



MUSKOKA TRANSPORT LIMITED

BARRIE 431 - 8551
TOLL FREE 1 - 800 - 461 - 5802

STRAIGHT BILL OF LADING
- ORIGINAL -
NON - NEGOTIABLE

BRACEBRIDGE 645 - 4481
TOLL FREE 1 - 800 - 461 - 5808

At _____ (Point of Origin) Date _____

Shipper _____

Received at point of origin on this date from the shipper, the goods herein described, in apparent good order, except as noted (contents and conditions of contents of packages unknown) marked, consigned, and destined as indicated below, which the carrier agrees to carry and deliver to the consignee at the destination if on its own route; otherwise to deliver to another carrier on the route to the destination.

It is agreed as to each carrier of all or any of the goods over all or any portion of the route to destination, and as to each party at any time interested in all or any of the goods, that every service to be performed hereunder shall be subject to all the conditions, whether printed or written, herein contained, including conditions on back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

SEE CONDITIONS ON REVERSE

CONSIGNEE _____ DESTINATION _____
CONSIGNEE'S STREET ADDRESS _____ ROUTE _____

NO. OF PIECES	DESCRIPTION OF GOODS AND SPECIAL MARKS	WEIGHT SUBJECT TO CORRECTION	RATE	AMOUNT	FREIGHT CHARGES
					PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>
					Freight Charges will be Collect unless marked Prepaid
					SHIPPER'S C.O. D. Amount \$ _____ PREPAID <input type="checkbox"/> FEE COLLECT <input type="checkbox"/>

SHIPPER _____	MUSKOKA TRANSPORT LIMITED (AGENT)	P / U # _____
RECEIPT FOR PAYMENT OF CHARGES "COLLECT" OR "PREPAID"		TRACTOR # _____ TRAILER # _____
		PRO. # _____
		TRIP SHEET # _____

Received the sum of (\$) _____ in payment of above charges

Date _____ Carrier's Agent _____

RECEIVED IN APPARENT GOOD ORDER (except as noted) CONSIGNEE _____	DECLARED VALUE OF SHIPMENT \$ _____ Maximum Liability of \$3.30 per Kilogram unless declared value states otherwise (See Conditions 9 and 10 on back)
PER _____	

see CONDITIONS on original bill of lading