

TO: Kasim Shahid **FROM:** Parminder Gill
ATTN: Kasim Shahid **PHONE:** 1-800-388-9479 **EXT.** 239
FAX: **FAX:** 905-362-0104
DATE: Feb20/2009 **NUMBER OF PAGES:** 1

PRO-FORMA INVOICE - ORIGINAL B3 INVOICE TO FOLLOW BY MAIL

SHIPPER:

OUR TRANSACTION NUMBER:

13003400074508

TOTAL COST

CHARGES	
DUTY & TAXES	
GST	
PST	
HST	
BROKERAGE FEES	*
RMD	*
NAFTA MAINTENANCE	*
BUSINESS NUMBER FEE	*
PERMIT	*
DISBURSEMENT FEE	*
MANDATORY H.S. FEE	
GST ON FEES	
*SUBJECT TO GST	

CDN \$
198.32
175.19
68.75
9.71
4.25
4.14
\$ 460.36

GRAND TOTAL (CDN \$):

PLEASE NOTE THAT PAYMENT IS REQUIRED PRIOR TO FEDEX TRADE NETWORKS SUBMITTING THE CLEARANCE ENTRY TO THE CANADA BORDER SERVICES AGENCY

SHIPMENT IS HELD AT THE



TORONTO CUSTOMS GATEWAY

Please complete your Credit Card Information below and fax sheet back to (905) 362-0104



Card Number & Expiry Date:	Month / Year EXPIRY /
Card Holder's Name (PLEASE PRINT)	
Card Holder's Signature	
CARDHOLDER WILL PAY TO THE ISSUER OF THE CHARGE CARD PRESENTED HERewith THE AMOUNT STATED HERE ON IN ACCORDANCE WITH THE ISSUER'S AGREEMENT WITH THE CARDHOLDER.	