

Packing List

		Receiver Name:				
Shipper Name:		Address:				
		Audi 633.				
Telephone:						
		Email Address:				
1 • • • • • • • • • • • • • • • • • • •						
Box	Product Description		Qty	Unit	Total	Weight
No				Value	Value	
	No.					
	CT book C. A.					
- 111	II (I a T S S S S S S S S S S S S S S S S S S					
	11 Line 27 201					
	ALCOHOL: CONTRACT OF THE PARTY					
		100			1	
					- 166	
			1			
	FLU		120			

Shipper's Signature:

I HEREBY CERTIFY THAT THE ABOVE INFORMATION ON THIS PACKING LIST IS TRUE AND CORRECT THAT THE CONTENTS OF THIS SHIPMENT ARE AS STATED ABOVE.

TOTAL