

1. Export / Shipper		2. Date of Direct Shipment to Canada / Date d'expédition directe vers le Canada			
		3. P.O. No. (Other references if applicable) Nbre de commande de l'acheteur (Autres références s'il y a lieu)			
		4. Currency of Settlement / Devises du paiement			
5. Consignee (Name and Address) / Destinataire (Nom et adresse)		6. Purchaser's Name and Address (If other than Consignee) Nom et adresse de l'acheteur (S'il diffère du destinataire)			
7. Canadian Customs Broker (Name and Address) Agent canadien en douane (Nom et adresse)		8. Canadian Customs Clearance Location Installation de dédouanement	9. Country of Transshipment Pays de transbordement		
		10. Country of Origin of Goods Pays d'origine des marchandises	IF SHIPMENT INCLUDES GOODS OF DIFFERENT ORIGINS ENTER ORIGINS AGAINST ITEMS IN FIELD 12. / SI L'EXPÉDITION COMPREND DES MARCHANDISES D'ORIGINES DIFFÉRENTES, PRÉCISER LEUR PROVENANCE EN ZONE 12.		
11. Transportation: Give Mode and Place of Direct Shipment to Canada Transport: Préciser mode et point d'expédition directe vers le Canada					
12. Conditions of Sale and Terms of Payment Conditions de vente et modalités de paiement					
13. No. of Pkgs. Nbre de colis	14. Specification of Commodities (Kind of Packages, Marks and Numbers, General Description and Characteristics, i.e. Grade, Quality) Designation des articles (Nature des colis, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité)	15. Quantity (State Unit) Quantité (Préciser l'unité)	16. Shipping Weight (lbs) Poids d'expédition (livres)	Selling Price / Prix de vente	
				17. Unit Price Prix unitaire	18. Total
21. If any fields 1 to 20 are included on an attached commercial invoice, check this box Si toute renseignements relativement aux zones 1 à 20 figure sur une ou des factures commerciales ci-attachées, cocher cette case <input type="checkbox"/>		19. Total Weight / Poids Total		20. Invoice Total Total de la facture	
		Net	Gross / Brut		
Commercial Invoice No. / N de la facture commerciale _____		22. Vendor / Seller (If other than Exporter)			
23. Originator (Name and Address) / Expéditeur d'origine (Nom et adresse)		24. Departmental Ruling (If applicable) / Decision du Ministère (S'il y a lieu)			
25. If fields 26 to 28 are not applicable, check this box Si les zones 26 à 28 sont sans objet, cocher cette case <input type="checkbox"/>		26. If included in field 20 indicate amount: Si compris dans le total à la zone 20, préciser: (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada. Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada. _____ (ii) Costs for construction, erection and assembly incurred after importation into Canada. Les coûts de construction, d'érection et d'assemblage après importation au Canada. _____ (iii) Export packing. Le coût de l'emballage d'exportation. _____			
27. If not included in field 20 indicate amount: Si non compris dans le total à la zone 20, préciser: (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada. Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada. _____ (ii) Amounts for commissions other than buying commissions. Les commissions autres que celles versées pour l'achat. _____ (iii) Export packing. Le coût de l'emballage d'exportation. _____		28. Check (if applicable): Cocher (s'il y a lieu): <input type="checkbox"/> (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser. / Des redevances ou produits ont été ou seront versés par l'acheteur. <input type="checkbox"/> (ii) The purchaser has supplied goods or services for use in the production of these goods. / L'acheteur a fourni des marchandises ou des services des marchandises.			

EXPORTER / SHIPPER		BILL OF LADING NUMBER	CONTAINER NUMBER
CONSIGNEE TO		EXPORT REFERENCES	
		FORWARDING AGENT	
NOTIFY PARTY / INTERMEDIATE CONSIGNEE		POINT (STATE) OF ORIGIN OR FTZ NUMBER	
		DESTINATION AGENT	
* PRE-CARRIAGE BY	* PLACE OF RECEIPT BY PRE-CARRIER	CO-LOADED WITH	
VESSEL	PORT OF LOADING / EXPORT		
FOREIGN PORT OF UNLOADING	* PLACE OF DELIVERY BY ON-CARRIER	CONTAINERIZED <input type="checkbox"/> YES <input type="checkbox"/> NO	

CARRIER'S RECEIPT		PARTICULARS FURNISHED BY SHIPPER		
MARKS AND NUMBERS	NO. OF PKGS	DESCRIPTION OF PACKAGES AND GOODS	GROSS WEIGHT	MEASUREMENT

* APPLICABLE ONLY WHEN DOCUMENT USED AS A COMBINED TRANSPORT BILL OF LADING

DECLARED VALUE (For AD VALOREM purposes only).
(Refer to clause 5 on attached hereof) in US \$

In accepting this bill of lading, any local customs or privileges to the contrary notwithstanding, the shipper, consignee and owner of the goods and the holder of this bill of lading, agree to be bound by all the stipulations, exceptions and conditions stated herein whether written, printed, stamped or incorporated on this form or attached hereof, as fully as if they were all signed by such shipper, consignee, owner or holder.

In witness whereof three (3) bills of lading, all of this tenor and date have been signed, one of which being accomplished, the others to stand void.

MAINFREIGHT

BY _____ FOR THE CARRIER

_____ DATED

FREIGHT AND CHARGES			
DESCRIPTION OF CHARGE	RATE	PREPAID	COLLECT
TOTAL PREPAID			
TOTAL COLLECT			