

Print the label with the Return location address and staple it to the Bill of Lading.

Company Name: _____
FULL Return Address (City, State/Province, Zip code):

Contact Name: _____
Contact Phone Number: _____

**Global Resale / DCR Systems Group
c/o IBM FINANCING / GARS
27 Staples Ave, Unit 1-3
Richmond Hill, ON
L4B 0B5**

Attn: IBM GARS