

**Payment Deferral Request**

Name/Company Name: .

Contract #: Deferral Date: .

Signature: . Date: . .

We will mail your post-dated cheque to you within 2 weeks of delivery unless requested otherwise.

DO NOT MAIL UNTIL DEFERRAL DATE (CHECK BOX)

**Split Payment Request**

Name on producer contract: .

Contract #: .

Percentage of tonnage split: .

Signature: . Date: . .

Name of split receiver: .

Address of split receiver: .

 .

Percentage of tonnage split: .

Signature: . Date: . .