

## PO BOX 279 DELPHOS, OH 45833 LIMITED RELEASE OF LIABILITY

I,		acting as authorized agent for the business of
	(Printed Name)	
Company Name:		
Address:		
City, State, Zip:		
	K&M Tire Inc. and it's representative following listed location:	es from any liability that arises from leaving the
		with K&M Tire for such deliveries and will hold iveries that are lost or stolen in my absence.
I,	have read and ag (Printed Name)	ree to the above mentioned Limited Release of Liability.
Signature:		
Job Title:		
Date:		