## **Packing List**

Shipper/Exporter: NAME:		Airway Bill Number:  Export Date  Weight:  (KG)  Country of Ultimate Destination					
TLE:							
Receiver/Consignee: NAME:							
TLE:			Exporting Carrier:				
		Terms of Trade::					
Box #	Description of Merchandise	Gross Weight (kg)	Length (cm)	Width (cm)	Height (cm)	Qty	Sub Total
1							
2							
3							
4							
5							
	Total						