



## CARGO INSURANCE

\_\_\_\_\_ Yes, I request cargo insurance protection on all shipments handled by A1 Worldwide Logistics, Inc.

\_\_\_\_\_ No, I do not want cargo insurance protection on all shipments handled by A1 Worldwide Logistics, Inc.

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

**Contact Name :** \_\_\_\_\_

**Title :** \_\_\_\_\_

**Phone Number :** \_\_\_\_\_

**Email :** \_\_\_\_\_

**Signature :** \_\_\_\_\_

**Date:** \_\_\_\_\_