**Exhibit “A”**

**Great Lakes Canada Request for Temporary Assignment**

**Assignor Information: Assignee Information:**

Assignee:       Assignor:

Assignor MNEC:       Assignee MNEC:

Contact Person:       Contact Person:

Telephone:       Telephone:

Fax:       Fax:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **GLC FT Contract #** | **Start Date****Of TA** | **End Date****Of TA** | **Primary Delivery Point** | **Assigned Quantity (GJ/day)** |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |