

PROFORMA INVOICE

NAME AND ADDRESS OF EXPORTER WestRock Company of Canada Corp. A-15400 Sherbrooke Est, Montreal, Quebec H1A 3S2		U.S CUSTOMS CLEARANCES BY: BAY BROKERAGE INC. FILER CODER BGK		CUSTOMER NO.	
SHIP FROM: Compagnie WestRock du Canada Corp 285, St-Louis,Warwick, QC,J0A 1M0		(315) 482-6161 (315) 482-6161 BAYFAX@BAYBROKERAGEUS.COM PAPS CHECK WWW.BAYBROKERAGEUS.COM		RELEASE NUMBER 271000143914	
SHIP TO: WESTROCK MISSISQUOI MILL 369 MILL STREET SHELDON SPRING, VT (05485)		LOCAL CARRIER CANADA CARTAGE EXPORTING CARRIER CANADA CARTAGE PORT OF ENTRY		NOTIFY Importer of record: WestRock CP LLC 1000 Abernathy Rd. NE Atlanta, GA 30328 EIN: 36-204125600	
BUYER WESTROCK MISSISQUOI MILL 369 MILL STREET SHELDON SPRING, VT (05485) IRS :		Ship from (Country/Province)		Destination (Country/Province)	
Notes Skids : 24 Rolls : Shipping Weight : 43,500 Pds		TERM OF SALE * DELIVERY * PAYMENT, ETC. FOB <input type="checkbox"/> PLANT <input checked="" type="checkbox"/> DESTINATION OR <input type="checkbox"/> CUSTOMS CHGS TO: <u>X</u> OTHER <input type="checkbox"/> CONSIGNEE PARTIES TO THE TRANSACTION ARE :RELATED COUNTRY OF ORIGIN : CANADA			
		DATE OF SALE :12/02/21		CURRENCY OF SALE U.S.	

COUNTRY ORIGINE	*HS CODE:	DESCRIPTION	NET WEIGHT	QUANTITY	UNIT PRICE	TOTAL
CANADA	4707900000	MIXED CARTON WASTE, BALE	43 500	24	75.000	1 800.00

TOTAL Freight Charges - \$ <u>0.00</u>		Containerized <input type="checkbox"/> Yes <input type="checkbox"/> No		IF GOODS NOT SOLD, STATE REASON FOR EXPORT (LOAN,REPAIR,PROCESSING,ETC.)			
PREPAID <input type="checkbox"/> PREPAID & CHG <input type="checkbox"/> COLLECT <input checked="" type="checkbox"/>							
Mode of transportation from of exit <input checked="" type="checkbox"/> ROAD <input type="checkbox"/> RAIL <input type="checkbox"/> WATER <input type="checkbox"/> AIR <input type="checkbox"/> OTHER							
I HEREBY CERTIFY THE INFORMATION GIVEN ABOVE AND ON THE CONTINUATION SHEET(S) IF ANY, IS TRUE AND COMPLETE IN EVERY RESPECT. GIVE FIRM NAME AND ADRESSE IF DIFFERENT FROM EXPORTER BOX DATE Name of preparer: <u>MELISSA BÉDARD</u> SIGNATURE : <u>Melissa Bédard</u> STATUS <input type="checkbox"/> OWNER <input checked="" type="checkbox"/> AGENT				PACKAGING	\$	MISC TRANS	\$
				OCEAN / INTL	\$	COMMISSION	\$
				DOMESTIC FRT	\$	CONTAINER	\$
				INSURANCE	\$	ASSISTS	\$
				INVOICE TOTAL		1 800.00	