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HI-WAY G	P.O. BOX 2020 DRUMHELLER, AB TOJ 0Y0 PHONE 1 (800) 622-5800					REF. # DATE								
TO CONSIGNEE GST # R 102366648					2 FROM SHIPPER									3
ADDRESS					ADDRESS							E	ARC(	ODE MENT
CITY PROVINCE POSTAL CODE				ODE	CITY PROVINCE POSTAL CODE							_ P	LAUL	
Telephone					TELEPHONE									
INTERLINE			SPECIAL NOTAT	IONS										
NUMBER AND TYPE OF PKGS.	D.G.	PARTIC	ULARS OF GOODS, MAF	KS AND	EXCEPTIONS WEIGHT QUALITY FLOW SYSTEM									
						KG	LB		CHKR INIT	UNIT	PIECE COUNT	FRI	IGHT C	HARGES
								UNLOAD BY					LECT	PREPAID will be collect
_								RELOAD BY				L	nless marke	d prepaid.
4			5			- 6		UNLOAD				Q	Quotati	···
								RELOAD				C.(	D.D. SHII	PMENTS
								BY EXCEPTIONS	<u> </u> 		CHKR	AMOUNT	\$	10
											INIT	C.O	D. FEE LECT	C.O.D. FEE
														ALUATION
												\$		
TOTAL NO. OF PIECES		SION OF SHI	PMENT	TOTA	L CUBIC FEET	TOTAL WE	IGHT					In the event of	any loss or dai	mage whatsoever, unless a carrier shall be liable for the
UNIQUATED MEDICINATION OF STREET						DEDOON	AL 55		. DE DDE	DAID AT		lesser of: (i) \$2.00 per po lost or.	und of the weig	ght of the item damaged or
UNCRATED MERCHANDISE CARRIED AT OWNERS RISK OF DAMAGE  PERSONAL EFFECTS TO BE PREPAID AT OWNERS RISK OF DAMAGE								(ii) the actual val	char					
MARK WITH "X" TO DESIGNATE I	DANGERO			ARTME	NT OF TRANSPO PG	RTATION RE	GULATI	ONS.				RATE		
EMERGENCY 24 HR. PHONE NUMBER REQUIRED ON ALL DANGEROUS GOODS SHIPMENT. PH.									13	3				
PLACARDS REQUIRED  YES NO TYPE OF PLACARD: YES NO								COD						
NOTICE OF CLAIM		TPE OF PL	_AOAND						EO L			OTHER		
a) No carrier is liable for loss, dar goods and the estimated amount of												GST		
the delivery of the goods, in the ca b) The final statement of the clain			3, (,		·		v of the	naid freight h	ill			TOTAL		
SHIPPER 14		PICKUP DRIVER	15		UNIT	C	ONSIGNI IGNATUF	EE 4	6		DELIVERY DRIVER	17		UNIT
PRINT NAME PER		DATE		TIME	1	PI	RINT NA				DATE		TIME	1