

SHIPPER'S LETTER OF INSTRUCTIONS



186A LEE BURBANK HIGHWAY, REVERE MA 02151 USA - FMC #2977
(781) 560 - 1200 - http://www.all-continents.com

1a U.S. PRINCIPAL PARTY IN INTEREST (USPPI) (Complete name and address)		Zip Code
b. USPPI'S EIN (IRS) OR ID NO.	c. PARTIES TO TRANSACTION <input type="checkbox"/> Related <input type="checkbox"/> Non-Related	
4a ULTIMATE CONSIGNEE (Complete name and address)		
b. INTERMEDIATE CONSIGNEE (Complete name and address)		
5a FORWARDING AGENT (Complete name and address) OCEANAIR INC. 186A Lee Burbank Highway Revere, MA 02151		
5b FORWARDING AGENT'S EIN (IRS) NO. 04 2773397		
8 LOADING PIER (Vessel only)	9 METHOD OF TRANSPORTATION (Specify)	
10 EXPORTING CARRIER	11 PORT OF EXPORT	
12 PORT OF UNLOADING (Vessel or air only)	13 Containerized (Vessel only) <input type="checkbox"/> Yes <input type="checkbox"/> No	

SHIPPER MUST CHECK:		<input type="checkbox"/> PREPAID	<input type="checkbox"/> COLLECT
<input type="checkbox"/> AIR SHIPMENT	<input type="checkbox"/> OCEAN SHIPMENT		
<input type="checkbox"/> CONSOLIDATE	<input type="checkbox"/> DIRECT		
DOCUMENTS ATTACHED:		PREPARE	
<input type="checkbox"/> COMMERCIAL INVOICE	<input type="checkbox"/> PACKING LIST	<input type="checkbox"/> CERT OF ORIGIN	
<input type="checkbox"/> CERT OF ORIGIN	<input type="checkbox"/> CARNET	<input type="checkbox"/> CONSULAR INVOICE	
<input type="checkbox"/> LETTER OF CREDIT	<input type="checkbox"/> VALIDATED LIC.	<input type="checkbox"/> CUSTOMS INVOICE	
<input type="checkbox"/> DANGEROUS GOODS CERTIFICATE	<input type="checkbox"/> OTHER	<input type="checkbox"/> BANKING DRAFT	
		<input type="checkbox"/> EXPORT LICENSE	
		<input type="checkbox"/> OTHER:	

For the ULTIMATE IN CUSTOMER SERVICE:
Contact the OCEANAIR Group of Companies:
OCEANAIR, INC. Exports 1-781-286-7788
OCEANAIR, INC. Imports 1-781-286-2700
Logistics Strategies by OCEANAIR 1-781-599-6491
Perishables by OCEANAIR 1-800-456-4176
All-Continents 1 781 560 1200

LIMITATION OF LIABILITY

This receipt limits OCEANAIR's liability to the actual damages sustained but in no event higher than \$9.07 per pound per damaged item. To obtain higher limits of liability, you must declare a greater value and pay additional charges to be agreed upon. Any claim or suit on damages must be filed within one year from the date of receipt.

Excess Value \$:

INSURANCE REQUESTED

20 SCHEDULE B DESCRIPTION OF COMMODITIES (Use columns 22-24)					
D/F or M	SCHEDULE B NUMBER	QUANTITY SCHEDULE B UNIT(S)	SHIPPING WEIGHT (Kilograms)	VIN/PRODUCT NUMBER VEHICLE TITLE NUMBER	VALUE (U.S. dollars, omit cents) (Selling Price or cost if not sold)
	(22)	(23)	(24)	(25)	(26)
21					
				DECLARE VALUE FOR CUSTOMS \$	
				SHIPPER'S REFERENCE NO.	
				CONSIGNEE P.O. NO.	

27 LICENSE NO./LICENSE EXCEPTION SYMBOL/AUTHORIZATION 28 ECCN (When required)

THIS FORM MUST BE SIGNED IN PEN AND INK IN BLOCK 29 TO BE ACCEPTED BY OCEANAIR INC.

29 Duly authorized officer or employee	The USPPI authorizes the forwarder named above to act as forwarding agent for export control and custom purposes.
30 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, failing 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).	
Signature	Confidential - Shipper's Export Declaration (or any successor document) wherever located, shall be exempt from public disclosure unless the Secretary determines that such exemption would be contrary to the national interest (Title 13, Chapter 9, Section 301(g)).
Title	
Date	31 AUTHENTICATION (When required)
Telephone No. (Include Area Code)	E-mail Address

SPECIAL INSTRUCTIONS
Fax, E-mail, Mail, Courier, Special Handling Requirements, Deadline Delivery, Rate Quote No.

Note: The 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. 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.