SHIPPER'S LETTER OF INSTRUCTION										
SHIPPER (NAME AND ADDRESS INCLUDING ZIP CODE)				I	INLAND CARRIER SHIF		DATE	PRO N	IUMBER	
			ZIP CODE							
EXPORTER EIN NO. PARTIE		PARTIES TO	TRANSACTION	Ī						
ULTIMATE CONSIGNEE:										
INTERMEDIATE CONSIGNEE:										
FORWARDING AGENT:					POINT (STATE) OF ORIGIN COUNTRY OF L OR FTZ NO. DESTINATION:				JLTIMATE	
SHIPPER'S REF NO. DAT		DATE:	DATE:		SHIP VIA					
SCHEDULE B DESCRIPTION OF COMMO					ODITIES			VALUE		
D/F	MARKS, NOS., AND KIND OF PACKAGES SCHEDULE B NUMBER		QUANTITY - SCHEDULE I UNIT(S)		SHIPPING WEIGHT (Kilos)	SHIPPING WEIGHT (Pounds)		CUBIC METERS	(U.S. dollars, omit cents) Selling price or cost if unsold	
LICENSING NUMBER OR SYMBOL ECCN (nen	required)	PAYMENT	PAYMENT METHOD			
DULY AUTHORIZED OFFI	xporter authorizes forwarder named bove to act as forwarding agent for xport control and customs purposes.			C.O.D. AMOUNT						
SPECIAL INSTRUCTIONS	:	1								
prov insu limit prov Insu			nipper has requested insurance as vided for at the left hereof, shipment is ured in amount indicated (recovery is ted to actual loss) in accordance with visions as specified in Carrier's Tariffs. urance is payable to shipper unless payee esignated in writing by shipper. named Company, in his name and on his lateral and on his lateral actions.			SHIPPER'S INSTRUCTIONS IN CASE OF INABILITY TO DELIVER CONSIGNMENT AS CONSIGNED:				

Shipper or his Authorized Agent hereby authorizes the above named Company, in his name and on his behalf, to prepare any export documents, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the conditions of carriage and the tariffs of the carriers employed. Shipper guarantees payment of all collect changes in the event consignee refuses payment. The Company is to use reasonable care in the selection of carriers, forwarders, agents, and others to whom it may entrust the shipments.