIVED IN GOOD ORDER BY 20231 031 POICS DES TOTAL MESURE / MEASURE DIT TOTAL TOTAL 39 PC/CF 29 968 LIVRE PAR - DELIVERY BY INB MORCEAUX - NBR PIECE PALETTES-PALLETS anivée-anival DÉBUT - BEGINNING FIN - END DATE LIVRÉE - DELIVERY DATE mtl DIMENSION 48X 40X 35/



FUILBRULT 60-195779-4 BON D'EMBALLACE PACKING SUP

Trine	et Pro	# MAR07_33810								
SHIP FROM				SHIP TO						
Name: Marquis Imprimeur Inc. Address: 350 rue des Entrepreneurs				Name: FÉD. PROF. DES JOURNALISTES DU QC. Address: 1255, Boulevard Robert-Bourassa, SUITE 608						
										City: State: Zipcode: Montmagny QC G5V 4T1
Tel:					Montréal QC H3B 3V8					
Contact M Pello	Name:				Contact N	F	INS			
Ref: 258357	7 .		-		Ref:					
Special Inst:				Special II	nst:					
	·	BILL THIRD PAR	RTY			F	REIGI	T CHAF	RGES	
Name:	Transpo	SC station			3rd party	Billing:	Χ		Declared	d Value: \$0
Address	 }:	Blvd, Dollard-Des-Orm	eaux, H	9B 2M9					Per:	
			State:	Zipcode:	7					
	d-Des-Oı	rmeaux 📝	QC	H9B 2M9						
City: Dollar e	d-Des-Oı	rmeaux 📝			<u></u>	TIONS				
	d-Des-Oi			H9B 2M9 SPECIAL I	NSTRUC	779 4				
Dollard	Handl.	•		H9B 2M9 SPECIAL I GUILBAU SHIPPING	NSTRUC	779 4	Cis.	Weight	Di	imensions
Dollard		•	QC	H9B 2M9 SPECIAL I GUILBAU SHIPPING	NSTRUC	779 4 ATION	Cis.	Weight (LB)		imensions (IN) 0X48.00X35.00
Dollard Rems: Qty. Pgk.	Handl. Unit 1.00 SKID		QC	H9B 2M9 SPECIAL I GUILBAU SHIPPING	NSTRUC	779 4 ATION		(LB) 968	40.00	(IN) 0X48.00X35.00
terns: Qty. Pgk. 29	Handl. Unit 1.00 SKID CUST	LIVRES	escriptio	H9B 2M9 SPECIAL I GUILBAU SHIPPING	NSTRUC JLT 60 1957 INFORM	ATION NMFC No. HAZARDO		(LB) 968	40.00	(IN) 0X48.00X35.00 ACTS
terns: Qty. Pgk. 29 Compar	Handl. Unit 1.00 SKID CUST ny Name:	LIVRES FOMS BROKER INF	escriptio ORMA	H9B 2M9 SPECIAL I GUILBAU SHIPPING	INFORM Contact N Email Add	ATION NMFC No. HAZARDC ame: ress:	DUS M	968 ATERIAI	40.00	(IN) 0X48.00X35.00 ACTS le:
terns: Qty. Pgk. 29 Compar	Handl. Unit 1.00 SKID CUST ny Name:	LIVRES FOMS BROKER INF	escriptio ORMA	H9B 2M9 SPECIAL I GUILBAU SHIPPING	INFORM Contact N Email Add	ATION NMFC No. HAZARDC ame: ress:	DUS M	968 ATERIAI	40.00	(IN) 0X48.00X35.00 ACTS le:
Dollard tems: Qty Pgk. 29 Comparincombe a les frais client frais c	Handl. Unit 1.00 SKID CUST TY Name: Name: Let Transported transported transported transporter. The carrier.	LIVRES TOMS BROKER INFormation Inc. n'est pas responsable aur engagé. La responsabilité ma supplémentaires sont payés, / Trer's maximum liability is 2.00\$/fb. TOMO 10-3 TOMO 10-3	Phone des pertes simale du trinet Transpor 4.41\$/kg	H9B 2M9 SPECIAL I GUILBAU SHIPPING II Ou dommages cau ansporteur est 2.0 ortation Inc. is not unless a declared	INFORM. Contact N. Email Add usé(e)s à la carr usé(b) ou 4.41s* dable for loss of dable for loss of dable sor loss of dable sor loss of dable sor loss of	NMFC No. HAZARDC arne: ress: gaison. La respons kg à moins qu'une of or damage to ca on this bill of tadin	DUS M sabilité de valeur de rgo. The g and adu	968 ATERIAI la perte ou di labelility for loss ditional freight	40.00 L CONT. Phon e l'endomma re au présen s of or dama- paid.	(IN) 0X48.00X35.00 ACTS le:

			TRANSPO	RT GU	JILE	BAUL'	r in	C	TUD	E - INVO	NCE		N°	CIE	N° FACTURE	- PROBI	LL NO.
	135, FAI TEL: 41	RADAY, SAINTE-FOY, QC 8-681-0575 TÉLÉCOPIEI	G1N 4G6 JR: 418-681-919	8				FAL	JION	- II V V	JICL		(01	60-19	5780	0-2
DATE		CONNAISSEMENT - B/L		TRANSF	ERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CC	NSOLIC	AOITAG	1	A PERCEVOIR COLLECT	PORT PREF	PAYE AID
31102	023	MAR0733812	428460	4284	160	AA3	XXX	16	6	LTL	97	6511	L6-	2	PORT	PA	ľΕ
EXPÉDITEU	R ET AI	DRESSE - SHIPPER AND A	ADDRESS		CONSI	SNATAIR	E ET ADF	RESSE -	CONS	GNEE AN	D ADD	RESS			COMP	7668	227
	ES :			4T1	227		BRU			L EXI STE P(E	SS 2S 1	LR2		B/L	2311 2311 7651	101
FACTURER		QUE EXPÉDITEUR/CONS		L TO OTHE	R THA	N SHIPPI	ER/CONS	SIGNER									
TRINE	T T	RSPT C/O MA	RQUIS :	2101	ST	REG:	IS				DO1	LLAF	SD I	DES	ORME	AUX	
JCT. ORIG.	TRANSPO	RTEUR D'ORIGINE - CONNECTING CAR	RIER N° PRO			PORTIO	ON D'ORI	GINE			VALE	JR DÉCL	LARÉE		C.O.D.		
JCT. DEST.	TRANSPO	RTEUR DESTINATION - BEYOND CARR	IER N° PRO			PORTK	ON DESTI	NATIO	V		NOTRE	PART					
QTÉ		DESCRIP					L-K COI	MME-A	S L-K			X-RATE			TOTAL		F/P
50	TH	S/ 2 PLTS N IERRY ST ON L 514 697 O VRER EN ARR	GE 891			3310 CARI		L		CRB		3.45			100 28.5	.90	
						1	MESU	RE/I	MF.A:	SUREI	b :	100	PC.	CF			
50		TTES: CHEP = CPI	C = AUT	RE =	3	3310	L									.45	
PALET	TES	_	AU	Т	L			TPS/GS TVQ/P									•
EDAIC ADMAIN	CTDATIC	NOT 20 DAD MOIS SUD TOUTS	COLEC EACTURES D	Accérc ao	IOLIDE /	DE QOEL AND	NIIIELI EKAR	ENIT)	73	7295					129	.45	

TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



Carre

Signature:		recueillie par / ent: 2023/11/0	Information received by 1 10:01	وك
Signé par / Signed by: <u>martin</u>	-	No. Factu	re / Probill: 6019578	02
INFORMATION				
Expéditeur / Shipper	Cueillett	e / Pickup		***************************************
MARQUIS IMPRIMEUR INC.	Date:		2023/10/31	
350 DES ENTREPRENEURS		e/Arrival:	16:37	
MONTMAGNY		:/Start:	16:37	
MONTMAGNY , PQ , G5V4T1	Depar	t/Departure:	16:40	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		n / Delivery	0000/00/00	
TRAITEMENT POSTAL EXPRESS	RDV/	Appt.:	0000/00/00	
227 BL BRUNSWICK STE E	Data		00:00 00:00	
MONTREAL DO H281B2	Date:	e/Arrival:	2023/11/01 09:30	
MONTREAL , PQ , H2S1R2		:/Start:	09:45	
Required Service Requis		rt/Departure:	09:45	
HHL PCL LII Facture / Probili	Бера	t/Departure.		
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	Probill No. Jct. Dest.	Transporteur Destina	tion / Beyond Carrier No.Fact - P	Probill No.
DÉTAILS / DETAILS				
Qté/Qty Description P	oids/Weight	Dimension	s Guilbault	
50 PCS/2 PLTS NON EMP THIERRY ST ONGE TEL 514 697 0891 LIVRER EN ARRIERE	3310 L	48x 40x 48x 40x		

TRANSPORT GUILBAULT INC



435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

125187

PREUVE DE LIVRAISON PROOF OF DELIVERY

	mw.groupeguilbauit.com							C.487.05 000011
DATE y/mm/sees-dd/mm	CONNAISSEMENT - BILL OF LADING	CLEILLETE - PICK-UP	TRANSFERT - TRANSFER	ORIG	DEST	CATEG	BON DE COMMANDE - P O	FACTURE - PROBLE
_	23 MAR0733812	428460	428460	16	6	L		60-1957802
EXPÉDITEUR E	ET ADRESSE - SHIPPER AND ADDRESS		CONSIGNATAIRE ET ADRESS	SE-CONS	GNEE A	O ADDRESS		
	S IMPRIMEUR INC. S ENTREPRENEURS		TRAITEMENT 227 BL BRUN				SS	A PERCEVOIR - COLLECT PORT PAYÉ - PREPAID
					•			PORT PAYE
MONTMA	GNY		MONTREAL					VALING DÉCLARÉE DECLARED VALUE
	PQ G	5V 4T1				PQ	H2S 1R2	OSOCIALE IN SUB
FACTURE A - BIL RINET	TRSPT C/O MAR	2101 ST REGIS	3			<u></u>		PAIEMENT SUR LIVRAISON - CO D
JCT ORIG.	TRANSPORTEUR D'ORIGINE - COI	NNECTING CARRIER	NO PRO - PRO NO.		RI	ENDEZ-V	OUS - APPOINTMEN	T HEURE -TIME
JCT. DEST.	TRANSPORTEUR DESTINATION -	BEYOND CARRIER	NO PRO - PRO NO		-		:	0
QTÉ-QTY.	DESCRIPTION		POIDS - WEIGHT	L.	K C	OMME-AS		
50	PCS/ 2 PLTS NON THIERRY ST ONGE TEL 514 697 0891 LIVRER EN ARRIER		3310	L	,		[]PET:	ON HYDRAULIQUE CAMION INTERIEURE

SHIP TO EXPRESS CK SÚÎTE E EIGHT CHA	State: Zipcode: H2S1R2 Reference/PO: RGES Declared Value: \$0 Per:
CK SÚÍTE E	RGES Declared Value: \$0
<u> </u>	RGES Declared Value: \$0
<u> </u>	RGES Declared Value: \$0
EIGHT CHA	RGES Declared Value: \$0
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EIGHT CHA	Declared Value: \$0
EIGHT CHA	Declared Value: \$0
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ison en	arrière
Cls. Weight (LB)	Dimensions (IN)
3310	40.00X48.00X45.00
S MATERIA	L CONTACTS
	Phone:
lité de la perte ou d leur déclarée ne fig . The liability for los nd additional freigh	de l'endommagement de la cargal jure au présent connaissement et d ss of or damage to cargo lies with it pald.
onsignee; RAITEMENT	POSTAL EXPRESS
ignature & Date:	:
	Cis. Weight (LB) 3310 S MATERIA iiité de la perte ou leur déctarée ne fig., The liability for locate and additional freight consignee; RAITEMENT

TRANSPOR	RT GUIL	BAUL'	r in		TURI	: - INVO	NCE	N° CIE	N° FACTURE	PROBI	LL NO.
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL.: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198	3			170	10111	11440	JIOL	01	60-19	5781	1-0
DATE CONNAISSEMENT - B/L CUEILLETTE	TRANSFERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT PREF	PAYE PAID
01112023 MAR0733882 17445C	17445	AT3	XXX	16	6	LTL	9765116	- 2	PORT	PAY	ľΕ
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONS	IGNATAIRI	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7718	388
MARQUIS IMPRIMEUR INC.	ME	ŞŞAGI	ERIE	S AI		7077T)	JCE		B/L :	2311	102
350 DES ENTREPRENEURS MONTMAGNY	LO	15 RU NGUEU		C 114	Y PI	ROVII	NCE		P/L EXPE9		116
PQ G5V 4	1T1					PÇ	Q J4G 1G	4	DEST TRAN	8	393
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL	TO OTHER TH	AN SHIPPE	ER/CONS	SIGNER							
TRINET TRSPT C/O MARQUIS 2	2101 ST	REG:	IS				DOLLARD		S ORME	XUA	
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO		PORTIC	ON D'ORI	GINE			VALEUR DÉCLAR	ÉΕ	C.O.D.		
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO		PORTK	ON DEST	INATION			NOTRE PART				
										T	
OTÉ DESCRIPTION		S-WEIGHT				CODE	TAUX-RATE L	-К	TOTAL	4.4	F/P
204 PCS / 6 PLTS TEL 450 640 1234		5911	$L \mid 1$	2000) L	UNT	40.24		241	.44	
FERME A 13H LE VENDRE	EDI										
		CADI				CD.III	66.60		160 0	_	
		CARI	3 TL			CRT	66.60		160.8	U	
P.O.	464188	N	ME SII	RE/N	/F: Δ 9	SUREI	320 P	~ \c	F		
204		5911	L		1117.11		<u> </u>	<u> </u>	402	.24	
PALETTES: CHEP = CPC = AUTE PALETTES - AUTE	L		N°	TPS/GS	т						j
	_			TVQ/PS							
TO NO ADMINISTRATION OF SALES MORE SUBTOUTED TO SALES SALES	coffe an increa	00000 ***	VII IC I I C 8 40	C & IT's	73	7295			402	.24	
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PA ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 D	0AYS (26.82% ANN	(∠0.82% ANI IUALLY)	NOELLEIVII	EIN+)			TOT	AL_	-		

TRANSPORT GUILBAULT INC



435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

CONSIGNATAIRE CONSIGNEE

WW	ww.groupeguilbault.com				بسرار	700		TONLL	
DATE	CONNAISSEMENT - BILL OF LADING	QUEILLETE - PIOK-UP	TRANSFERT - TRANSFER	ORIG	DEST C	ATEG	BON DE COMMANDE	-P0	FACTURE - PROBLE
ymm/seese-dd/mm 0111202		17445C	17445	16	6 L	4	64188	(50-1957810
EXPÉDITEUR E	T ADRESSE - SHIPPER AND ADDRESS		CONSIGNATAIRE ET ADRESS	E · CONSIG	NEE ANO AC	ORESS			
.	S IMPRIMEUR INC.		MESSAGERIES						PERCEVOIR - COLLECT DRT PAYÉ - PREPAID
350 DE	S ENTREPRENEURS		2315 RUE DE	ELA	PROV.	NCE		b	רסד מער
MONTMA	GNY		LONGUEUIL						ORT PAYE
	PQ G	5V 4T1				PQ J	4G 1G4		CLARED VALUE
FACTUREA-BILI RINET	TRSPT C/O MAR	2101 ST REGIS			•			PA	NEMENT SUR LIVRAISON - COC
JCT. ORIG.	TRANSPORTEUR D'ORIGINE - COM	INECTING CARRIER	NO PRO - PRO NO.		REN	EZ-VOI	JS - APPOINT	MENT	HEURE -TIME
JCT. DEST.	TRANSPORTEUR DESTINATION -	BEYOND CARRIER	NO PRO - PRO NO						
					DE/E	ROM	07:45	A/TO	15:00
QTÉ-QTY.	DESCRIPTION		POIDS - WEIGHT	L-K	COMM	E-AS	1		
204	PCS / 6 PLTS		5911	L	<u> </u>		1		
	TEL 450 640 1234 FERME A 13H LE V		CARB TL	Q V	JW T	 (N)	[] I	PETIT	HYDRAULIQ CAMION NTERIEURE S
TOTAL	REÇU EN BON ÉTAT PAR - RECEIVED	IN GOOD ORDER BY 20231	L TOTAL POIDS OFFE TOTAL SE	KE/M	SAST	ED	TOTAL	320	PC/CF
204			5911 L		inne nan	AD INCOME OF	IN MODERNIA NEW WAY		AT PALETTES- PALLETS
anivée-anival	DÉBUT - BEGINNING FI	N - END	DATE LIVRÉE - DELIVER	Y DATE	LIVRE PAR - (METINESS BY	NB MORCEAUX-NBR PIE	l.t	IDM FILES, DALIETS



Signature:	Doming &

Information recueillie par / Information received by envoyé / sent : 2023/11/02 09:31



Signé par / Signed by: <u>dominique</u>	No. Facture / Probill: 601957810
INFORMATION	
Expéditeur / Shipper	Cueillette / Pickup
MARQUIS IMPRIMEUR INC.	Date: 2023/11/01
350 DES ENTREPRENEURS	Arrivée/Arrival: 16:09
MONTMAGNY	Début/Start: 16:09
MONTMAGNY, PQ, G5V4T1	Départ/Departure: 16:19
Required Service Requis HHC PCC CII	
Destinataire / Consignee	Livraison / Delivery
MESSAGERIES ADP	RDV/Appt.: 0000/00/00
2315 RUE DE LA PROVINCE	07:45 15:00
LONGUEUIL	Date: 2023/11/02
CHAMBLY, PQ, J4G1G4	Arrivée/Arrival: 08:59
OTHER TOTAL	Début/Start: 09:10
Required Service Requis	
HHL PCL LII	Départ/Departure: 09:11
	ent / Bill of Lading Bon commande / Purchase Order
	AR0733882 464188
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact Probill No.	Jct. Dest. Transporteur Destination / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS	
Qté/Qty Description Poids/Weigh	t Dimensions Guilbault
204 PCS / 6 PLTS 5911 L	48x 40x 48-
TEL 450 640 1234	48x 40x 48-
FERME A 13H LE VENDREDI	48x 40x 48-
I ENVIL A ISH LE VENDILEDI	48x 40x 48-
	48x 40x 48- 48x 40x 48-
	40X 4UX 40-
Footon's April 4	
Facturé à / Bill to	
TRINET TRSPT C/O MARQUIS IMP 2101 ST R	EGIS



Trin	et Pro	# MAR07_33882							Date: 11/1/2023
		SHIP FROM			T		5	SHIP TO	
		meur Inc.			Name: ADP				
Address 350 ru		ntrepreneurs			Address: 2315 R	ue de la Prov	/ince		
City: Montn	nagny		State: QC	Zipcode: G5V 4T1	City: Longue	euil	\fr	$\sqrt{\ \ }$	State: Zipcode: QC J4G 1G4
Tel: 41824	11760		Referer	nce/PO:	Tel: 450640	1234	16	(0)	Reference/PO:
Contact M Pell	t Name: letier				Contact Messag	Name: geries Adp	T	\mathcal{I}	
Ref: 26114	4-145-14	6-147-148-149-150-26049	95-260	820-260819	Ref:			•	
Special	Inst;				Special I	nst:			
		BILL THIRD PART	TY		1	F	REIG	HT CHAR	RGES
Name:		4_41			3rd party	Billing:	X	· · · · · · · · · · · · · · · · · · ·	Declared Value: \$0
Addres	t Transpo s:	rtation			-{				Per:
	-	Bivd, Dollard-Des-Orme	aux, F	19B 2M9	<u> </u>				
City: Dollar	rd-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9					
				SPECIAL IN	STRUC	TIONS			
(SUILBA Ų	JLT 60 195781 0 OUVER	T DU L	.UND! AU JEU!	DI ENTR	E 7H45 A 15H	HET L	E VENDRE	DI DE 7H45 A 13H.
				SHIPPING II	NFORM	ATION			
Items:									
Qty. Pgk.	Hand). Unit	De	scriptio	on		NMFC No.	CIs.	Weight (LB)	Dimensions (IN)
204	6.00 \$KID	LIVRES						5911.00	40.00X48.00X48.00
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	OUS N	ATERIA	LCONTACTS
	any Name:				Contact N				Phone:
$\overline{}$	t Name:		Phone		Email Add				
Note: Trisincombe des frais hired car	net Transport au transport de transport der, The can	rtation Inc. n'est pas responsable de teur engagé, La responsabilité maxir t supplémentaires sont payés. / Trin rier's maximum liability is 2.00\$/lb, o	es pertes imale du t net Transp or 4.41\$/kg	ou dommages causé ransporteur est 2.003 portation Inc. Is not lis g unless a declared y	i(e)s à la car s/lb ou 4.41\$ able for loss aue is show	gaison. La respons /kg à moins qu'une of or damage to ca n on this bill of ladir	sabilité de valeur d argo. The ng and ad	e la perte ou de léclarée ne figu liability for loss iditional freight	 l'endommagement de la cargaisor re au présent connaissement et que sof or damage to cargo lies with the paid.
Signatu	uis Imprii ure & Date:	Michael Politi	∑ Signa	LBAULT ature & Date:	SLC	174456 23	Consig ADP Signal	gnee; ture & Date:	
property labeled, according	classified, de and are in pr	the above named materials are lescribed, packaged, marked and imper condition for transportation licable regulation of the Department	placard was ma	r acknowledges receip ds. Carrier certifies en nade avallable and or o nse guidebook or reve	mergency res carrier has de	ponse information a DOT emergency			

				TRANSPO	ORT G	UILI	BAUL'	T IN	C	~T-110	E - INVO	NCE		N° CI	E N° FACTURE	- PROBI	LL NO.
	135, FAI TÉL: 41	RADAY, SAII 8-681-0575	NTĘ-FOY, QC TÉLÉCOPIEL	G1N 4G6 JR: 418-681-91	198				FAC	JIUK	E - INV	JICE		01	60-19	5782	2-8
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MARQU 350 D MONTM	ES	ENTRE	MEUR I PRENEU	NC. RS PQ G5V	4 T1	160	ASTII 00 CI VAL	RALE UNAR	SEI D	RVI	CE II		'S 2I	32	B/L P/L EXPE9 DEST TRAN	231 231 765	102
FACTURER				IGNATAIRE - BI	LL TO OTH	IER THA	AN SHIPP	ER/CONS	SIGNER								
TRINE	ТТ	RSPT (C/O MA	RQUIS	2101	st	REG:	IS				DOI	LARI	D DE	S ORME	AUX	
JCT. ORIG.	TRANSPO	RTEUR D'ORIGINE	· CONNECTING CARE	RIER N° PRO			PORTIG	ON D'ORI	GINE			VALEU	R DÉCLA	RÉE	C.O.D.		
107 8507	TDANGE	DTELID DE DTIBLAT	ION DEVOND CARD	150 A10 BBO			DODT	ON DECT	NATIO			NOTRE	DART				
JCT. DEST.	IKANSPU	IKTEUK DESTINATI	ION - BEYOND CARRI	IER N° PRO			PORTR	ON DEST	INATIO	N		NOTRE	PARI				
QTÉ			DESCRIP	TION		POID	S-WEIGHT	L-K CO	MME-A	S L-K	CODE	TAUX	-RATE	L-K	TOTAL		F/P
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4	PALE	TTES: CHEP	= CP0	-	TRE =		3436	L							238	95	
PALET	TES	_		JA	JT				TPS/GS TVQ/P								
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TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



			Gaz.
Signature: / 5		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 2 10:31
Signé par / Signed by: <u>kevin</u>	_	No. Factu	re / Probill: 601957828
INFORMATION Expéditeur / Shipper		Cusillatta / Bislam	
MARQUIS IMPRIMEUR INC.		Cueillette / Pickup Date:	2023/11/01
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09
MONTMAGNY		Début/Start:	16:09
MONTMAGNY , PQ , G5V4T1		Départ/Departure:	16:19
Required Service Requis HHC PCC CI CII			
Destinataire / Consignee		Livraison / Delivery	
PLASTIRALE SERVICE INC.		RDV/Appt.:	0000/00/00
1600 CUNARD		Deter	00:00 00:00
LAVAL LAVAL , PQ , H7S2B2 6		Date: Arrivée/Arrival:	2023/11/02 09:49
LAVAL, FQ, 11/32D2 0		Début/Start:	09:56
Required Service Requis HHL PCL LII LII		Départ/Departure:	09:57
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12509V		nt / Bill of Lading Bo R0733849	on commande / Purchase Order
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	Probill No.	Jct. Dest. Transporteur Destinat	ion / Beyond Carrier No.Fact - Probill No.
DETAILS / DETAILS			
-	Poids/Weight		s Guilbault
4 PLTS	3436 L	48x 40x 48x 40x	
ATTN ANNIE GONTHIER TEL 450 682 6212		48x 40x	28-
1EE 430 002 02 12		48x 40x	28-
Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	



Montmagny QC G5V 4T1 LAVAL QC Tel: 4182411760 Contact Name: M Pelletier Ref: 260736 Special Inst: BILL THIRD PARTY Special Inst: BILL THIRD PARTY FREIGHT CHARGE Name: Trinet Transportation Address: 2101 St-RegIs Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	ate: Zipcode: C H7S2B2 aference/PO:
Marquis Imprimeur Inc. Address: 350 rue des Entrepreneurs City: Montmagny QC G5V 4T1 Tel: 4182411760 Contact Name: M Pelletier Ref: 260736 Special Inst: BILL THIRD PARTY Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: State: Zipcode: City: LAVAL QC G5V 4T1 Tel: 4506826212 Contact Name: Anie Gonthier Ref: Special Inst: FREIGHT CHARGE Pel Address: Pel Address: Special Inst: Special In	C H7S2B2
350 rue des Entrepreneurs City: Montmagny QC G5V 4T1 LAVAL QC A182411760 Contact Name: M Pelletier M Pelletier Ref: 260736 Special Inst: BILL THIRD PARTY Special Inst: BILL THIRD PARTY FREIGHT CHARGE Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	C H7S2B2
Montmagny QC G5V 4T1 LAVAL QC Tel: 4182411760	C H7S2B2
4182411760 Contact Name: M Pelletier Ref: 260736 Special Inst: BILL THIRD PARTY Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux SPECIAL INSTRUCTIONS	aference/PO:
M Pelletier Ref: 260736 Special Inst: BILL THIRD PARTY Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux SPECIAL INSTRUCTIONS	
Special Inst: BILL THIRD PARTY Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux Special Inst: FREIGHT CHARGE FREIGHT CHARGE FREIGHT CHARGE FREIGHT CHARGE FREIGHT CHARGE Per Strip Dec Per State: Zipcode: QC H9B 2M9 SPECIAL INSTRUCTIONS	
BILL THIRD PARTY Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	
Name: Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	
Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	S
Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9 City: State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	eclared Value: \$0
City: State: Zipcode: Dollard-Des-Ormeaux QC H9B 2M9 SPECIAL INSTRUCTIONS	er:
SPECIAL INSTRUCTIONS	
GUILBAULT 60 195782 8	
SHIPPING INFORMATION	
Items:	
Qty. Handl. Description NMFC No. Cls. Weight (LB)	Dimensions (IN)
0 4.00 FORMES + COUVERTS + MODELE 3436.00	40.00X48.00X28.00
CUSTOMS BROKER INFORMATION HAZARDOUS MATERIAL CO	ONTACTS
	Phone:
Contact Name: Phone: Email Address: Note: Trinet Transportation Inc. n'est pas responsable des pertes ou dommages causé(e)s à la cargaison. La responsabilité de la perte ou de l'end incombe au transporteur engagé. La responsabilité maximale du transporteur est 2.00\$/lb ou 4.41\$/kg à moins qu'une valeur déclarée ne figure au redes frais de transport supplémentaires sont payés. / Trinet Transportation Inc. is not liable for loss of or damage to cargo. The liability for loss of or hired carrier. The carrier's maximum liability is 2.00\$/lb. or 4.41\$/kg unless a declarer lalue is shown on this bill of lading and additional freight paid.	dommagement de la cargalso présent connaissement et qu r damage to cargo lies with th
Shipper: Marquis Imprimeur Inc. Signature & Date: Signature & Date: Carrier: GUILBAULT Signature & Date: Consignee; PLASTIRALE Signature & Date:	
This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation.	

	TRANSPORT GUILBAULT INC FACTURE - INVOICE											ILL NO.							
4	135, FAR	ADAY, SAI	INTE-FOY, QC 5 TÉLÉCOPIEI	G1N 4G6	81-919	98				FAC	JION	11440	JICL			01	60-19	9578	3-6
DATE			SEMENT - B/L			TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CC	ONSOLI	DATIO	N	A PERCEVOIR COLLECT	PORT PRE	PAYE PAID
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JCT. ORIG.	TRANSPOR	TEUR D'ORIGINE	E - CONNECTING CAR	RIER N° P	RO			PORTIO	ON D'ORI	GINE			VALE	UR DÉC	LARÉI		C.O.D.		
JCT. DEST.	TRANSPOR	TEUR DESTINAT	TION - BEYOND CARR	IER N° P	RO				ON DESTI					E PART					
QTÉ			DESCRIP	TION				S-WEIGHT		MME-A	S L-K			IX-RATE		(TOTAL		F/P
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TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



Signature:	Robin

Information recueillie par / Information received by envoyé / sent : 2023/11/02 13:01



Signé par / Signed by: Robin		No. Fact	ure / Probill: 601957836
INFORMATION			
Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09
MONTMAGNY		Début/Start:	16:09
MONTMAGNY , PQ , G5V4T1		Départ/Departure:	16:19
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
R & L LAMINATION GRAPHIQUE INC	•	RDV/Appt.:	0000/00/00
8555 PASCAL GAGNON			00:00 00:00
ST LEONARD (MONTREAL)		Date:	2023/11/02
MONTREAL , PQ , H1P1Y5		Arrivée/Arrival:	12:20
Required Service Requis		Début/Start:	12:22
HHL PCL LII		Départ/Departure:	12:35
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12268V		nt / Bill of Lading R0733864	Bon commande / Purchase Order 463697
	. B I. III N		ation / Beyond Carrier No.Fact - Probill No.
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fac	t Probili No.	Jct. Dest. Transporteur Destin	ation / Boyona Gamer No.1 act / robin No.
	t Prodili No.	Jct. Dest. Transporteur Destin	and the second control was all the second control and the second con
DÉTAILS / DETAILS			ns Guilbault
DÉTAILS / DETAILS Qté/Qty Description	Poids/Weight	Dimensio	ns Guilbault
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DÉTAILS / DETAILS Qté/Qty Description 2 PLTS ATTN JONATHAN HEBERT	Poids/Weight	Dimensio 31x 28x	ns Guilbault ఁ 39-
DÉTAILS / DETAILS Qté/Qty Description 2 PLTS ATTN JONATHAN HEBERT	Poids/Weight	Dimensio 31x 28x	ns Guilbault ఁ 39-
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/ Inside - Pickup

CII - Cueil. - Intérieure



Trino	et Pro	# MAR07_33864	1		Date: 11/1/2023							
		SHIP FROM			<u> </u>		5	SHIP TO				
Name:	-In Impel			731.7.	Name: R & L LAMINATION GRAPHIQUE INC.							
Marqu Address	<u>`</u>	meur Inc.			Address		GRAP	HIQUE INC	<u>. </u>			
		ntrepreneurs				ASCAL-GAGI	NON					
City:			State:	Zipcode:	City:	•	6		State: Zipcode:			
Montn	nagny		QC	G5V 4T1		LÉONARD	[/_	} 	QC H1P 1Y5			
Tet: 41824	11760		Referen	nce/PO:	Tel: Reference/PO: Reference/PO:							
	t Name:	·			Contact		7	' \/	<u> </u>			
M Pell	letier				$\overline{}$	an Hébert		$\underline{\hspace{1cm}}$				
Ref: 25454	2				Ref:							
Special	Inst:				Special	Inst:						
		BILL THIRD PAR	₹ΤΥ		+	F	REIG	HT CHAR	RGES			
Name:		<u> </u>	m.		3rd party		X		Declared Value: \$0			
	Transpo	ortation			_		_		Per:			
Addres 2101 \$		Blvd, Dollard-Des-Orm	ieaux, F	19B 2M9								
City: Dollar	d-Des-C)rmeaux	State: QC	Zipcode: H9B 2M9	T							
				SPECIAL IN	STRUC	TIONS						
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ltems:												
Qty. Pgk.	Handl. Unit	D	escriptio	n		NMFC No.	Cls.	Weight (LB)	Dimensions (IN)			
0	2.00 SKID	COUVERTS			l			1083.00	31.00X28.00X39.00			
	CUS	TOMS BROKER INF	ORMA	TION		HAZARDO	US N	IATERIAL	CONTACTS			
<u> </u>	ny Name:				Contact N	lame:			Phone:			
	t Name:		Phone		Email Add							
Note: Tri: incombe des frais hired car	net Transpor au transport de transpor rier. The can	rtation Inc. n'est pas responsable leur engagé. La responsabilité ma t supplémentaires sont payés. / Tr rier's maximum liability is 2.00\$/lb.	des pertes ximale du ti rinet Transp or 4.41\$/kj	ou dommages causé ransporteur est 2.001 rortation Inc. is not liz g unless a declared y	i(e)s à la cai Mb ou 4.41\$ able for loss alue is show	rgaison. La respons Akg à moins qu'une of or damage to ca n on this bill of ladin	sabilité de valeur de rgo. The og and ad	e la perte ou de éctarée ne figur liability for loss ditional freight p	e l'endommagement de la cargaisor re au présent connaissement et que of or damage to cargo lies with the paid.			
Shippe	r:	1013-11-01 imeur Inc.	Carrie		SLL	17445C	Consig	nee;	ION GRAPHIQUE INC.			
_	ure & Date	- 1 "	<i>-</i> /11 ~	ature & Date	/11/	/23	Signat	ure & Date:				
properly labeled.	classified, d and are in p	the above named materials are described, packaged, marked and proper condition for transportation of the Department of the Department	was ma	r acknowledges receif ds. Carrier certifies en ade avallable and or d ase quidebook or reve	camer has d	e DO Femergency						

		TRANSPO	RT G	UILB	AULI	' IN	C	THR	E - INVO	NICE	N° CIE	N° FACTURE	PROBIL	L NO.
435, FA TEL.: 4	ARADAY, SAINTE-FOY, (18-681-0575 TÉLÉCOF	QC G1N 4G6 PIEUR: 418-681-919	8				170			J.O.	01	60-19	5784	1-4
DATE	CONNAISSEMENT - E		TRANS	FERT F	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT PREP	PAYE 'AID
01112023	MAR073386	57 17445C	17	445	AT3	XXX	16	4	LTL	9765116	- 2	PORT	PAY	E_
EXPÉDITEUR ET A	DRESSE - SHIPPER AN	D ADDRESS		CONSIGN	NATAIRE	ET ADF	ESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7718	391
MARQUIS	IMPRIMEUR ENTREPRENE	INC.		MUL	TIR	ELI	URE :	SF	DANCI	MISSI			2311 2311	
MONTMAGN				SHA	พิเกิร	GAN	. 114	. II			_	EXPE 9	7651	L16
		PQ G5V	4T1						Pζ	Q G9N 8N	8	DEST TRAN	8	393
FACTURER AUTRI	E QUE EXPÉDITEUR/CO	NSIGNATAIRE - BIL	L TO OTH	ER THAN	SHIPPE	R/CONS	IGNER							
TRINET T	TRSPT C/O M	1ARQUIS	2101	ST 1	REGI	S				DOLLARD	DES	S ORME	XUA	
JCT. ORIG. TRANSI	PORTEUR D'ORIGINE - CONNECTING	CARRIER N° PRO			PORTIO	N D'ORI	GINE			VALEUR DÉCLAR	ÉΕ	C.O.D.	****	
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QTÉ		RIPTION			WEIGHT L		MME-A	S L-K			-K	TOTAL		F/P
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ADMINISTRATI	FS DE 2% PAR MOIS SUR TO ES OF 2% PER MONTH ON AI	UTES LES FACTURES P LL INVOICES AFTER 30	ASSEES 30 DAYS (26.8	JUURS (26 2% ANNUA	3.82% ANN ALLY)	IUELLEME	:NF)			TOT	AL_			



300			
Signature: ()		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 29 11:31
Signé par / Signed by: <u>michel</u>	-	No. Factu	re / Probill: 601957844
INFORMATION			
INFORMATION Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09
MONTMAGNY		Début/Start:	16:09
MONTMAGNY , PQ , G5V4T1		Départ/Departure:	16:19
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	0000/00/00
MULTI RELIURE SF 2112 AVE DE LA TRANSMISSI		RDV/Appt.:	0000/00/00 00:00 00:00
SHAWINIGAN		Date:	2023/11/02
ST , PQ , G9N8N8		Arrivée/Arrival:	10:56
		Début/Start:	10:56
Required Service Requis HHL PCL LII LII		Départ/Departure:	11:03
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12266V		t / Bill of Lading B R0733867	on commande / Purchase Order 463783
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	Probill No.	Jct. Dest. Transporteur Destina	tion / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS			
)oido/Moiabt	Dimension	s Guilbault
Qté/Qty Description P 4 PLTS	oids/Weight 1109 L	48x 40x	
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Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	



Trine	et Pro	# MAR07_33867							Date: 11/1/2023			
	<u>-</u> -	SHIP FROM			SHIP TO							
Name: Marqu	is Imprii	neur Inc.			Name: MULTI-RELIURE							
Addres 350 ru		ntrepreneurs			Address: 2112 DE LA TRANSMISSION							
	nagny		State: QC	Zipcode: G5V 4T1	-1	NIGAN /	Δ.	$\langle \lambda \rangle$	State: Zipcode: QC G9N 8N8			
Tel: 41824	11760		Referer	nce/PO:	Tel: Reference/PO:							
M Pel	t Name: letier				Contact Name: Monic Larochelle							
Ref: 26101	6				Ref:	·						
Specia	l Inst:				Special	nst:						
<u> </u>		BILL THIRD PAR	TY		 	F	REIG	HT CHAR	RGES			
Name:	Transpo	ortation			3rd party	/ Billing:	X		Declared Value: \$0			
Trinet Transportation Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9				┥				Per:				
City: Dolla:	rd-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9								
<u> </u>				SPECIAL II	NSTRUC	TIONS		••••				
				GUILBAUI	LT 60 195	784 4 						
Ĺ				SHIPPING	INFORM	IATION						
Items:												
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	CIs.	Weight (LB)	Dimensions (IN)			
0	4.00 \$KID	FORMES + COUVERTS						1109.00	40.00X .00X17.00			
	CUS	TOMS BROKER INFO)RMA	TION		HAZARDO	US N	IATERIAI	CONTACTS			
Compa	any Name:				Contact N	lame:			Phone:			
	t Name:		Phone		Email Address:							
Note: Tri incombe des frais hired car	inet Transpor au transport de transport rrier. The carr	tation Inc. n'est pas responsable d eur engagé. La responsabilité max supplémentaires sont payés, / Tris ier's maximum liability is 2.00\$/lb. c	es pertes imale du t net Transp or 4.41\$/kg	ou dommages caus rensporteur est 2.00 portation Inc. is not I g unless a declared	é(e)s à la ca \$1h ou 4.41\$ iable for loss plue is show	rgaison. La respons Akg à moins qu'une of or damage lo ca n on this bill of ladir	sabilité de valeur d rgo. The ng and ad	e la perte ou de éclarée ne figu liability for loss Iditional freight	e l'endommagement de la cargaiso re au présent connaissement et qu of or damage to cargo lies with th paid.			
Shippe	er:		Carrie	er:	54	114456	Consi	gnee;				
Marquis Imprimeur Inc. GUILBAULT					MULII-RELIURE							
This is to properly labeled, according	, and are in p	; the above named materials are escribed, packaged, marked and roper condition for transportation licable regulation of the Department	Carrier placare was m	Iture & Date: r acknowledges receits. Carrier certifies eade available and or use guidebook or rev	lipt of packagemergency re- r camer has determed to the commer that document the commerce of t	es and required sponse information of DOT emergency ent in the vehicle.		ture & Date:				

DATE CONNAISSEMENT - B/L CUEILLETTE TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR COLLECT ON TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR COLLECT ON TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR COLLECT ON TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR COLLECT ON TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR COLLECT ON TARIF. ORIG. DEST. CATEG. CONSOLIDATION A PERCEVOIR CONSOLIDATION A	5785-1 POST PAYE PREPAID PAYE 771892 231102 231102 765116 893
DATE CONNAISSEMENT B/L CUEILLETTE TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECEDIAL CONSOLIDATION APPRECED COLLECT TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECED AND ADDRESS COLLECT TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECED COLLECT COLLECT TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECED COLLECT COLLECT TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECED COLLECT COLLECT COLLECT TRANSFERT FACT. TARIF. ORIG. DEST. CATEG. CONSOLIDATION APPRECED COLLECT	PAYE 771892 231102 231102 765116
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS COMP B/L 9 JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO COMP B/L	771892 231102 231102 765116
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS POLLARD DES ORME. PORTION D'ORIGINE VALEUR DÉCLARÉE CO.D.	231102 231102 765116
350 DES ENTREPRÈNEURS 4575 RUE HICKMORE 5T LAURENT (MONTREAL) EXPE9 DEST TRAN PQ G5V 4T1 PQ H4T 1S5 DEST TRAN FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORME. P JCT. ORIG. TRANSPORTEUR D'ORIGINE CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.	231102 765116
MONTMAGNY PQ G5V 4T1 ST LAURENT (MONTREAL) PQ H4T 1S5 DEST TRAN FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORME. P JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.	765116
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORME. P JCT. ORIG. TRANSPORTEUR D'ORIGINE CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.	×u×
TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORME. P JCT ORIG. TRANSPORTEUR D'ORIGINE CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.	093
JCT. ORIG. TRANSPORTEUR D'ORIGINE CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.	
	4UX
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO PORTION DESTINATION NOTRE PART	
Q	
OTÉ DESCRIPTION POIDS-WEIGHT L-K COMME-AS L-K CODE TAUX-RATE L-K TOTAL	F/P
9 PCS / 1 PLT 293 L UNT 52.94 52 TEL 514 934 4545	.94
1EH 314 934 4343	
CARB LTL CRB 28.30 14.9	3
P.O. 464314 MESURE/MEASURED 14 PC/CF	
9 PALETTES: CHEP = CPC = AUTRE = 293 L	. 92
PALETTES- AUT N° TPS/GST	
N° TVQ/PST	
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY) TOTAL	



Jonodoic 🎆			Const.
Signature: Robert		rmation recueillie par oyé / sent: 2023/11/	/ Information received by 25 02 10:30
Signé par / Signed by: <u>robert</u>	_	No. Fact	ure / Probill: 601957851
INFORMATION			
Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09
MONTMAGNY MONTMAGNY, PQ, G5V4T1		Début/Start: Départ/Departure:	16:09 16:19
Required Service Requis		Bepart/Bepartare.	10.10
HHC PCC CII Destinataire / Consignee		Livraison / Delivery	
DXP POSTEXPERTS		RDV/Appt.:	0000/00/00
4575 RUE HICKMORE			00:00 00:00
ST LAURENT (MONTREAL)		Date:	2023/11/02
MONTREAL , PQ , H4T1S5		Arrivée/Arrival: Début/Start:	09:44 09:49
Required Service Requis HHL PCL LII		Départ/Departure:	09:49
Facture / Probill		<u>'</u>	
Terme / Term Remorque / Trailer PPD 17198V		t / Bill of Lading E R0733893	Bon commande / Purchase Order 464314
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.			ation / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS			
Qté/Qty Description	Poids/Weight	Dimensio	ns Guilbault
9 PCS / 1 PLT TEL 514 934 4545	293 L	24x 36x	28-
Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	



Trin	et Pro	# MAR07_33893								Date: 11/1/2023		
		SHIP FROM			SHIP TO							
		meur Inc.			Name: DXP POSTEXPERTS							
		ntrepreneurs			Address: 4575 RUE HICKMORE							
City: Mont r	nagny		State: QC	Zipcode: G5V 4T1	City: ST-LAU	JRENT	$\overline{\Lambda}$		State: QC	Zipcode: H4T 1S5		
Tel: 41824	11760		Refere	nce/PO:	Tel: Reference/PO: 5149344545							
Contac M Pel	t Name: l etier				Contact Name: RÉCEPTION DES MARCHANDISES							
Ref: 26032	6				Ref:							
Specia	Special Inst:					nst:			_	-W /		
		BILL THIRD PAR	TY			F	REIGI	HT CHAR	RGES			
Name: Trinet Transportation					3rd party	/ Billing:			Declare	ed Value: \$0		
Address: 2101 St-Regis Bivd, Dollard-Des-Ormeaux, H9B 2M9					Per:							
City: Dollar	d-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9								
				SPECIAL I	NSTRUC	TIONS						
				GUILBAU	LT 60 195	785 1				,		
				SHIPPING	INFORM	IATION						
Items:	_					•	_			No.		
Qty. Pgk.	Handl. Unit	D	escripti	on		NMFC No.	CIs.	Weight (LB)		Dimensions (IN)		
9	1.00 SKID	LIVRES						293	24.0	0X36.00X28.00		
	CUS	TOMS BROKER INFO	ORMA	TION		HAZARDO	US M	ATERIA	CON	TACTS		
Compa	ıny Name:				Contact Name: Phone:							
	t Name:		Phon		Email Address:							
Note: Tri Incombe des frais hired car	net Transport au transport de transport rier. The carr	rtation Inc. n'est pas responsable deur engagé. La responsabilité max t supplémentaires sont payés. / Tri rier's maximum liability is 2.00\$/ib.	les pertes dmale du net Transp or 4.41\$/k	ou dommages cau transporteur est 2.0 portation Inc. is pot g unless a declared	sé(e)s à la ca 0\$/lb ou 4.41\$ (lable for loss value is show	rgalson. La respons rkg à moins qu'une of or damage to can n on this bill of ladin	abilité de valeur dé rgo. The l g and ade	la perte ou de éclarée no figu llability for loss ditional freight	e l'endomm re au préso of or dama paid.	agement de la cargaison int connaissement et qui age to cargo lies with the		
Shipper: Marquis Imprimeur Inc. Signature & Date: Min hour life Signature & Date: Signature & Signat				SLL 111/23	17445C		nee; POSTEXP ure & Date:	ERTS				
This is to properly labeled, according	o certify that classified, d and are in p	the above named materials are escribed, packaged, marked and roper condition for transportation licable regulation of the Departmen	Carrie placar was m	r acknowledges rec ds. Carrier certifies lade available and d nse guidebook or re	emergency re: or carrier has d	sponse Information le DOT emergency						

TRANSPORT G	TRANSPORT GUILBAULT INC FACTURE - INVOICE										
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL:: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198			IACIO	OIL - III	0.02	01	60-195	5787-7			
DATE CONNAISSEMENT - B/L CUEILLETTE TRANS	SFERT FACT.	TARIF.	ORIG. DE	ST. CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT PAYE PREPAID			
02112023 MAR0733955 17431C 17	431 AT3	3 CLO	16 1	OMIN	9765116	- 1	PORT	PAYE			
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONSIGNATA	RE ET ADI	RESSE - CO	NSIGNEE AN	ID ADDRESS		COMP 7	777502			
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS	MARQUI 3480 I							231103			
MONTMAGNY	TORON		ACI A			_	EXPE97	765116			
PQ G5V 4T1				0	N M1W 2S	7	DEST TRAN	893			
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTH	I HER THAN SHIP	PER/CON	SIGNER								
TRINET TRSPT C/O MARQUIS 2101	ST REC	SIS			DOLLARD		S ORME	AUX			
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO	POR	ION D'ORI	GINE		VALEUR DÉCLAR	ÉΕ	C.O.D.				
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO	POR	ION DEST	INATION		NOTRE PART						
QTÉ DESCRIPTION	POIDS-WEIGH	TILK CO	NANAE AS I	L-K CODE	TAUX-RATE L	K	TOTAL	F/P			
1 PLT) L		L MIN	89.46		89.	-			
TEL 416 496 1537					05.40		05.	, 40			
	CAF	RB LT	т.	CRB	28.30		25.32	,			
	CAI	T 1	L	CKB	20.30		23.32	-			
				i							
			RE/ME	ASURE	6 P	c/ci					
1 PALETTES: CHEP = CPC = AUTRE =	59) L					114.	. 78			
PALETTES- AUT	L		TPS/GST								
		N°	TVQ/PST								
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 3C ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.5	JOURS (26.82% A	NNUELLEM	ENT) 7	737295	TOTA	ΔΙ	114.	. 78			
ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.8)	32% ANNUALLY)										

TRANSPORT GUILBAULT INC

PREUVE DE LIVRAISON PROOF OF DELIVERY

PROOF OF DELIVERT EG BANGE COMMANDER POR PACTURE - PROBUL RESS A PERCEVOIR - COLLECT PORT PAYE - PREPAID PORT PAYE CELLAREDANUE DON MIW 257 FAMSHER GRAND FORD IE IE POD-PLT33958011	[] TAIL GATE [] SMALL TRUCK [] INTERIOR DELIVERY [] OTHERS	ED TOTAL 6 PC/CF RH RH COMPACEAUX-NER PIECE 15 PALETS GU COMPATTIME OF DELIVERY	
17431 16 10 L OONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ADDRESS MARQUIS TORONTO 3480 PHARMACY AVENUE TORONTO ON	MARQUIS TORONTO POD-PLT33	59 L	20231102 103 WESULE WEASURED INTERSHOTED AT BEING BATTER OF THE WAS AND THE WAY BE AT
435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-9198 TEL: 418-681-1675 TÉLECOPIEUR: 418-681-9198 ***MARQUIS IMPRIMEUR INC. MARQUIS ENTREPRENEURS MONTMAGNY PO GSV 4T1	TRINET TRSPT C/O MAR 2101 ST REGISTRINET TRANSPORTEUR D'ORIGINE CONNECTING CARRIER JCT DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER	OFFORM DESCRIPTION TEL 416 496 1537	TOTAL REQUES BON ETAT PAR. RECEIVED IN GOOD GENER BY 20231162 FOUNDERY DATE LINE REQUESTREEN PROPERTY OF TOTAL SERVICE AND TOTAL SERVICE AND TOTAL TOTAL DIMENSION 22X 31X 16/ AUCUNE RÉCLAMATION NE SERVA ACCEPTÉE A MOINS D'ANSER ALL MOMENT DE LA LINRAISON - NO CLAIM WILL BE ACCEPTED UNI ESS NOTED ATTIME OF DELIVERY AUCUNE RÉCLAMATION NE SERVA ACCEPTÉE A MOINS D'ANSER ALL MOMENT DE LA LINRAISON - NO CLAIM WILL BE ACCEPTED UNI ESS NOTED ATTIME OF DELIVERY



Trin	et Pro	# MAR07_33955					State: Zipcode: M1W 2S7 Reference/PO: FREIGHT CHARGES X Declared Value: \$0 Per:				
		SHIP FROM					S	HIP TO			
Name: Marqu	ıls Imprir	neur Inc.			Name: MARQ	JIS TORONTO					
Addres 350 ru		ntrepreneurs			Address 3480 P	harmacy Ave	nue				
	nagny		State: QC	Zipcode: G5V 4T1	City: Toront	<u> </u>	$\sqrt{1}$		ON M1W 2S7		
	11760		Referer	nce/PO: 	Tel: 416496		\prod	<u> </u>	Reference/PO:		
Nancy	t Name: / Messer	vier				Name: s Toronto			·		
Ref: 25453	4				Ref:						
Specia	I Inst:			, <u>, , , , , , , , , , , , , , , , , , </u>	Special	nst:					
		BILL THIRD PAR	TY			FI	REIGI	HT CHAP	RGES		
Name:	T	-4-41			3rd party	Billing:		·	Declared Value: \$0		
Addres		Bivd, Dollard-Des-Orme	eaux, H	 19B 2M9	Per:						
City: Dollar	d-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9							
				SPECIAL IN	ISTRUC	TIONS			·		
				GUILBAUL	T 60-195	787-7					
				SHIPPING I	NFORM	ATION					
Items:											
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	CIs.	Weight (LB)	Dimensions (IN)		
0	1.00 SKID	COUVERTS	,					59.00	22.00X31.00X16.00		
	CUS	TOMS BROKER INFO)RMA	TION	l	HAZARDO	US M	ATERIA	L CONTACTS		
<u> </u>	ny Name:	-			Contact N				Phone:		
	t Name:		Phone		Email Add						
Note: Tri Incombe des frais hired car	net Transpor au transport de transport rier. The carr	tation Inc. n'est pas responsable d eur engagé. La responsabilité max supplémentaires sont payés. / Trir ier's maximum liability is 2.00\$/fb. d	es pertes imale du t net Transp or 4,41 \$/ k(ou dommages caus transporteur est 2.00 portation Inc. is not li g unless a declared v	é(e)s à la ca \$/ib ou 4.41\$ able for loss ralue is show	rgaison, La respons. Ikg à moins qu'une of or damage to car n on this bill of ladin	abilité de valeur de go. The g and ad	la perta ou di Sclarée ne figu liability for loss ditional freight	e l'endommagement de la cargaiso re au présent connaissement et qu sof or damage to cargo lies with th paid.		
Marq	Shipper: Marquis Imprimeur Inc. 9W Carrier: TRINET SPOT M				Consignee: T MARKET MARQUIS TORONTO						
		5-11-53	Signa	ture & Date:	te: Signature & Date:						
lacco.dir.	o certify that to classified, do and are in progressing to the appliportation.	the above named materials are escribed, packaged, marked and oper condition for transportation icable regulation of the Department	placan was m	ds. Carrier certifies e ade available and or	ges receipt of packages and required ertifies emergency response information le and or carrier has de DOT emergency ok or reverent document in the vehicle.						

			TI	RANSPO	RT G	JILE	BAUL'	r in	C	וסודי	E - INVO	NCE	N° CIE	N° FACTURE	PROBI	LL NO.	
		35, FARADAY, SA EL.: 418-681-057	INTE-FOY, QC G	IN 4G6 418-681-919	8				FAC	JIONI	11440	JICL	01	60-19	5788	3-5	
	DATE			UEILLETTE	TRANS	ERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDA	LION	A PERCEVOIR COLLECT	PORT PRE P	PAYE AID	
	02112	023 MAR0	733961	17431C	174	431	AT3	XXX	16	4	LTL	9765116	5- 2	PORT	PAY	ľΕ	
	EXPÉDITEU	R ET ADRESSE - S	HIPPER AND ADE	RESS		CONSIC	NATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7767	 793	
	MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO 0						MULTI RELIURE SF 2112 AVE DE LA TRANSMISSI SHAWINIGAN PQ G9N 8N8 B/L 2311 EXPE97651 DEST 8 TRAN										
			,						SIGNER								
_	TRINE	T TRSPT			2101	ST	REG:	IS				DOLLARI			AUX		
	JCT. ORIG.	TRANSPORTEUR D'ORIGIN	E - CONNECTING CARRIER	N° PRO			PORTIC	ON D'ORI	GINE			VALEUR DÉCLA	RÉE	C.O.D.			
ころら-しゅうこ	JCT. DEST.	TRANSPORTEUR DESTINA	TION - BEYOND CARRIER	N° PRO			PORTK	ON DESTI	INATIOI	N		NOTRE PART					
Ü	QTÉ		DESCRIPTIO	N		POIDS	-WEIGHT		MME-A	S L-K		TAUX-RATE	L-K	TOTAL		F/P	
	8	PCS / 2 TEL 819	PLTS 537 600	08			431 CARI	B LT		MEA:	UNT CRB	50.83 28.30	PC/CI	101 28.7			
	8	PALETTES: CHEF	P = CPC =	AUT	DE		431	L						130	.43		
	PALET		CPC =	AU'					TPS/GS TVQ/P								
	FRAIS ADMINIS	STRATIFS DE 2% PAR VE FEES OF 2% PER N	MOIS SUR TOUTES L MONTH ON ALL INVO	ES FACTURES PA ICES AFTER 30 I	ASSÉES 30 DAYS (26.8)	JOURS (2 2% ANNU	6.82% AN IALLY)	NUELLEME	ENT)	73	7295	TO 1	TAL .	130	.43		



			Garage Contract of the Contrac	Ša.
Signature: C 1 9		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 3 10:01	
Signé par / Signed by: <u>michel</u>	_	No. Factı	re / Probill: 601957885	
INTO DESTRUCE				
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		<u></u>
MARQUIS IMPRIMEUR INC.		Date:	2023/11/02	
350 DES ENTREPRENEURS		Arrivée/Arrival:	19:53	
MONTMAGNY		Début/Start:	18:46	
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	18:50	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
MULTI RELIURE SF		RDV/Appt.:	0000/00/00	
2112 AVE DE LA TRANSMISSI		_ ,	00:00 00:00	
SHAWINIGAN		Date:	2023/11/03	
ST, PQ, G9N8N8 G2A7		Arrivée/Arrival:	09:33	
Required Service Requis		Début/Start: Départ/Departure:	09:34 09:47	
HHL PCL LII		Depart/Departure.	09.47	
Facture / Probill				
Terme / Term Remorque / Trailer PPD 12266V		it / Bill of Lading B R0733961	on commande / Purchase Order	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	Probill No.	Jct. Dest. Transporteur Destina	tion / Beyond Carrier No.Fact - Probill N	ю.
DÉTAILS / DETAILS				

Qté/Qty Description	Poids/Weight		ns Guilbault	
8 PCS / 2 PLTS	431 L	28x 40x 28x 40x		
TEL 819 537 6008		201 401	25-	
Facturé à / Bill to				
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS		



Trin	et Pro	# MAR07_33961	- 1						Date: 11/2/2023	
		SHIP FROM					S	HIP TO		
Name: Marq ı	Jis Imprir	neur Inc.			Name: MULTI-	RELIURE				
Addres 350 ru	-	trepreneurs			Address: 2112 Di	E LA TRANSI	NIŞSIC	N.		
City: Mont r	nagny		State: QC	Zipcode: G5V 4T1	City: SHAWI	NIGAN /	/ 		State: Zipcode: QC G9N 8N8	
Tel: 41824	11760		Refere	nce/PO: 	Tel: 819537	6008	$\mathcal{O}^{(}$	1)	Reference/PO:	
	t Name: y Messer	vier			Contact Multi-re	1				
Ref: 26069	1-260692	<u> </u>			Ref:	<u> </u>	$\overline{}$			
Specia	I Inst;				Special !	nst:	_			
BILL THIRD PARTY						FI	REIGI	HT CHAR	GES	
Name: Trinet Transportation				3rd party	Billing:			Declared Value: \$0		
Addres				19B 2M9	Per:					
City: Dollar	rd-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9						
				SPECIAL II	NSTRUC	TIONS				
				GUILBAUI	LT 60-195	788-5				
		- · · · · · · · · · · · · · · · · · · ·		SHIPPING	INFORM	ATION				
Items:					<u> </u>					
Qty. Pgk.	Handl. Unit	De	scripti	on		NMFC No.	Cis.	Weight (LB)	Dimensions (IN)	
8	2.00 SKID	BLOC+COUVERTS						431.00	28.00X40.00X23.00	
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIA	CONTACTS	
	any Name:				Contact N				Phone:	
	t Name:		Phone		Email Add					
Note: Tr incombe des frais hired ca	inet Transport au transport de transport rrier. The carr	tation Inc. n'est pas responsable d eur engagé. La responsabilité max supplémentaires sont payés. / Tri ier's maximum liability is 2.00\$/ib. c	es pertes imale du net Transp or 4.41\$/k	ou dommages caus transporteur est 2.00 portation Inc. is not l g unless a declared	sé(e)s à la car 0\$/ib ou 4.41\$ liable for loss value ls show	gaison. La respons rkg à moins qu'une of or damage to car n on this bill of ladin	abilité de valeur de go. The g and ad	la perte ou de éclarée no figu liability for loss ditional freight	e l'endommagement de la cargaisor re au présent connaissement et que ; of or damage to cargo lies with the pald.	
Shipper: Marquis Imprimeur Inc. Carrier: GUILBAULT				Consignee; MULTI-RELIURE						
Signat	ure & Date:	2-11-23	Signa	ature & Date:			Signat	ure & Date:		
labeled,	and are in pr	the above named materials are escribed, packaged, marked and oper condition for transportation cable regulation of the Department	placar was m	ds. Carrier certifies o ade available and o	res receipt of packages and required intifies emergency response information and or carrier has de DOT emergency k or reverent document in the vehicle.					

TRANSPORT G	UILBA	ULT IN	C FACTUR	E . INIVO	NCE	N° CIE	N° FACTURE -	PROBIL	L NO.				
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TEL:: 418-681-0575 TELECOPIEUR: 418-681-9198			FACTOR	11440	NOL	01	60-195	5789	-3				
DATE CONNAISSEMENT - B/L CUEILLETTE TRAN	SFERT FA	CT. TARIF.	ORIG. DEST.	CATEG.	CONSOLIDATION	NC	A PERCEVOIR COLLECT	PORT PA	AYE ND				
03112023 MAR0733986 RH2314 2	2314 A	A3 XXX	16 8	LTL	9765116-	- 2	PORT	PAY	Έ				
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONSIGNA	TAIRE ET ADR	RESSE - CONSI	GNEE AN	D ADDRESS		COMP 7	7809	60				
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS		TIRALE CUNARI		CE II	1C.		B/L 2	2311 2311	04				
MONTMAGNY PO G5V 4T1	LAVA		-	D() H7S 2B2	,	EXPE97	7651	16				
rg G5V 411				ΓŞ	2 1175 2152	-	TRAN	O	93				
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER													
TRINET TRSPT C/O MARQUIS 2101	ST R	EGIS			DOLLARD		ORME	XUA					
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO	P	ORTION D'ORIG	GINE		VALEUR DÉCLAR	ĒΕ	C.O.D.						
ICT DEST TRANSPORTEUR DESTINATION - SEYOND CARRIER N° PRO		ODTION DECT	NATION		NOTRE PART								
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO	ĮP'	ORTION DESTI	NATION		NOTRE PART								
QTÉ DESCRIPTION	POIDS-W/F	IGHT L-K CON	MME-AS I-K	CODE	TAUX-RATE L-	ĸ	TOTAL		F/P				
1 PLTE NON EMP		82 L	WINE NO LE K	UNT	52.94		52						
TEL 450 682 6212 X3													
	C	ARB LT	L	CRB	28.30		14.98	3					
1	7	MESUI 82 L	RE/MEA:	SUREI) 28 PC	C/CE	67.	92					
PALETTES: CHEP = CPC = AUTRE =													
PALETTES- AUT			TPS/GST TVQ/PST										
			73	7295			67.	. 92					
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 3: ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26)	u Juurs (26.82 82% Annuall	Z% ANNUELLEME .Y)	:INF)		TOTA	AL_							



				300
Signature: / 9		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 6 09:01)
Signé par / Signed by: <u>kevin</u>		No. Factu	re / Probill: 601957893	
INCODMATION				
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		
MARQUIS IMPRIMEUR INC.		Date:	2023/11/03	
350 DES ENTREPRENEURS		Arrivée/Arrival:	17:40	
MONTMAGNY		Début/Start:	17:40	
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	17:53	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
PLASTIRALE SERVICE INC.		RDV/Appt.:	0000/00/00	
1600 CUNARD			00:00 00:00	
LAVAL		Date:	2023/11/06	
LAVAL , PQ , H7S2B2		Arrivée/Arrival:	08:26	
Required Service Requis		Début/Start:	08:32	
HHL PCL LII		Départ/Departure:	08:32	
Facture / Probill				
Terme / Term Remorque / Trailer PPD 12509V		it / Bill of Lading B R0733986	on commande / Purchase Order	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fac	t Probill No.	Jct. Dest. Transporteur Destina	tion / Beyond Carrier No.Fact - Probill N	٧o.
DÉTAILS / DETAILS				
Qté/Qty Description	Poids/Weight	Dimonsion	ıs Guilbault	<u></u>
-	782 L			
1 PLTE NON EMP TEL 450 682 6212 X3	702 L	48x 40x	20-	
122 400 002 02 12 NO				
Facturé à / Bill to				
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS		



Trine	et Pro	# MAR07_33986				•				Date: 11/3/2023		
	<u>(1)</u>	SHIP FROM	Ayr art	新。[14]、[15]。			∵):S	HIP TO	. W. j. r. j	4845 1 1878A		
		neur Inc.			Name: PLAST	IRALE						
Addres: 350 ru		ntrepreneurs			Address:	UE CUNARD						
City: Montn	nagny		State: QC	Zipcode: G5V 4T1	City: LAVAL				State: QC	Zipcode: H7S2B2		
Tel: 41824	11760		Refere	nce/PO:	Tel: 450682	62123		$\overline{}$	Referen	ice/PO:		
	t Name: / Messer		_		Contact Name: Plastirale							
Ref: 26123	8				Ref:							
Special	Inst:				Special Inst:							
		BILL THIRD PAR	ΤΥ		117.			HT CHAR	-,			
Name: Trinet	Trinet Transportation					Billing:				d Value: \$0		
Address: 2101 St-Regis Blvd, Dollard-Des-Ormeaux, H9B 2M9				19B 2M9					Per:			
City: Dollar	d-Des-O	rmeaux	State: QC_	Zipcode: H9B 2M9		_				_		
200				SPECIAL IN	STRUC	TIONS		3.34.6				
	\\#\\		(48. J.)	GUILBAUL			· · ·		**************************************			
Items:				<u> </u>		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		<u>· </u>				
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	Cls.	Weight (LB)	D	imensions (IN)		
o	1.00 SKID	FORMES + COUVERTS			ı			782	48.00	0X40.00X25.00		
	CUS	TOMS BROKER INFO	RMA	TION	. 11 s -	HAZARDO	US M	ATERIAL	CONT	ACTS		
	ny Name:				Contact N				Phor	ne:		
$\overline{}$	t Name:		Phone		Email Add							
Note: Trii incombe des frais hired can	net Transport au transport de transport rier. The carr	tation Inc. n'est pas responsable d eur engagé. La responsabilité maxi supplémentaires sont payés. / Trir ier's maximum liability is 2.00\$/lb. c	es pertes male du t let Transp r 4.41\$/kg	ou dommages causé transporteur est 2.00\$ portation inc. is not lia g unless a declared va	(e)s à la car /lb ou 4.41\$, ble for loss d alue is show	gaison. La respons /kg à moins qu'une of or damage to car n on this bill of ladin	abilité de valeur de go. The l g and ade	la perte ou de éclarée ne figur liability for loss ditional freight p	e l'endomma re au préser of or dama paid.	agement de la cargaison nt connaissement et qui ge to cargo lies with th		
Shipper: Carrier: GUILBAULT							Consig PLAS	nee; TIRALE				
Signature & Date: 3-11-33 Signature & Date:												
labeled, accordin	and are in pr	he above named materials are scribed, packaged, marked and oper condition for transportation cable regulation of the Department	placare was m	acknowledges receip ds. Carrier certifies en ade available and or d ise guidebook or reve	nergency res arrier has de	ponse information DOT emergency						

TRANSPORT GUILBAULT INC FACTURE - INVOICE													LL NO.	
435, FARA TÉL.: 418-	DAY, SAINTE-FOY, QC 681-0575 TÉLÉCOPIEU	G1N 4G6 JR: 418-681-919	98			FA	JION	- II V V	JICL		01	60-19		
	ONNAISSEMENT - B/L		TRANSFER	RT FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONS	OLIDATI	ON	A PERCEVOIR COLLECT	PORT PREF	PAYE PAID
03112023	MAR0733989	RH2314	231	L4 AA3	XXX	16	6	LTL	9765	116	- 2	PORT	' PA	ΥE
EXPÉDITEUR ET ADR	ESSE - SHIPPER AND A	DDRESS	CC	NSIGNATAIF	E ET AD	RESSE -	CONSI	GNEE AN	D ADDRES	SS		COMP	7809	961
350 DES E MONTMAGNY	MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 R & L LAMINATION GRAPHIQUE INC 8555 PASCAL GAGNON (MONTREAL) ST LEONARD (MONTREAL) PQ H1P 1Y5 PQ H1P 1Y5 TRAN ACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE BILL TO OTHER THAN SHIPPER/CONSIGNER													
TRINET TR														
JCT. ORIG. TRANSPORTI	EUR D'ORIGINE - CONNECTING CARI	RIER N° PRO		PORTI	ON D'ORI	GINE			VALEUR [DÉCLAR	ÉΕ	C.O.D.		
JCT. DEST. TRANSPORT	EUR DESTINATION - BEYOND CARRI	IER N° PRO			ON DEST				NOTRE PA					
QTÉ	DESCRIP	TION		POIDS-WEIGHT		MME-A	S L-K		TAUX-R		-K	TOTAL		F/P
	E NON EMP 418 246 5	666	,	109	L			UNT	52.	94		52	2.94	
				CAR				CRB	28.			14. 9	8	
1				109		KE/I	MEA	SUREI	υ	5 P	C/CI		. 92	-
PALETT	ES: CHEP = CPC		RE =]
PALETTES-		AU	T			TPS/GS TVQ/P								
FOLIO ADIAMIOTO ATIGO D	SE ON DAD MORE CUID TOUTE	COLEO CA CTUDEC D	Accéso no loi	IDC (DC COC) AA	IN II I I I I I I I I I I I I I I I I I	- * T \	73	7295				67	.92	

TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



y-11-01-01-01-01-01-01-01-01-01-01-01-01-				Garage Contract of the Contrac
Signature: Rub IN		rmation recueillie par / oyé / sent: 2023/11/0	Information received b	y 29
Signé par / Signed by: Robin	_	No. Factı	ıre / Probill: 601957 9	901
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		
MARQUIS IMPRIMEUR INC.		Date:	2023/11/03	
350 DES ENTREPRENEURS		Arrivée/Arrival:	17:40	
MONTMAGNY		Début/Start:	17:40	
MONTMAGNY , PQ , G5V4T1		Départ/Departure:	17:53	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
R & L LAMINATION GRAPHIQUE INC		RDV/Appt.:	0000/00/00	
8555 PASCAL GAGNON		5 (00:00 00:00	
ST LEONARD (MONTREAL)		Date:	2023/11/06	
MONTREAL , PQ , H1P1Y5		Arrivée/Arrival:	13:28 13:42	
Required Service Requis HHL PCL LII		Début/Start: Départ/Departure:	13:42 13:48	
Facture / Probill		<u> </u>		
Terme / Term Remorque / Trailer PPD 12268V		t / Bill of Lading E R0733989	on commande / Purchase C	Order
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact			tion / Beyond Carrier No.Fact -	Probill No.
DÉTAILS / DETAILS				
	Poids/Weight	Dimensior	ıs Guilbault	
1 PLTE NON EMP	109 L	22x 31x	12-	
TEL 418 246 5666				
Facturé à / Bill to	0404.67.77	010		
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	<i>3</i> 18		



Trinet Pro # MAR07 3	3989							Date: 11/3/2023
SHIP F		Fig. 120	3.	· , , , , , ,	S	HIP TO:		
Name:			Name:		<u> </u>			
Marquis Imprimeur Inc.			R&L L	MINATION G	RAPH	IQUE		
Address:			Address					<u>. </u>
350 rue des Entrepreneurs			8555 R	ue Pascal-Ga	gnon			
City:	State:	Zipcode:	City:				State:	Zipcode:
Montmagny	QC	G5V 4T1	Montre	<u>al</u> _			QC	H1P 1Y5
Tel: 418 <u>2</u> 411760	Refere	nce/PO:	Tel: 418246	5666			Referen	ce/PO:
Contact Name:			Contact		_			
Nancy Messervier			R&I La	mination grap	phique			
Ref.			Ref:					
259990						1 8	<u>, , , , , , , , , , , , , , , , , , , </u>	
Special Inst:			Special I	nst:				
N. W. D. J. BILL THIRI	D PARTY			F	REIG	HT CHAR	RGES	14 · · · · · · · · · · · · · · · · · · ·
Name:			3rd party	Billing:	<u>₹</u>		Declare	d Value: \$0
Trinet Transportation					_			
Address:							Per:	
2101 St-Regis Bivd, Dollard-De	s-Ormeaux, I	19B 2M9						
City: Dollard-Des-Ormeaux	State: QC	Zipcode: H9B 2M9						
BENEFIT NO. N. N. T. C.		SPECIAL II	USTRIIC	TIONS		1.45	12-1-12	1171 7
<u> </u>	<u>er fatt ea</u>	OI LOIAL II	1011100	TIONO	<u> </u>	<u> </u>		<u> </u>
		GUILBAUI	_T 60-195	790-1				
	<u>. 3 . 5.</u> 5	SHIPPING	INFORM	ATION	- 72	2 1 1 1		· (1) (4) (4)
Items:								
Qty. Handl. Pgk. Unit	Description	on		NMFC No.	Cls.	Weight (LB)	D	imensions (IN)
0 1.00 COUVERTS				_		109.00	22.00	X31.00X12.00
CUSTOMS BROKE	R INFORMA	TION		HAZARDO	US M	ATERIA	CONT	ACTS
Company Name:			Contact N	lame:			Phor	ie:
Contact Name:	Phone	e:	Email Add	ress:				
Note: Trinet Transportation Inc. n'est pas resp incombe au transporteur engagé. La responsa des frais de transport supplémentaires sont pr hired carrier. The carrier's maximum liability is	onsable des pertes abilité maximale du ayés. / Trinet Trans 2.00\$/lb. or 4.41\$/k	ou dommages caus transporteur est 2.00 portation Inc. is not li g unless a declared	é(e)s à la car)\$/lb ou 4.41\$ iable for loss value is snow	gaison. La respons /kg à moins qu'une of or damage to ca n on this bill of ladin	abilité de valeur de rgo. The g and ad	la perte ou de éclarée ne figu liability for loss ditional freight	e l'endomma re au préser of or dama paid.	gement de la cargaison it connaissement et qui ge to cargo lies with th
Shipper: Marquis Imprimeur Inc.	Carrie	er: L BAULT			Consig	nee; LAMINATI	ON GRA	PHIQUE
Signature & Date: 3~11-23		ature & Date:			Signat	ure & Dete-		
This is to certify that the above named material property classified, described, packaged, mark labeled, and are in proper condition for transpaccording to the applicable regulation of the D of Transportation.	r acknowledges rece ds. Camer certifies e nade available and or	: Signature & Date: s receipt of packages and required states emergency response information and or carrier has de DOT emergency or reverent document in the vehicle.						

TRANSPORT GUILBAULT INC FACTURE - INVOICE												L NO.	
435, FARADAY, SAINTE-FOY, QC TEL:: 418-681-0575 TELECOPIEU	G1N 4G6 JR: 418-681-919	8				170	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		J. J.	01	60-19	5791	L-9
DATE CONNAISSEMENT - B/L		TRANSF	ERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT P PREP	PAYE 'AID
03112023 MAR0734032	RH2314	23	314	AA3	XXX	16	8	LTL	9765116	- 2	PORT	PAY	Έ
EXPÉDITEUR ET ADRESSE - SHIPPER AND A	DDRESS		CONSI	SNATAIRE	ET ADR	ESSE -	CONSI	GNEE AN	D ADDRESS		COMP	7809	962
MARQUIS IMPRIMEUR INC. SOCADIS 350 DES ENTREPRENEURS 420 RUE STINSON												2311 2311	
MONTMAGNY ST LAURENT (MONTREAL) EX													116
	PQ G5V	4T1						Pζ	D H4N 3L	7	DEST TRAN	8	393
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER													
TRINET TRSPT C/O MA	RQUIS :	2101	ST	REGI	s				DOLLARD	DES	S ORME	XUA	
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CAR	RIER N° PRO			PORTIC	N D'ORI	GINE			VALEUR DÉCLARI	ÉΕ	C.O.D.	•••	
JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRI	ER N° PRO			PORTIC	N DESTI	NATION	N		NOTRE PART				
							<u> </u>	0005	TALLY DATE	<u> </u>	TOTAL	T	
19 CS/ 1 PLTE NO			POIDS	448		MME-A	S L-K	CODE	52.94	-K	TOTAL 5.2	. 94	F/P
TEL 514 331 3	300			440	-			ONI	32.94		52	. 94	
				CARE	3 LTI	г		CRB	28.30	i.	14.9	.	
				CARE) hr	L		CKD	20.30		14.9	0	
						RE/1	MEAS	SUREI	27 P	c/ci			
19 PALETTES: CHEP = CPC	C = AUT	RE =		448	$\mathbf{L} $						67	. 92	
PALETTES-	AU'	Т				TPS/GS							
					N° -	TVQ/PS							
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTE ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL IN	S LES FACTURES PA	ASSÉES 30	JOURS (2	6.82% ANI	NUELLEME	ENT)	73	7295	TOT	ΔΙ	67	. 92	
ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL IN	IVUICES AFTER 30 I	DAYS (26.82	M ANNU	JALLY)						-	•		



30110dor :			G.	87 <u>6</u> .
Signature: C-19		rmation recueillie par / oyé / sent: 2023/11/0	Information received by 406 11:31	9
Signé par / Signed by:martin	<u> </u>	No. Factu	re / Probill: 601957919	
INCODMATION				
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		
MARQUIS IMPRIMEUR INC.		Date:	2023/11/03	
350 DES ENTREPRENEURS		Arrivée/Arrival:	17:40	
MONTMAGNY		Début/Start:	17:40	
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	17:53	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
SOCADIS		RDV/Appt.:	0000/00/00	
420 RUE STINSON		Data	00:00 00:00	
ST LAURENT (MONTREAL) MONTREAL , PQ , H4N3L7		Date: Arrivée/Arrival:	2023/11/06 10:50	
MONTREAL, FQ, HANSET		Début/Start:	10:50	
Required Service Requis HHL PCL LII		Départ/Departure:	10:55	
Facture / Probill				
Terme / Term Remorque / Trailer PPD 12508V		t / Bill of Lading B R0734032	on commande / Purchase Order	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.			tion / Beyond Carrier No.Fact - Probill	No.
DÉTAILS / DETAILS				
Qté/Qty Description	Poids/Weight	Dimension	s Guilbault	
19 CS/ 1 PLTE NON EMP TEL 514 331 3300	448 L	48x 40x	24-	
Facturé à / Bill to		210		
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	<i>3</i> 15		



Trin	et Pro	# MAR07_34032								Date: 11/3/2023				
8-334	11, 34 45	SHIP FROM			SHIP TO THE SHIP TO									
Name: Marq ı		meur Inc.			Name: SOCADIS									
Addres	is:	ntrepreneurs		-	Address: 420 RUE STINSON									
City:	magny		State: QC	Zipcode: G5V 4T1	City:	LAURENT		State:						
Tel: 4182 4	111760		Refere	nce/PO:	Tel: 514331	3300	`	Reference/PO:						
	t Name: y Messer	vier			Contact Name: Socadis									
Ref: 26103	32	•	-		Ref:									
Specia	Il Inst:				Special Inst:									
	Gerolde	BILL THIRD PAR	TY:		FREIGHT CHARGES									
Name:	Transpo				3rd party	/ Billing:		Declared Value: \$0						
Addres	ss:	Blvd, Dollard-Des-Orme	eaux. F		-		Per:							
City:	rd-Des-O		Zipcode: H9B 2M9		-									
Selection of the	引漢。。			SPECIAL IN	STRUC	TIONS	` > .	(10)		The Park Control				
ı			-	GUILBAUL	T 60-195	791-9								
TO CAR			\$ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	SHIPPING II	NFORM	ATION			, i	(1871) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Items:	_			•										
Qty. Pgk.	Handl. Unit	De	on		NMFC No.	Cls.	Weight (LB)	D	imensions (IN)					
19	1.00 SKID	VOLUMES						448	48.00	0X40.00X24.00				
1	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIAL	CONT	ACTS				
	any Name:				Contact Name: Phone:									
	t Name:		Phone		Email Address:									
Note: Tri incombe des frais hired car	inet Transport au transport de transport rier, The carr	tation Inc. n'est pas responsable d eur engagé. La responsabilité maxi supplémentaires sont payés. / Trir ier's maximum liability is 2.00\$/lb. c	es pertes male du t let Transp ir 4.41\$/kg	ou dommages causé transporteur est 2.00\$ portation inc, is not lia g unless a declared va	(e)s à la car i/lb ou 4.41\$ ible for loss alue is show	gaison. La respons fkg à moins qu'une of or damage to car n on this bill of ladin	abilité de valeur dé go. The l g and ad	la perte ou de clarée ne figur iability for loss ditional freight p	l'endomma e au préser of or dama paid.	gement de la cargaisor it connaissement et que ge to cargo lies with the				
Shippe Marq ı	er: uis Impri	meur Inc. 9WM	er: _BAULT			nee; ADIS								
		3-11-23	iture & Date:	Signature & Date:										
properly labeled, accordin	classmed, de and are in pr	the above named materials are ascribed, packaged, marked and oper condition for transportation cable regulation of the Department	ds. Carrier certifies en ade available and or d	nergency res carrier has d	of packages and required ergency response information arrier has de DOT emergency ent document in the vehicle.									

TRANSPORT GUILBAULT INC FACTURE - INVOICE													N° FACTURE	PROBIL	L NO.		
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL:: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198													60-19	5825	5-5		
DATE	FERT	FACT. TARIF. ORIG. DEST. CATEG.				CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT F	PAYE 'AID							
30102	023	MAR073	3652	RD2306	2306 2		306 AT3		16	4	LTL	9765116	- 2	PORT	PAY	Έ	
EXPÉDITEU	CONSI	GNATAIR		COMP .	7616	SO 1											
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY PQ G5V 4T1 PUBLICATIONS CHRETIENNES 509 RUE DES ERABLES TROIS RIVIERES PQ G8T 7Z7											7	B/L P/L EXPE9 DEST TRAN	2310 2310 7651	31			
FACTURER .	FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNER																
		RSPT C/			2101							DOLLARD	DE	S ORME	XUA		
JCT. ORIG.	JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO							PORTION D'ORIGINE VALEUR DÉCLAR						C.O.D.			
IOT DEOT	TDANEBO	ADTEUD DECTMATION		PORTION DESTINATION NOTRE PART													
JCT. DEST.	TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO PORTION D								DESTINATION INCINE PART								
QTÉ	DESCRIPTION					POID	POIDS-WEIGHT L-K COMME-AS L-K CODE					TAUX-RATE L	-K	TOTAL		F/P	
56 PCS / 2 PLTS TEL 819 378 4023 REF 261104 PETIT CAMION							1556 PET:		IMA		UNT PCL	58.95 50.00		117 50	.90		
					CARI	3 LTL CR			CRB	28.30	28.30						
				P.O.	459	867	1	MESU	RE/I	ME A :	SUREI	98 P	C (C)	F			
PALETTES - CPC = AUTRE = AUT							1556 L							201	.27		
									TPS/GS TVQ/PS					V 8 ****			
										70'	7005			001 07			

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)

737295

TOTAL

201.27



Signature: FRANCIS	Information recueillie par / Information received by envoyé / sent : 2023/10/31 14:30						
Signé par / Signed by: Francis		No. Fact	ure / Probill: 601 9	958255			
INFORMATION							
Expéditeur / Shipper MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY MONTMAGNY , PQ , G5V4T1 Required Service Requis HHC PCC CII	[A C	ueillette / Pickup Date: Arrivée/Arrival: Début/Start: Départ/Departure:	2023/10/30 19:47 19:47 19:51				
Destinataire / Consignee PUBLICATIONS CHRETIENNES 509 RUE DES ERABLES TROIS RIVIERES ST , PQ , G8T7Z7 L1M1 Required Service Requis HHL	Connaissement /	vraison / Delivery RDV/Appt.: Date: Arrivée/Arrival: Début/Start: Départ/Departure: Bill of Lading 1733652 Dest. Transporteur Destina	0000/00/00 09:00 16:00 2023/10/31 14:07 14:12 14:13 Bon commande / Purch 459867				
DÉTAILS / DETAILS							
Qté/Qty Description P 56 PCS / 2 PLTS TEL 819 378 4023 REF 261104 PETIT CAMION	oids/Weight 1556 L	Dimensio 48x 40x 48x 40x					
Facturé à / Bill to TRINET TRSPT C/O MARQUIS IMP	2101 ST REGIS	S					



Trin	et Pro	# MAR07_33652							Date: 10/27/2023			
		SHIP FROM						SHIP TO				
Name: Marq ı	is Imprii	neur Inc.			Name: PUBLIC	CATIONS CH	RETIE	NNES				
Addres 350 ru		ntrepreneurs				: ue des Érable	s					
City: Mont r	nagny		State: QC	Zipcode: G5V 4T1	City: Trois-F	livières		$\langle \gamma \rangle$	State: Zipcode: QC G8T 7Z7			
Tel: 41824	65666		Refere	nce/PO:	Tel: 819378	4023		14	Reference/PO:			
	t Name: e Fournie	er			Contact Publica	Name: ations Chretie	ennes	<u> </u>				
		6-107-108-109-110-111-1 20-121-132 - 123 - 123 -			Ref:							
Specia				Special	Inst:							
		BILL THIRD PAR		FREIGHT CHARGES								
Name:				3rd party Billing: X Declared Value: \$0								
Addres		Blvd, Dollard-Des-Orme	ISB 2M9	Per:								
City:	rd-Des-O		State:	Zipcode: H9B 2M9	Small Truck LTL							
			L	SPECIAL IN	INSTRUCTIONS							
		PI	ETIT C	AMION- LIVRA	ISON E	NTRE 9H ET 1	6H-					
				SHIPPING II	NFORM	ATION						
Items:					- ·							
Qty. Pgk.	Handl. Unit	De	scriptic	on		NMFC No.	Cis.	Weight (LB)	Dimensions (IN)			
56	2.00 SKID	LIVRES						1556.00	48.00X40.00X44.00			
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US N	IATERIAL	. CONTACTS			
	ny Name:				Contact N				Phone:			
	t Name:		Phone		Email Add							
Note: Tri incombe des frais hired car	net Transport au transport de transport rier. The carr	tation Inc. n'est pas responsable de eur engagé. La responsabilité maxi supplémentaires sont payés. / Trin fer's maximum liability is 2.00\$/lb. o	ou dommages causé ransporteur est 2.00\$ portation Inc. is not lia g unless a declared a	(e)s à la cai lib ou 4.41\$ bis for loss alos is show	galson. La respons rkg à moins qu'une of or damage to can n on this bill of ladin	abilité de valeur d go. The g and ad	a la perte ou de éclarée ne figur liability for loss iditional freight p	l'endommagement de la cargalson e au présent connaissement et que of or damage to cargo lies with the hald.				
Shippe Marq ı	r: uis Impri	meurinc. PC	BAULT	SIC RDZ 3CXC Z Consignee; PUBLICATIONS CHRETIENNES								
	ure & Date:											
This is to properly labeled, according of Trans	o certify that to classified, do and are in pro- ing to the appli- portation.	the above named materials are escribed, packaged, marked and oper condition for transportation icable regulation of the Department	ds. Carrier certifies en ade available and or o	is receipt of packages and required tifles emergency response information and or carrier has de DOT emergency or reverent document in the vehicle.								

	TRANSPORT GUILBAULT INC FACTURE - INVOICE														
	4	35, FARADAY, SA EL.: 418-681-057	UNTE-FOY, QC (1N 4G6 - 418-681-919	8			'			J.U.	01	60-19	5826	3−3
	DATE			CUEILLETTE	TRANSFE	RT FACT	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDAT	ION	A PERCEVOIR COLLECT	PORT I PREP	PAYE 'AID
	30102	023 MARC	733742	RD2306	1782	32 AT	3 CLC	16	10	LTL	9765116	- 1	PORT	PAY	Œ
	EXPÉDITEUI	R ET ADRESSE - S	HIPPER AND AD	DRESS	C	ONSIGNATA	RE ET AD	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP	7624	100
	MARQU 350 D MONTM	IS IMPRI ES ENTRE AGNY	EPRENEUR	C. S Q G5V		UNIVEI 5201 I NORTH	UFFE	RIN		RONT(Oì	O N M3H 5Y	8	B/L :	2310 2311 7651)31 01
	FACTURER A	AUTRE QUE EXPÉ	DITEUR/CONSIG	NATAIRE - BILL	TO OTHER	R THAN SHIF	PER/CON	SIGNER							
	TRINE	T TRSPT	C/O MAR	QUIS :	2101 8	ST RE	SIS				DOLLARD	DES	ORME.	AUX	
апашшаа	JCT. ORIG.	TRANSPORTEUR D'ORIGIN	NE - CONNECTING CARRIE	R N° PRO		PORTION D'ORIGINE VALEUR DÉCLA							C.O.D.		
しゅうしょうほう	JCT. DEST.	TRANSPORTEUR DESTINA	ATION - BEYOND CARRIER		POR	FION DEST	INATIO	N		NOTRE PART					
ũ	QTÉ		DESCRIPTI	ON		POIDS-WEIGH		MME-A	S L-K	CODE	TAUX-RATE L	K	TOTAL		F/P
	1	PLT TEL 416		579	P L	ı T		FRT	19.54 28.30		32.0				
				P.O.	4615		MESU	_	MEA!		,	C/CF	7		
	1	PALETTES: CHE	P = CPC	= AUT	RE =	579	L						145	.16	
	PALET		r - CPC	AU'				TPS/GS TVQ/P							
	FRAIS ADMINIS	STRATIFS DE 2% PAR	MOIS SUR TOUTES	LES FACTURES PA	ASSÉES 30 JO	URS (26.82% A	NNUELLEM	IENT)	73	7295	тот	ΔL	145	.16	

TRANSPORT GUILBAULT INC

435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

PREUVE DE LIVRAISON PROOF OF DELIVERY

www.groupeguibaut.com

20****SCHERF-SE, OF LIGHTS FACT AE - PROBLE HINTE CHAMCE - FO CHILTE-PONT TEANOTERI - HEARSTER DES SES CATES 60-1958263 461575 16 10 L 30102023 MAR0733742 RD2306 178232 CONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ADDRESS EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS MARQUIS IMPRIMEUR INC. UNIVERSITY OF TORONTO 5201 DUFFERIN ST 350 DES ENTREPRENEURS PORT PAYE NORTH YORK MONTMAGNY DELLARED VALLET ON M3H 5Y8 PQ G5V 4T1 EMPH THE WEAR MINES FACTURE A - ELL TO 2101 ST REGIS TRINET TRSPT C/O MAR NO PRC TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER NO PRC UNIVERSITY OF TORONTO (North York, POD-PLT33909341 JCT DEST TRANSPORTEUR DESTINATION - BEYOND CARRIER OTE-OTY. DESCRIPTION 1 PLT 579 TEL 416 667 7777 FUEL LTL] SMALL TRUCK] INTERIOR DELIVERY] OTHERS RECU EN BON ETAT PAR - RECEIVED IN GOOD ORDER BY 20231030 TOTAL 03 MESURE/MEASURED 23 PC/CF TOTAL CATE GÜ DIMENSION 48X 40X 21/

AUCUNE RÉCLAMATION NE SERA ACCEPTÉE & MOINS D'AVISER AU MOMENT DE LA LIVRAISON - NO CLAIM WILL BE ACCEPTED UNLESS NOTED AT TIME OF DELIVERY

10627



Trin	et Pro	# MAR07_33742							•	Date: 10/30/2023			
		SHIP FROM		· · · · · · · · · · · · · · · · · · ·			S	нір то					
		neur Inc.			Name: UNIV. C	F TORONTO	PRES	S DISTRI	В.				
		trepreneurs			Address 5201 D	UFFERIN ST							
	nagny		State: QC	Zipcode: G5V 4T1	City: NORTH	I YORK	<u> Lí</u>		State: ON	Zipcode: M3H 5T8			
Tel: 41824	65666		Referer	nce/PO:	Tel: 416667	7777	V		Referen	ce/PO:			
Carol	t Name: • Fournie	er		•	Contact JOURN	Name: IALS DEPART	MENT	<u></u>					
Ref: 24661	7				Ref:								
Special	Inst:			Special I	nst:	•							
		BILL THIRD PAR			FI	REIGI	T CHAP	RGES					
Name:	_			3rd party Billing: X Declared Value: \$0									
Trinet Addres	Transpo	rtation		Per:									
		Blvd, Dollard-Des-Orme	aux. H	19B 2M9	1								
City:	d-Des-O		State: QC	Zipcode: H9B 2M9									
				SPECIAL II	INSTRUCTIONS								
			·	GUILBAUI	_T 60-195	826-3							
				SHIPPING	NFORM	ATION							
Items:													
Qty. Pgk.	Handl. Unit	De	scriptio	on .	· · · · · ·	NMFC No.	Cis.	Weight (LB)	D	imensions (IN)			
0	1.00 SKID	воокѕ						579	48.00	0X40.00X21.00			
	CUS	TOMS BROKER INFO	RMA	TION		HAZARDO	US M	ATERIAL	CONT	ACTS			
Compa	ny Name:				Contact N	ame:			Phor	ie:			
	t Name:	<u> </u>	Phone		Email Add								
Note: Tri incombe des frais hired car	net Transport au transport de transport rier. The carr	iation inc. n'est pas responsable de eur engagé. La responsabilité maxi supplémentaires sont payés. / Trin ier's maximum liability is 2.00\$/lb. o	ou dommages caus ransporteur est 2.00 ortation Inc. is not il gunless a declared	es causé(e)s à la cargaison. La responsabilité de la perte ou de l'endommagement de la ca sal 2.00\$/lb ou 4.41\$/kg à moins qu'une valeur déclarée ne figure au présent connaissement is not llable for loss of or damage to cargo. The liability for loss of or damage to cargo lies v clares valus is shown on this bill of lading and additional freight paid.					gement de la cargalson it connaissement et que ge to cargo lies with the				
Signati	nipper: arquis imprimeur/inc. Guilbault Guilbault Signature & Date:					Consignee; UNIV. OF TORONTO PRESS DISTRIE Signature & Date:							
This is to properly labeled, according	certify that t classified, de and are in pr	the above named materials are ascribed, packaged, marked and oper condition for transportation cable regulation of the Department	acknowledges rece is. Carrier certifies e ade available and or	ifles emergency response information and or carrier has de DOT emergency or reverent document in the vehicle.									

P/6

	TRANSPORT GUILBAULT INC FACTURE - INVOICE N° CIE N° FACTURE - PROBILL NO.																			
4	35, FAI	RADAY, SA 8-681-057	AINTE-FOY 75 TÉLÉC	, QC OPIEU	G1N 4 R: 418	4G6 8-681-919	8				FAC	, i Uni	- 11440	JICL			01	60-19	582	7-1
DATE			SEMENT			ILLETTE	TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CC	ONSOLI	DATIO	V	A PERCEVOIR COLLECT	PORT PRE	PAYE PAID
31102	023	MAR	7338	16	42	8460	428	460	AA3	XXX	16	6	LTL	97	651	16-	2	PORT	PA:	ΥE
EXPÉDITEUR	RETAI	DRESSE - S	SHIPPER A	ND A	DDRE:	SS		CONSI	GNATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADD	RESS			COMP	7668	222
MARQU 350 DI MONTM	ES AGN	ENTRI Y	EPREN	IEUE I	RS PQ	G5V 4		231 LON	L5 RI NGUEI		E LA		ROVII		4G :	1G4		B/L	231 231 765	101 101
FACTURER A											SIGNER			D0:			D II G	ODM	3 T T32	
	TRINET TRSPT C/O MARQUIS 2101 ST REGIS DOLLARD DES ORMEAUX CT. ORIG. TRANSPORTEUR D'ORIGINE CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.																			
JCT. ORIG.																				
JCT. DEST.	T. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO PORTION DESTINATION NOTRE PART																			
QTÉ			DES	CRIPT	ION			POIDS	S-WEIGHT	L-K CO	MME-A	S L-K	CODE	TAU	X-RATE	L-K	T	TOTAL		F/P
87	CS TE		PLTS 0 640					1	L939	L			UNT	4	9.10	0		147	.30	
									CARI	B LT	L		CRB	2	8.30	0		41.6	9	
									1	_	RE/1	MEA!	SUREI	D	137	PC	/CF			
87	PALE	TTES: CHE	P =	CPC	: =	AUT	RE =		L939	L								188	.99	
PALET	PALETTES - AUT N° TPS/GST N° TVQ/PST																			
FRAIS ADMINIS ADMINISTRATI	STRATIFS VE FEES	S DE 2% PAR OF 2% PER	MOIS SUR MONTH ON	TOUTES ALL IN	S LES F. VOICES	ACTURES PA	ASSÉES 30 DAYS (26.8	JOURS (2 2% ANNU	26.82% AN JALLY)	NUELLEMI	ENT)	73	7295		TO	ATC	L	188	.99	-



Signature:	Information recueillie par / Information received by envoyé / sent : 2023/11/01 11:31						
Signé par / Signed by: <u>dominic</u>	-	No. Factu	re / Probill: 601958271				
INFORMATION							
Expéditeur / Shipper MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS MONTMAGNY MONTMAGNY , PQ , G5V4T1 Required Service Requis HHC PCC CII		Cueillette / Pickup Date: Arrivée/Arrival: Début/Start: Départ/Departure:	2023/10/31 16:37 16:37 16:40				
Destinataire / Consignee MESSAGERIES ADP 2315 RUE DE LA PROVINCE LONGUEUIL CHAMBLY, PQ, J4G1G4 Required Service Requis HHL PCL LII Facture / Probill Terme / Term Remorque / Trailer PPD 12208V Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact	MAI	R0733816	0000/00/00 00:00 00:00 2023/11/01 10:53 10:59 10:59 on commande / Purchase Order				
DÉTAILS / DETAILS	oids/Weight 1939 L		s Guilbault				
Facturé à / Bill to TRINET TRSPT C/O MARQUIS IMP	2101 ST REC	48x 40x 48x 40x	41-				



		# MARU/_33816										
		SHIP FROM						SHIP TO				
Name: Marqu	ıis Imprir	neur inc.			Name: Messa	geries Adp						
Addres				-	Address					-		
	ie des Er	ntrepreneurs	104.4	1		ue de la Prov	ince	}	Int-A			
City: Monte	nagny		State: QC	Zipcode: G5V 4T1	City:	ii <i>[]</i>	1/	1	State: QC	Zipcode: J4G 1G4		
Tel:	11760			nce/PO:	Tel: 450640	(7	16) 	Referen			
	t Name:		l		Contact			/	٠			
M Pell	letier	•	•		Messa	geries <u>A</u> dp						
Ref: 26066	9				Ref:							
Special	Inst:				Special	inst:				•		
		BILL THIRD PAR	TY			F	REIG	HT CHAR	GES			
Name:					3rd party Billing: X Declared Value							
İ	Transpo	ortation			Per:							
		Blvd, Dollard-Des-Orme										
City: Dollar	rd-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9								
{				SPECIAL IN	L INSTRUCTIONS							
ļ				GUILBAUI SHIPPING				·				
14	····				IN OIN	IA II OII						
Items:	Handl					1	1	Weight		limensions		
tems: Qty. Pgk.	Handl. Unit	De	scriptic			NMFC No.	CIs.	Weight (LB)		Dimensions (IN)		
Qty.		De	scriptic			1	CIs.					
Qty. Pgk.	3.00 SKID			on .		1		(LB) 1939.00	40.00	(IN) 0X48.00X41.00		
Qty. Pgk. 87	3.00 SKID	LIVRES		on .	Contact N	NMFC No.		(LB) 1939.00	40.00	(IN) 0X48.00X41.00 FACTS		
Qty. Pgk. 87	3.00 SKID	LIVRES		TION		NMFC No. HAZARDO		(LB) 1939.00	40.00	(IN) 0X48.00X41.00 FACTS		
Qty. Pgk. 87 Compa	3.00 SKID CUS any Name:	LIVRES TOMS BROKER INFO	Phone	TION	Contact N	NMFC No. HAZARDO	DUS N	(LB) 1939.00	40.00 _ CONT Phor	(IN) 0X48.00X41.00 FACTS		
Qty. Pgk. 87 Compa Contac Note: Tri incombe des frais hired car Shippe	Unit 3.00 SKID CUS any Name: ct Name: net Transport au transport de transport de transport er:	LIVRES	Phone es pertes male du t ret Transp r 4.41\$/k Carrie GUIL	TION 3: ou dommages caus ransporteur est 2.00 ortation inc. is not ig unless a declared.	Contact N Email Add é(e)s à la cau sable for loss value is show	NMFC No. HAZARDO	pus M sabilité de valeur d argo. The ang and ac Consi	(LB) 1939.00 IATERIAL e la perte ou de éclarée ne figure flability for loss ditional freight de la contraction de la c	40.00 CONT Phor Phore l'endomma e au préser of or dama paid.	(IN) 0X48.00X41.00 FACTS		

TRANSPORT GUILBAULT INC FACTURE - INVOICE N° CIE N° FACTURE - PROBILL NO.													
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL.: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198				170	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		J. J.	01	60-19	5830)-5		
	RANSFERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT P PREP	PAYE 'AID		
31102023 MAR0733783 428460	3092	AA3	CLO	16	10	MIN	9765116	- 1	PORT	PAY	Έ		
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CON	SIGNATAIR	E ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP	7675	583		
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS		LSEVII				' NWC	TERMINAL		B/L :	2311 2311	01		
MONTMAGNY	GE	ORGE		NG 2	-1 V E			_	EXPE 9	7651	116		
PQ G5V 41	[1					Oì	N L7G 4R	9	DEST TRAN	8	393		
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO	OTHER TH	HAN SHIPPI	ER/CONS	SIGNER									
TRINET TRSPT C/O MARQUIS 21	L01 S7	REG	IS				DOLLARD	DES	S ORME	XUA			
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO PORTION D'ORIGINE VALEUR DÉCLARÉE C.O.D.													
JCT, DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO	JCT. DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO PORTION DESTINATION NOTRE PART												
										—т			
QTÉ DESCRIPTION	POI	DS-WEIGHT		MME-A	S L-K	CODE		-K	TOTAL	0.5	F/P		
9 CS/ 1 SKID NOT STACK LESLEY REYNOLDS		416	니			MIN	101.85		101	.85			
TEL 905 873 2750													
	+												
		CARI	3 L T:	L		CRB	28.30		28.8	2			
			AE CIT	DE /1	ATT: 7. G	SUREI	17 D	c/ci	r.				
9		416		KE/1	YIE.A.	DUKEI	J 1 P		130	. 67			
PALETTES: CHEP = CPC = AUTRE	_		N10 *	TPS/GS	т								
TIME THE POI				TVQ/P									
	£				73	7295			130	. 67			
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSI ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAY	EES 30 JOURS 'S (26.82% AN	5 (26.82% AN NUALLY)	NUELLEME	ENF)			TOTA	AL_					



TRANSPORT GUILBAULT INC

435 RUE FARADAY, QUEBEC, QC G1N 4G6 TEL: 418-681-0575 TÉLECOPIEUR: 418-681-9198

PREUVE DE LIVRAISON PROOF OF DELIVERY

DIMENSION 48X 40X 15/	BEBLIT - BEGINNING FIN - END	TOTAL RECUES BON: ETAT PAR - RECEIVED AN GOOD DAY	ļ	1220 to	FEL 905 873 2750	,	JOT. DEST TRANSPORTEUR DESTINATION - BEYOND CARRIER	JCT ORIG TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER	TRINET TRSPT C/O MAR 2101	PQ G5V 4T1	MONTMAGNY	350 DES ENTREPRENEURS	MARQUIS IMPRIMEUR INC.	EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	31102023 MAR0733783 428460	BIT OF NOME	www.oroutpequibauit.com
	DATE LIVRÉE - DELIVERY DATE LIMEE PAR - DELIVERY BY	RECUIPED FOR FRECENED A GOOD GROEN BY 202310 TO TO THE STUTE OF MEANS OF ELD"	(211112)	\$ 1238 FUEL WILLENCO NON	Mureum)	POIDS: WEIGHT L-K COMME-AS	ELSEVIER GEORGETOWN TERMINAL	CARRIER	ST REC		GEORGETOWN	34 ARMSTRONG AVE	ELSEVIER GEORGETOWN TER	CONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ADDRESS	60 3092 16 10 L	CALLS CHIS LESS CYLLS	
	INS MORCEAUX-NER PIECE PALETS GU	TOTAL 17 PC/CF	[]SMALL TRUCK []INTERIOR DELIVERY []OTHERS	7			L POD-PL133938073	ME ME	4-C65	ON L7G 4R9	PORT PAYE	PORT PAYE - PREPAID	ERMINAL A. PERCEVOIR - COLLECT		60-1958305	BON DE COMMANDE -P-O	- יייייייייייייייייייייייייייייייייייי

 	_ '	 OMMARCCELA

GUILBRULT 60-195830-5 CONNAISSEMENT BILL OF LADING

Trinet Pro # MA	\R07_33783							Date: 10/31/2023			
	SHIP FROM			SHIP TO							
Name: Marquis imprimeur in	с.			Name: GEOR	SETOWN TER	RMINA	L WAREH	OUSES			
Address: <mark>350 rue des Entrepr</mark> e	neurs	· · · · · · · · · · · · · · · · · · ·		Address 34 ARM	: MSTRONG AV	ENUE					
City: Montmagny		State: QC	Zipcode: G5V 4T1	City:	GETOWN		10)	State: Zipcode: ON L7G4R9			
Tel: 4182411760		Referen	ce/PO:	Tel: 905873	2750	//		Reference/PO:			
Contact Name: Nancy Messervier				Contact LESLE	Name: Y REYNOLDS	, (
Ref: 260710	,	,		Ref:							
Special Inst:				Special	inst:						
BI	LL THIRD PAR	TY			F	REIG	HT CHAF	RGES			
Name:		•		3rd party	/ Billing:	(Declared Value: \$0			
Trinet Transportation ^{Address:} 2101 St-Regis Blvd, D		aux HG	9R 2M9	Per.							
City: Dollard-Des-Ormeaux		State: QC	Zipcode: H9B 2M9	•							
			SPECIAL IN	ISTRUC	TIONS	27. 7	-				
			GUILBAUL	T 60-195	830-5						
			SHIPPING	INFORM							
tems:	-			-	·•	*,	• • ·	# * T			
Qty. Handl. Pgk. Unit	, De	scriptio	n ¹	1.8	NMFC No.	CIs.	Weight (LB)	Dimensions (IN)			
9 1.00 BOOKS					•	بة	416	48.00X40.00X15.00			
CUSTOMS	BROKER INFO	RMAT	ION		HAZARDO	US N	IATERIA	CONTACTS			
Company Name:				Contact N				Phone:			
Contact Name:		Phone:		Email Add							
Vole: Trinet Transportation Inc. ncombe au transporteur engage les frais de transport suppléme nired carrier. The carrier's maxin	n'est pas responsable d 5. La responsabilité maxi ntaires sont payés. / Trir num liability is 2.00\$/lb. o	es pertes o male du tra et Transpo r 4,41\$/kg	ou dommages caus ansporteur est 2.00 ortation Inc. Is not li unless a declared	é(e)s à la car \$/lb ou 4,41\$ lable or loss /alue is show	galson, La respons /kg à moins qu'une of or damage to cai n on this bill of ladin	abilité de valeur d go, The g and ad	e la perte ou de éclarée ne figu liability for loss iditional freight	l'endommagement de la cargaison re au présent connaissement et que of or damage to cargo lies with the pald.			
Shipper: Marquis Imprimeur In		Carrier	BAULT	y SLC	4284CC	Consig GEO	gnee; RGETOWN	ITERMINAL			
Signature & Date: 31.	10-2023	Signati	ure & Date:	131/	10/23	l		•			
This is to certify that the above properly classified, described, p labeled, and are in proper cond according to the applicable regu	named materials are ackaged, marked and ition for transportation	placards was mad	acknowledges rece s. Carrier certifies e de avallable and or se guidebook or rev	ipt of package mergency res carrier has d	es and required sponse information and DOT emergency	Signat	ture & Date:				
Signature & Date: 31. This is to certify that the above properly classified, described, plabeled, and are in proper cond according to the applicable regular fransportation.	named materials are ackaged, marked and ition for transportation	Carrier a placards was made	acknowledges rece s. Carrier certifies e de avallable and or	ipt of package mergency res carrier has d	es and required sponse information e DOT emergency	l					

2023-10-31, 11:10

	TRANSPORT GUILBAULT INC 435, FARADAY, SAINTE-FDY, QC G1N 4G6 TEL: 418-681-9575 TELECOPIEUR: 418-681-9198 TRANSPORT GUILBAULT INC FACTURE - INVOICE 01 60-195831-3															
43 TI	35, FAI ÉL.: 41	RADAY, SAIN [*] 8-681-0575	TĘ-FOY, QC TÉLÉCOPIEU	G1N 4G6 R: 418-681-919	18				,,,,				01	60-19		
DATE		CONNAISSE			TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDAT	ON	A PERCEVOIR COLLECT	PORT PREF	PAYE PAID
011120	023	MAR07	33818	17445C	17	445	AT3	XXX	16	6	LTL	9765116	- 2	PORT	PA	Œ
EXPÉDITEUR	RETAI	DRESSE - SHIF	PPER AND A	DDRESS		CONSIC	NATAIRE	ET ADF	RESSE -	CONSI	GNEE AN	D ADDRESS		COMP	7718	393
MARQU:	IS	IMPRIM ENTREP	EUR II	NC.			ALIS 75 RU		RON'	TEN:	л <i>С</i>			B/L P/L	2311 2311	102
MONTM						MON	TREA	T E	KON	T E: 1/1			_	EXPE 9	7651	L16
]	PQ G5V	4T1						PÇ	Q H2H 2S	2	DEST TRAN	8	393
FACTURER A	AUTRE	QUE EXPÉDIT	TEUR/CONSI	GNATAIRE - BIL	L TO OTH	ER THA	N SHIPPE	R/CONS	GNER							
TRINE'	т т	RSPT C	(AM O	RQUIS	2101	ST	REGI	S				DOLLARD		S ORME	XUA	
JCT. ORIG.	TRANSPO	ORTEUR D'ORIGINE - I	CONNECTING CARR	IER N° PRO			PORTIC	N D'ORI	GINE			VALEUR DÉCLAR	ÉΕ	C.O.D.		
JCT. DEST.	TRANSPO	ORTEUR DESTINATION	N - BEYOND CARRII	R N° PRO			PORTIC	IN DESTI	NATIOI	N		NOTRE PART				
						- Incinc	1			0 1 1/	CODE	TALLY DATE I	<u> </u>	TOTAL		F/P
<u>от</u> ё 8	PC	c / 1	DESCRIPT PLT	ION		POIDS	224		MIVIE-A	S L-K	CODE	52.94	K		. 94	F/P
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		L 514 TIT CA		020 + INTER	TEUR		LIV	INT			LII	35.00		35	.00	
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8	DALE	TTES: CHEP =	- CPC	`= AIIT	RE =		224							152	. 92	
PALET'			- Crc	AU				 N° -	TPS/GS	ST						
								N°	TVQ/P	ST						
ERAIS ADMINIS	TRATIC	S DE 2% PAR MO	NS SUR TOUTE	S LES FACTHRES D	assées an	IOURS /2	16.82% ANA	ILIELI EME	-NT)	73	7295	T 0.T	A I	152	. 92	
ADMINISTRATIV	VE FEES	OF 2% PER MOI	NTH ON ALL IN	S LES FACTURES PA VOICES AFTER 30	DAYS (26.8	2% ANNU	JALLY)					TOT	AL	-		



Signature:	Sylvain

Information recueillie par / Information received by envoyé / sent : 2023/11/02 12:31



Signé par / Signed by: <u>sylvain</u>	_	No. Fac	eture / Probill: 601958313	
INFORMATION				
Expéditeur / Shipper		Cueillette / Pickup		
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01	
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09	
MONTMAGNY		Début/Start:	16:09	
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	16:19	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery		
NOVALIS		RDV/Appt.:	0000/00/00	
4475 RUE FRONTENAC			00:00 00:00	
MONTREAL		Date:	2023/11/02	
MONTREAL , PQ , H2H2S2		Arrivée/Arrival:	12:05	
Required Service Requis		Début/Start:	12:11	
HHL PCL LII		Départ/Departure:	12:12	
Facture / Probill	Ci	ot / Dill of Louisson	D 1/D 1 01	
Terme / Term Remorque / Trailer PPD 11853		nt / Bill of Lading R0733818	Bon commande / Purchase Order 463038	
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.	- Probill No.	Jct. Dest. Transporteur Desti	nation / Beyond Carrier No.Fact - Probill No	١.
DÉTAILS / DETAILS				
Qté/Qty Description	Poids/Weight	Dimensi	ons Guilbault	
8 PCS/1PLT	224 L	48x 40	x 16-	
ATTN LUC GAUVIN				
TEL 514 278 3020				
PETIT CAMION + INTERIEUR				
Facturé à / Bill to				
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS		
The state of the s	2.01 01 NE			_

/ Inside - Pickup

CII - Cueil. - Intérieure



BILL OF LADING NOT NEGOTIABLE

Trin	et Pro	# MARO	7_33818							(Date: 10/31/2023		
		SH	IP FROM			SHIP TO							
Name: Marq ı	ıis Impri	meur Inc.				Name: NOVALIS							
Addres 350 ru	-	ntrepreneurs	3		·	Address: 4475 RUE FRONTENAC							
City: Monti	magny			State: QC	Zipcode: G5V 4T1	City: State: Zipcode: QC H2H 2S2							
Tet: Reference/PO: 4182465666						Tel: Reference/PO:							
	t Name:			-	•	Contact Name:							
	le Gendr	<u>on</u>			·····	Luc Ga	uvin						
Ref: 26098	7					Ref:							
Specia	l Inst:	•				Special	Inst:		•				
		BILL T	HIRD PAR	ΓY			FI	REIG	HT CHAF	RGES	· · · · · · · · · · · · · · · · · · ·		
Name:				•		3rd part	/ Billing:	<	•	Declare	d Value: \$0		
Trinet Transportation Address:							_	_		Per:			
-	St-Regis	Blvd, Dollar	d-Des-Orme										
City: Dolla:	rd-Des-C	rmeaux		State: QC	Zipcode: H9B 2M9	Inside Delivery LTL Small Truck LTL							
\vdash					SPECIAL II	NSTRUC	TIONS						
					SHIPPING	INFORM	IATION						
Items:													
Qty. Pgk.	Handl. Unit		De	scriptio	on		NMFC No.	Cis.	Welght (LB)	C	limensions (IN)		
8	1.00 SKID	BOTTES							224.00	48.00	0X40.00X16.00		
\Box	CUS	TOMS BRO	KER INFO	RMA	TION		HAZARDO	US N	ATERIA	CONT	ACTS		
Compa	any Name:					Contact N	lame:			Phor	ne:		
	t Name:			Phone		Email Add	·						
Note: Tri incombe des frais hired car	inet Transpo au transpor de transpor rièr. The car	rtation inc. n'est pa leur engagé. La re t supplémentaires rier's maximum lia	as responsable de sponsabilité maxi sont payés, / Trin bility is 2.00\$/lb. o	es pertes male du t et Transp r 4.41\$/kg	ou dommages caus ransporteur est 2,00 ortation Inc. Is not I g unless a declared	ié(e)s à la ca S/Ib ou 4.41S lable for loss alue is show	rgalson. La respons vkg å molns qu'une of or damage to car n on this bill of ladin	abilité de valeur d rgo. The g and ad	la perte ou de éclarée ne figu- liability for loss ditlonat freight	e l'endomma re au préser rof or dama paid.	agement de la cargalso nt connaissement et qui ge to cargo lies with th		
Shippe Marq		meur Inc.	el	Carrie GUIL	BAULT	SLC, 1	74452	Consig NOV/	•				
	ure & Date	- • • •	2023	' "	ture & Date:	21/11	/23	Signat	ure & Date:				
lproperty	beled, and are in proper condition for transportation was made available and					sceipt or packages and required size emergency response information of carrier has de DOT emergency reverent document in the vehicle.							

TRANSPORT GUILBAULT INC FACTURE - INVOICE N° CIE N° FACTURE - PROBILL NO.										
435, FARADAY, SAINTE-FOY, QC G1N 4G6 TÉL:: 418-681-0575 TÉLÉCOPIEUR: 418-681-9198			FAC	JIONI	- II V V	JICL	01	60-195	832	2-1
	ANSFERT	FACT. TAR	F. ORIG.	DEST.	CATEG.	CONSOLIDATION	NC	A PERCEVOIR COLLECT	PORT P	PAYE AID
01112023 MAR0733819 17445C	17445	AT3 XX	X 16	6	LTL	9765116-	- 2	PORT	PAY	Έ
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS	CONSIG	NATAIRE ET A	DRESSE -	CONSI	GNEE AN	D ADDRESS		COMP 7	718	394
MARQUIS IMPRIMEUR INC. 350 DES ENTREPRENEURS	ECC	LE SEC				ALLEE		B/L 2	2311 2311	02
MONTMAGNY	MON	TREAL	PEL.	LE I.				EXPE97	'651	.16
PQ G5V 4T	1				P	Q H1H 3S3	3	DEST TRAN	8	393
FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO	OTHER THAI	N SHIPPER/CO	NSIGNER						-	
TRINET TRSPT C/O MARQUIS 210	01 ST	REGIS				DOLLARD		S ORMEA	XUX	
JCT. ORIG. TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER N° PRO		PORTION D'O	RIGINE			VALEUR DÉCLARI	ĒΕ	C.O.D.		
JCT, DEST. TRANSPORTEUR DESTINATION - BEYOND CARRIER N° PRO		PORTION DE	STINATIOI	V		NOTRE PART				
				a I. v	0005	T4101 DATE 1		TOTAL	—Т	
QTÉ DESCRIPTION			COMME-A	.S L-K		TAUX-RATE L-	·K	TOTAL	0.4	F/P
7 PCS / 1 PLT ATTN STEVE LAFRENIERE TEL 514 328 3250		238 L			UNT	52.94		52.	94	
		CARR	шт		CDD	00 00		14 00		
		CARB L	TL		CRB	28.30		14.98	,	
	60000									
P.O. 46	63042	MES	URE/I	ME.A.	SUREI	12 PC	C	-		
7 PALETTES: CHEP = CPC = AUTRE =		238 L						67.	92	
PALETTES - AUT	<u></u>		N° TPS/GS	ST						
		1	N° TVQ/P	ST						
EDAIS ADMINISTRATIES DE 292 DAR MOIS SUR TOUTES LES FACTURES DASSÉE	ES 30 IOURS (2)	3.82% ANNUELLI	MENT)	73	7295	TOT		67.	92	
FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉE ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS	(26.82% ANNU	ALLY)				TOTA	٦L_			



3011011011 ****			G.	
Signature: Pielle		rmation recueillie par / oyé / sent: 2023/11/0	Information received by	9
Signé par / Signed by: <u>pierre</u>	_	No. Factu	re / Probill: 601958321	
INFORMATION Expéditeur / Shipper		Cueillette / Pickup		
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01	
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09	
MONTMAGNY		Début/Start:	16:09	
MONTMAGNY, PQ, G5V4T1		Départ/Departure:	16:19	
Required Service Requis HHC PCC CII				
Destinataire / Consignee		Livraison / Delivery	0000/00/00	
ECOLE SEC CALIXA-LAVALLEE 11411 AVE PELLETIER		RDV/Appt.:	0000/00/00 00:00 00:00	
MONTREAL		Date:	2023/11/06	
MONTREAL , PQ , H1H3S3		Arrivée/Arrival:	11:58	
Required Service Requis		Début/Start:	11:58	
HHL PCL LII Facture / Probill		Départ/Departure:	11:59	
Terme / Term PPD 11853 Jot. Orig. Transporteur d'origine / Origin Carrier No. Fact. DÉTAILS / DETAILS Qté/Qty Description 7 PCS / 1 PLT ATTN STEVE LAFRENIERE TEL 514 328 3250	MAI	R0733819 Jct. Dest. Transporteur Destina	on commande / Purchase Order 463042 tion / Beyond Carrier No.Fact - Probil se Guilbault 22-	
Facturé à / Bill to				
TRINET TRSPT C/O MARQUIS IMP	2101 ST REG	GIS		



BILL OF LADING NOT NEGOTIABLE

Trinet Pro # MAR07_33819								C	Date: 10/31/2023			
SHIP FROM						SHIP TO						
Name: Marquis imprimeur inc.					Name: ÉCOLE SEC. CALIXA-LAVALLÉE							
Address: 350 rue des Entrepreneurs					Address: 11411, Avenue Pelletier,							
City: Montr	City: State: Zipcode: Montmagny QC G5V 4T1					City: State: Zipcor						
Tel: Reference/PO: 4182465666					Tel: 5143283250 Reference/PO:							
Contact Name: Claude Gendron					Contact Name: STEVE LAFRENIÈRE							
Ref: 26089	4				Ref:							
Specia	I Inst:				Special	inst:						
		BILL THIRD PAR	TY		- 	F	REIG	HT CHAR	RGES			
Name: Trinet	Transpo	rtation		· · · · · · · · · · · · · · · · · · ·	3rd party	/ Billing:		······································		d Value: \$0		
Addres	s:	Bivd, Dollard-Des-Ormo	eaux, F	19B 2M9	٦				Per:			
City: Dollar	d-Des-O	rmeaux	State: QC	Zipcode: H9B 2M9								
Ĺ				SPECIAL II	NSTRUC	TIONS						
,				GUILBAU	LT 60-195	832-1						
	······································			SHIPPING	INFORM	ATION						
Items:												
Qty. Pgk.	Handl. Unit	D	escriptic	on		NMFC No.	CIs.	Weight (LB)		imensions (iN)		
7	1.00 \$KID	BOÎTES						238.00	25.00	0X38.00X22.00		
	CUS	TOMS BROKER INFO	ORMA	TION		HAZARDO	US M	ATERIAL	CONT	ACTS		
Compa	ny Name:				Contact N	lame:			Phor	10:		
	t Name:		Phone		Email Address:							
Note: Tri incombe des frais hired car	net Transport au transport de transport rier. The carr	lation Inc. n'est pas responsable d our engagé, La responsabilité max supplémentaires sont payés. / Tri ler's maximum liability is 2.00\$/b. d	es pertes imalo du t net Transp or 4.41 \$/ k	ou dommages caus rensporteur est 2.00 portation Inc. is not i g uniess a declared	sé(e)s à la car 0\$/lb ou 4.41\$ llable for loss value is show	galson. La respons rkg à moins qu'une of or damage to cai n on this bill of ladin	abilité de valeur de go. The i g and ad	la perte ou de clarée no figur iability for loss ditional freight	l'endomma re au préser of er dama paid,	gement de la cargaiso it connaissement et qu ge to cargo lies with th		
Marq	Shipper: Marquis Imprimeur Inc. Carrier: GUILBAULT					SIL 1445 Consignee; ÉCOLE SEC. CALIXA-LAVALLÉE						
	ignature & Date: 01-11-2023 Signature & Date:					Signature & Date:						
This is to property labeled, according	certify that to classified, de and are in or	the above named materials are ascribed, packaged, marked and oper condition for transportation icable regulation of the Department	Carrier placan was m respon	r acknowledges Yece ds. Carrier certifies of ade available and of ise guidebook or rev	ipt of package emergency res r carrier has d verent docume	os and required sponse information e DOT emergency ent in the vehicle.						

			TRANSPO	RT G	UILE	BAUL'	r in	C	TUDI	E - INVO	NICE	N° CIE	N° FACTURE	- PROBIL	L NO.
	135, FAI	RADAY, SAINTE-FOY, QC 8-681-0575 TÉLÉCOPIE	G1N 4G6	38				FAC	JONI	11440	JICE	01	60-19	5833	3-9
DATE		CONNAISSEMENT - B/L		TRANS	FERT	FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATI	ON	A PERCEVOIR COLLECT	PORT F PREP	PAYE 'AID
01112	023	MAR0733821	17445C	17	445	АТЗ	XXX	16	8	LTL	9765116	- 2	PORT	PAY	Έ
EXPÉDITEU	R ET AI	DRESSE - SHIPPER AND	ADDRESS		CONSI	GNATAIR	E ET ADF	ESSE -	CONSI	GNEE AN	D ADDRESS		COMP '	7718	395
MARQU 350 D MONTM	ES	IMPRIMEUR I ENTREPRENEU Y	NC. JRS PQ G5V	4T1	539	FFUS: 9 BOU LAUI	JĹ. :	LEBI	EAU	A INC REAL) P(2	B/L 2	2311 2311 7651	L02 L02
		QUE EXPÉDITEUR/CON:						IGNER							
TRINE	ТТ	RSPT C/O MA	RQUIS	2101	ST	REG:	IS				DOLLARD		S ORME	XUA	
JCT. ORIG.	TRANSPO	RTEUR D'ORIGINE - CONNECTING CAI	RRIER N° PRO			PORTIO	ON D'ORI	GINE			VALEUR DÉCLARI	ÉΕ	C.O.D.		
JCT. DEST.	TRANSPO	RTEUR DESTINATION - BEYOND CAR	RIER N° PRO				ON DESTI				NOTRE PART				
QTÉ		DESCRI	PTION				L-K COI	MME-A	S L-K		TAUX-RATE L	-K	TOTAL		F/P
30	AT TE	S / 1 PLT TN LYNE BUS L 514 336 3 V DEJA PRIS	3941	2023	-	1109	L			UNT	52.94		52	.94	
						CARI	3 LT:	L		CRB	28.30		14.98	8	
			P.O.	463	046	,	ATI OT T	оп / х	ATT 3.		2 C D	a (a)	_		
30		TTES: CHEP = CF	PC = AUT	RE =		L109	L L	KE/I	YIE A	BUREI	36 PC	ان برد		. 92	
PALET	_		AU		L			TPS/GS TVQ/PS					V-1114		
50.40.40.40.4	OTD 4 T/F	DE 00. DAD MOIO CUD TOUT		Accéso no	IOLIDO (20.000/ 444	AU 101 1 5 8 4 6	****	73	7295			67	. 92	

TOTAL

FRAIS ADMINISTRATIFS DE 2% PAR MOIS SUR TOUTES LES FACTURES PASSÉES 30 JOURS (26.82% ANNUELLEMENT) ADMINISTRATIVE FEES OF 2% PER MONTH ON ALL INVOICES AFTER 30 DAYS (26.82% ANNUALLY)



			<u> </u>
Signature: C19		rmation recueillie par / oyé / sent: 2023/11/0	/ Information received by 2007
Signé par / Signed by: <u>simon</u>	<u> </u>	No. Factu	ure / Probill: 601958339
INFORMATION			
INFORMATION Expéditeur / Shipper		Cueillette / Pickup	
MARQUIS IMPRIMEUR INC.		Date:	2023/11/01
350 DES ENTREPRENEURS		Arrivée/Arrival:	16:09
MONTMAGNY		Début/Start:	16:09
MONTMAGNY , PQ , G5V4T1		Départ/Departure:	16:19
Required Service Requis HHC PCC CII			
Destinataire / Consignee		Livraison / Delivery	
DIFFUSION DIMEDIA INC.		RDV/Appt.:	0000/00/00
539 BOUL. LEBEAU			00:00 00:00
ST LAURENT (MONTREAL)		Date:	2023/11/02
MONTREAL , PQ , H4N1S2		Arrivée/Arrival:	11:58
Required Service Requis		Début/Start:	11:58
HHL PCL LII		Départ/Departure:	12:00
Facture / Probill			
Terme / Term Remorque / Trailer PPD 12508V		t / Bill of Lading B R0733821	Bon commande / Purchase Order 463046
Jct. Orig. Transporteur d'origine / Origin Carrier No. Fact.	Probill No.	Jct. Dest. Transporteur Destina	ition / Beyond Carrier No.Fact - Probill No.
DÉTAILS / DETAILS			
Qté/Qty Description	Poids/Weight	Dimension	ns Guilbault
-	1109 L		
30 PCS / 1 PLT ATTN LYNE BUSSIERES	1109 L	48x 40x	32-
TEL 514 336 3941			
RDV DEJA PRIS 02/11/2023			
KDV DESA FKIS 02/11/2025			
Facturé à / Bill to			
TRINET TRSPT C/O MARQUIS IMP	2101 ST RE	GIS	



BILL OF LADING NOT NEGOTIABLE

Trin	et Pro	# MAR07_33821							Date: 10/31/2023				
SHIP FROM					SHIP TO								
	uis Impri	meur inc.			Name: DIFFUSION DIMEDIA								
		ntrepreneurs			Address: 539 Boulevard Lebeau								
City: Mont	Montmagny QC G5V 4T1					City: State: Zipcode: QC H4N 1S2							
Tel: Reference/PO: 4182465666 Contact Name: Claude Gendron					Tel: 5143363941 Reference/PO:								
					Contact Lyne B	Name: lussieres	1						
Ref: 25620)4				Ref:								
Specia	I Inst:	·			Special	Inst:							
		BILL THIRD PAR	TY			F	REIG	HT CHAR	RGES				
Name: Trinet	t Transpo	ortation			3rd party	/ Billing:	X		Declared Value: \$0				
Addres 2101		Blvd, Dollard-Des-Orme	eaux, H	19B 2M9					Per:				
City: Dolla	rd-Des-C	rmeaux	State: QC	Zipcode: H9B 2M9									
				SPECIAL II	NSTRUC	TIONS							
		RENDEZ-VOUS	PRIT F	OUR LIVRAIS	SON LE 0	2-11 - GUILB	AULT	60-195833	-9				
				SHIPPING	INFORM	IATION							
items:													
Qty. Pgk.	Handl. Unit	De	scriptio	on		NMFC No.	Cis.	Weight (LB)	Dimensions (IN)				
30	1.00 SKID	BOITES						1109.00	48.00X40.00X32.00				
	cus	TOMS BROKER INFO	ORMA	TION		HAZARDO	US N	IATERIAL	CONTACTS				
Compa	any Name:				Contact N	lame:			Phone:				
	t Name:		Phone		Email Address:								
Note: Tri incombo des frais hired ca:	inet Transport au transport de transpor rrier. The can	rtation inc. n'est pas responsable d teur engagó. La responsabilité max t supplémentaires sont payés. / Tri rier's maximum liability is 2.00\$/lb. o	es pertes imale du t net Transp or 4,41 \$ /kg	ou dommages caus ransporteur est 2.00 ortation Inc. is not in juniess a declared	é(e)s à la car IS/Ib ou 4.41\$ lable for loss falue is show	galson. La respons kg à moins qu'une of or damage to ca n on this bill of ladin	abilité de valeur d rgo. The g and ad	e la perte ou de éclarée ne figur flability for loss iditional freight p	l'endommagement de la cargalso re au présent connaissement et qu of or damage to cargo iles with th paid.				
Marq	Shipper: Marquis Imprimeur Inc. Carrier: GUILBAULT				SLC 7445C Consignee; DIFFUSION DIMEDIA								
Signat	gnature & Date: 01-11-2023 Signature & Date: 0				0 / 1 /23 Signature & Date:								
This is to properly labeled, according	This is to certify that the above named materials are properly classified, described, packaged, marked and abeled, and are in proper condition for transportation according to the applicable regulation of the Department of Transportation.				mergency res carrier has d	ponse information e DOT emergency							