

Tel.: (905) 895-0175 FAX: (905) 898-7636 www.barcodespro.com

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<u>LABELS</u> -

ORDER FORM

<u>PAPS/ACE SCN #'s (U.S.)</u>	<u>or PARS, Cargo Control (Canada)</u>	
1.) PLEASE PRINT:		<u>Quantity</u>
PAPS/ACE SCN# Labels	- \Box x1 each # \Box x2 each # \Box x3 each # or sets	
or \Box PARS Labels -	\Box x1 each # \Box x2 each # \Box x3 each # or <u>sets</u>	
CARGO CONTROL / R		
2.) MY SCAC CODE IS (U.S.):	(4 Letters - PAPS)	
MY CARRIER CODE IS (Can	nada): (4 numbers/letters)	
3.) Company Name to Appear on T (Name on PAPS and PARS only)	Label Is:(PAPS Name approx. 20 letters only)	
4.) THE STARTING NUMBER W		
(If ordering for the first time, the starti	ng number could be 001001)	
(If this is a repeat order, the starting nu	umber will carry on from the last one ordered.)	
FORMS - PLEASE PRINT C	LEARLY:	<u>Quantity</u>
1.) 🗌 <u>Cargo Control / RMD - A8A-B</u> (C	anada) Pre-Printed with Sequential Barcode & Carrier Code Forms _	
2.] MY CARRIER CODE IS (Cargo C		
3.] THE STARTING NUMBER WIL (If ordering for the first time, the st		
(If ordering for the first time, the st (If this is a repeat order, the starting number	will carry on from the last one ordered.)	
2.) Cargo Control - A8A-B (Canada)	Blank 5-part Forms (To be used with Barcode Labels)	
3.) 🗌 <u>7512B (A8B) U.S. / Canada Trans</u>	it Forms - 4 part Carbon Forms	
4.) NCAP/FAST Release Forms	-	
5.) \Box <u>Trip Cost ENVELOPES</u> (9"x12")	- <u>Envelopes printed 2 sides</u>	
Other Forms etc.		
□ Visa Card #		
MasterCard		
AmEx		
Security Code	_ Expiry_	
Signature		
YOUR COMPANY NAME:		
TOUR COMPANY NAME		
YOUR COMPANY ADDRESS:		
(for Shipping & Billing)		
Demons to Contracts		
Person to Contact: —		
YOUR PHONE NUMBER:		
YOUR FAX NUMBER:		
e-mail address:		January 2020

Return to: email - jon@barcodespro.com - FAX (905) 898-7636 - Attn. Jon. Williams