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| **Certificate of Origin / Certificat d’origine**  Name of Authorized Trade Association  THE BRITISH COLUMBIA CHAMBER OF COMMERCE | | | |
| **Exporter**  Name and address of company shipping the goods | **Consignee**  Name and address of company receiving the goods | | |
| **Numbers**  Optional – can be used to note corresponding packing slips or invoices | **Particulars of Transport (where required)**  Optional- by air, sea, train, truck etc., can be very detailed (e.g., Give airline & flight number, or can be left blank) | | |
| MARKS & NUMBERS; NUMBER & KIND OF PACKAGES.  DESCRIPTION OF THE GOODS | | QUANTITY | GROSS WEIGHT |
| Information similar to that on invoices; if it is lengthy, summarize and refer to attached invoice by number. | |  |  |
| The undersigned has examined the Manufacturer`s invoice or Shipper`s Affidavit concerning the origin of the merchandise, and according to the best of his/her knowledge and belief finds that the products named originated in the country specified.  Signature of chamber representative  Authorized Signature Date  Print Name | We agree to indemnify, defend and hold harmless the British Columbia Chamber of Commerce and its officials from and against all demands, claims, actions or causes of action, proceedings, assessments, losses, damages, liabilities, costs and expenses of every nature and kind (including without limitation, interest, penalties and reasonable legal fees on a solicitor and his own client basis) imposed upon or incurred by the British Columbia Chamber of Commerce, directly or indirectly, by reason of, resulting from or relating to this certification.  It is hereby certified that the above-mentioned goods originate in:  Country or countries of origin of the goods  Country  City and date  Place and Date  Authorized Signature  Print Name | | |
| On the day of , 20 , the applicant has   * proved to me, on the basis of satisfactory evidence, to be the person whose name appears as signatory on this Certificate. * acknowledged that he/she executed same as his/her authorized capacity and * sworn before me as to the accuracy of information contained in this document   SIGNATURE AND SEAL OF NOTARY ETC. IF THE CHAMBER DOES NOT HAVE A LETTER ON FILE.  Signature Date  Print Name Seal |