

SHIPPER'S LETTER OF INSTRUCTIONS

SHIPPER: PLEASE BE SURE TO COMPLETE ALL SHADED AREAS.



1a. EXPORTER/USPPI (Name and address including ZIP code)	
b. EXPORTER'S EIN (IRS) NO.	c. PARTIES TO MTRANSACTION <input type="checkbox"/> Related <input type="checkbox"/> Non-related
4a. ULTIMATE CONSIGNEE	
b. INTERMEDIATE CONSIGNEE	
5. FORWARDING AGENT TRANSCONTAINER TRANSPORT INC. 777 Passaic Avenue Clifton, NJ 07012 U.S.A. Email: nycoffice@transcontainer.com Tel. 973.272.0201 Fax. 973 272 0208	
8. LOADING PIER (Vessel only)	9. MODE of TRANSPORT (Specify)
10. EXPORTING CARRIER	11. PORT OF EXPORT
12. PORT OF UNLOADING (Vessel and air only)	13. CONTAINERIZED (Vessel only) <input type="checkbox"/> Yes <input type="checkbox"/> No
SHIPPER REQUESTS INSURANCE <input type="checkbox"/> No <input type="checkbox"/> Yes \$	

SHIPPER'S REFERENCE NO.	READY DATE
6. POINT (STATE) OF ORIGIN OR FTZ N ^o	7. COUNTRY OF ULTIMATE DESTINATION

EXPORTER - PLEASE ADVISE:

AIR OCEAN CONSOLIDATE DIRECT
 PREPAID COLLECT C.O.D. \$ _____
METHOD OF PAYMENT (if not collect):
 CASH CHECK WIRE TRANSFER

SHIPPER'S INSTRUCTIONS IN CASE OF INABILITY TO DELIVER CONSIGNMENT AS ASSIGNED ABANDON RETURN TO SHIPPER DELIVER TO:

14. SCHEDULE B DESCRIPTION OF COMMODITIES					VALUE (U.S. dollars, omit cents) (Selling price or cost if not sold) (20)	ADD'L REFERENCE NUMBERS	# OF PKGS + DIMS (in/cm) + GROSS WEIGHT (lbs/kgs) EACH
15. MARKS, NOS., AND KINDS OF PACKAGES							
D/F (16)	SCHEDULE B NUMBER (17)	CHECK DIGIT	QUANTITY - Schedule B Unit (s) (18)	NET SHIPPING WEIGHT (kg) (19)			

SHIPPER'S NOTE:
Please contact us if you are uncertain about your Schedule B or HTSUS Number. We will assist you in selecting a classification for the Electronic Export Information (EEI).

WE HAVE FORWARDED TO YOU, THE SHIPMENT DESCRIBED BELOW VIA:

PICK UP
 DELIVERY (LISTED BELOW)
 TRUCK LINE NAME _____

RECEIPT (PRO) NUMBER _____

DECLARED VALUE FOR CARRIAGE \$ _____

21. VALIDATED LICENSE NO./GENERAL LICENSE SYMBOL	22. ECCN (When required)	PLEASE SIGN THE FIRST EXPORT DECLARATION IN BOX 23 & BOX 24 WITH PEN AND INK.
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23. Duly authorized officer or employee	The exporter authorizes the forwarder named above to act as forwarding agent for export control and customs purposes.
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DOCUMENTS ENCLOSED:

24. I certify that all statements made and all information contained herein are true and correct and that I have read and understand the instructions for preparation of this document, set forth in the „CORRECT WAY TO FILL OUT THE SHIPPER'S EXPORT DECLARATION.“ I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false or fraudulent statements herein, falling to provide the requested information or for violation of U.S. laws on exportation (13 U.S.C. Sec. 305; 22 U.S.C. Sec. 401; 18 U.S.C. Sec. 1001; 50 U.S.C. App. 2410).

WRITTEN AUTHORIZATION TO PREPARE OR TRANSMIT ELECTRONIC EXPORT INFORMATION
 I _____ AUTHORIZED **TRANSCONTAINER TRANSPORT INC.** to act as authorized agent for export control, U.S. Customs, and Census Bureau purposes to transmit such export information electronically that may be required by law or regulation in connections with the exportation or transportation of any goods on behalf of said U.S. Principal Party of Interest (USPPI). The USPPI certifies that necessary and proper documentation to accurately transmit the information electronically is and will be provided to the said Authorized Agent. The USPPI further understands that civil and criminal penalties may be imposed for making false or fraudulent statements or for the violation of any U.S. laws or regulations on exportation and agrees to be bound by all statements of said Authorized Agent based upon information or documentation provided by the USPPI to said Authorized Agent.

SIGNATURE	CONFIDENTIAL - For use solely for official purposes authorized by the Secretary of Commerce (13 U.S.C. 301 (g)).
TITLE/CAPACITY	Export shipments are subject to inspection by U.S. Customs Service and/or Office of Export Enforcement.
DATE	25. AUTHENTICATION (When required)

Please notify _____ if there are any problems with this shipment.
 Phone/Fax/E-Mail: _____

SPECIAL INSTRUCTIONS:
 Value listed is reportable amount for the SED/Electronic Export Information (EEI) in the Automated Export System (AES).

NOTE: The shipper or his Authorized Agent hereby authorizes the above named Company, in his name and on behalf, to prepare any export documents, to sign and accept any documents relating to said shipment, to prepare & file the EEI through AES, and to forward this shipment in accordance with the conditions of carriage and the tariffs of the carriers employed. The shipper guarantees payment of all collect charges in the event the consignee refuses payment. Hereunder the sole responsibility of the Company is to use reasonable care in the selection of carriers, forwarders, agents and others to whom it may entrust the shipment.