



DATE: _____

DISPATCH PH: 780-545-1455

| 5507 55 ST, Bonnyville, AB, T9N 0E3

| WEB: DEFENDERLTL.COM

SHIPPER

CONSIGNEE

NO. OF PKGS.	DESCRIPTION OF ARTICLES	WEIGHT	RATE	FREIGHT CHARGES
	TDG (Transportation of Dangerous Goods) UN Number: _____ Packing Group: _____ Shipping Name: _____ Total Quantity: _____ Primary Class: _____ Number of Packages: _____ Subsidiary Class: _____ Shipper Name & Number: _____ Consignee Name & Number: _____			
PREPAID ☐		COLLECT ☐		GST # 745099150RT0001
		TOTAL ➡		

NO CLAIM WILL BE ALLOWED AFTER 30 DAYS FROM ABOVE DATE AND MUST BE
ACCOMPANIED BY ORIGINAL FREIGHT BILL OF LADING AND ORIGINAL OR CERTIFIED
COPY OF INVOICE

RECEIVED IN GOOD ORDER

SHIPPER'S SIGNATURE _____

WHITE - OFFICE

CANARY - OFFICE

PINK - CONSIGNOR

GOLDENROD - CONSIGNEE

SIGNATURE

PRINT NAME