

# Multimodal Transport Forwarder's Certificate of Receipt

Forwarder

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Shipper

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Consignee

Name: \_\_\_\_\_

Address: \_\_\_\_\_

**Place of Receipt:**

\_\_\_\_\_

**Date of Receipt:**

\_\_\_/\_\_\_/\_\_\_

**Place of Delivery:**

\_\_\_\_\_

**Destination:**

\_\_\_\_\_

**Transport Mode(s):**

\_\_\_\_\_

**Reference No.:**

\_\_\_\_\_

Goods Description

Marks & Nos.	Number & Type of Packages	Description of Goods	Gross Weight	Measurement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Remarks

<div>_____ _____</div>
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**Date:**

\_\_\_/\_\_\_/\_\_\_

**Signature & Stamp of Forwarder**

\_\_\_\_\_

