



**POLARIS TRANSPORT CARRIERS INC**  
 7099 TORBRAM ROAD  
 MISSISSAUGA, ON L4T 1G7  
 Phone: 905 671-3100 Fax: 905 671-4600

**BILL OF LADING**

**SHIPPER  
PLEASE NOTE**

FREIGHT CHARGES ARE PREPAID ON THIS  
BILL OF LADING UNLESS MARKED COLLECT

FREIGHT CHARGES:

PREPAID      COLLECT

DATE SHIPPED (DD/MM/YYYY)

27/02/2026

SHIPPER (FROM) VERATEX INC	CONSIGNEE (TO) TRULIFE	TRACKING NO. P3131655
ADDRESS 600 W ACADEMY ST ZIP PC	ADDRESS 39 E DAVIS ST	ORIGINAL BILL OF LADING NO.
CITY, PROVINCE/STATE POSTAL/ZIP CODE CHERRYVILLE, NC 28021	CITY, PROVINCE/STATE POSTAL/ZIP CODE TRENTON, ON K8V 4K8	CUSTOMER ORDER NO.
SHIPPER'S PHONE NO. Ext	CONSIGNEE'S PHONE NO. Ext	PURCHASE ORDER NO. 40677

**BILL THIRD PARTY FREIGHT CHARGES TO**

**AVERITT EXPRESS INC.**

PLACE PRO-BILL HERE

**DESCRIPTION**

NUMBER SHIPPING UNITS	HM*	KIND OF PACKAGING, DESCRIPTION OF ARTICLES, SPECIAL REMARKS AND EXCEPTION	NMFC NO.	CLASS	WEIGHT (LBS) <small>Subject to connections</small>
1 PLT		FABRIC  Dims: 066-045-042  Bill of Lading :SI                      13565202703019 ***** IMPORTANT ***** PLEASE FAX CUSTOMS DOCUMENTS TO (905) 671-9428 OR EMAIL TO <a href="mailto:customs@polaristransport.com">customs@polaristransport.com</a>  <b>PLEASE ATTACH THIS BILL ALONG WITH (YOUR ORIGINAL) BILL OF LADING</b>			785.00LB

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO ALL APPLICABLE LAWS AND REGULATION.

SUBJECT TO TARIFF PTG 100 TERMS AND CONDITIONS AS LISTED ON THE POLARIS TRANSPORTATION GROUP WEBSITE [polaristransport.com](http://polaristransport.com) or can be viewed digitally [here](#).

ALL PARTIES ATTENTION is drawn to ITEM 33 of TARIFF PTG 100. Carrier liability will be limited to CAD \$2.00 per pound (CAD \$4.41 per KG) to a maximum of CAD \$50,000 unless a valuation is declared pursuant to ITEM 33 of TARIFF PTG 100.

**HAZARDOUS MATERIALS  
EMERGENCY CONTACT NO.**

SHIPPER SIGNATURE

X

POLARIS TRANSPORT CARRIERS INC.

X

CONSIGNEE'S SIGNATURE - RECEIVED IN GOOD ORDER

X

PRINT - CONSIGNEE NAME

X

DATE RECEIVED (DD/MM/YYYY)