

WAYBILL ORDER & RE-ORDER FORM

For British Columbia Fax to: 604-523-3694 or e-mail bcwaybillprint@greyhound.ca

SHIPPER'S NAME AND ADDRESS TO BE PRINTED ON WAYBILLS (MAXIMUM 24 CHARACTERS)		
COMPANY NAME:		
COMPANY ADDRESS:		
CITY: PROV: <u>AB</u>	POSTAL CODE:	
PHONE:		
ACCOUNT #:		
CONSIGNEE'S DESTINATION ADDR	ESS	
COMPANY'S NAME:		
COMPANY'S ADDRESS:		
CITY:	PROV:	POSTAL CODE:
PHONE:		
QUANTITY REQUIRED		
PREPAID WAYBILLS:		
COLLECT WAYBILLS:		
Requested By:		
Contact Name:	Telephone:	email:
The turn around time is 10 business days.		