BILL OF LADING

2. EXPORTER *(Principal or seller -licensee and address including ZIP Code)*

ZIP CODE

5. DOCUMENT NUMBER

5a. B/L NUMBER

6. EXPORT REFERENCES

3. CONSIGNED TO

7. FORWARDING AGENT *(Name and address - references)*

8. POINT (STATE) OF ORIGIN OR FTZ NUMBER

4. NOTIFY PARTY /INTERMEDIATE CONSIGNEE *(Name and address)*

9. DOMESTIC ROUTING/EXPORT INSTRUCTIONS

12. PRE-CARRIAGE BY

13. PLACE OF RECEIPT BY PRE -CARRIER

14. EXPORTING CARRIER

15. PORT OF LOADING /EXPORT

10. LOADING PIER /TERMINAL

16. FOREIGN PORT OF UNLOADING *(Vessel and air only)*

17. PLACE OF DELIVERY BY ON -CARRIER

11. TYPE OF MOVE

11a. CONTAINERIZED *(Vessel only)* Yes No

MARKS AND NUMBERS (18)	NUMBER OF PACKAGES (19)	DESCRIPTION OF COMMODITIES (20)	GROSS WEIGHT *(Kilos)* (21)	MEASUREMENT (22)

Carrier has a policy against payment , solicitation, or receipt of any rebate , directly or indirectly , which would be unlawful under the United States Shipping Act , 1984 as amended .
DECLARED VALUE_____ READ CLAUSE 29 HEREOF CONCERNING EXTRA FREIGHT AND CARRIER 'S LIMITATION OF LIABILITY .

FREIGHT RATES, CHARGES, WEIGHTS AND/OR MEASUREMENTS

SUBJECT TO CORRECTION	PREPAID	COLLECT
GRAND TOTAL : USD		

Received by the Carrier for shipment by ocean vessel between port of loading and port of discharge , and for arrangement or procurement of pre -carriage from place of receipt and on -carriage to place of delivery , where stated above , the goods as specified above in apparent good order and condition unless otherwise stated . The goods to be delivered at the above mentioned port of discharge or place of delivery , whichever is applicable , subject always to the exceptions , limitations, conditions and liberties set out on the reverse side hereof , to which the Shipper and /or Consignee agree to accepting this Bill of Lading .
IN WITNESS WHEREOF three (3) original Bills of Lading have been signed , not otherwise stated above , one of which being accomplished the others shall be void .

DATED AT _____

By _____
AGENT FOR THE CARRIER

_____ , _____
MO. DAY YEAR

B/L No.