Document Form

Document Form

Shipped From DDDDD
Company Name (Optional) Contact Personal Sender Email Address Street Address
City □□ * Province □ Ontario Postal Code □□ □ Country □□ Canada ▼ Telephone Number □□□□□□□ *
Ship To DDDD
Company Name (Optional)
Contact Personal
Street Address
City *
Province *
Postal Code □□ (HK please type "0000")*
Country □□ * China ▼
Cellphone Number

Shipping Details □□□□
-+
Customs Clearance Waiver & Customer's Acknowledgement: I acknowledge that the Description of Contents and Value recorded above are truthful and complete. I further acknowledge that duty and taxes may be assessed to the Consignee by the Customs Office in the country of destination at their sole discretion.
$\Box I$ certify that I agree to the terms and conditions included on this form, and that the stated contents and their value as recorded in the spaces above are truthful and complete.
Customer Signature Date Date
Send
S.F. Express Courier Services [][][]
Fast & reliable parcel, document, and luggage delivery
For Details □□