

USPPI'S NAME AND ADDRESS			SHIPPER'S LETTER OF INSTRUCTION  Toll-Free (800) 508-4888 Phone: (858) 565-4125 Fax: (858) 565-7623 www.acssan.com email: ops@acssan.com			
USPPI'S EIN NO.	PARTIES TO TRANSACTION	ROUTED EXPORT TRANSACTION NO YES				
ULTIMATE CONSIGNEE						
ULTIMATE CONSIGNEE TYPE (NEW FTR REQUIREMENT!) DIRECT CONSUMER RESELLER GOVERNMENT ENTITY UNKNOWN/OTHER						
DATE MODE OF TRANSPORT FREIGHT CHARGES PREPAID COLLECT			REQUIRED DELIVERY DATE SHIPPER'S REFERENCE INCOTERM NAMED POINT		DANGEROUS GOODS INCLUDED? NO YES CONSIGNEE'S REFERENCE INSURANCE REQUESTED NO YES VALUE:	

SHIPMENT WEIGHT AND DIMENSION INFORMATION
UNITS:

NO.	PCS.	TTL WEIGHT	LENGTH	WIDTH	HEIGHT	NO.	PCS.	TTL WEIGHT	LENGTH	WIDTH	HEIGHT

Check here if weights are estimates and we need to reweigh. This may delay shipment.

TOTAL PIECES

TOTAL WEIGHT

EXPORT INFORMATION						
D/F	DESCRIPTION	SCHEDULE B	ECCN	LICENSE / NLR	WEIGHT (KGS)	VALUE

ADDITIONAL INSTRUCTIONS:

I hereby authorize American Cargoservice 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 connection with the exportation or transportation of any goods on behalf of said U.S. Principal Party in Interest. The U.S. Principal Party in Interest certifies that necessary and proper documentation to accurately transmit the information electronically is and will be provided to the said Authorized Agent. The U.S. Principal Party in Interest 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 U.S. Principal Party in Interest to said authorized agent. I hereby consent to a search and/or inspection of the shipment described herein as required for air transport. American Cargoservice "Terms and Conditions of Contract" will apply to this shipment. By checking this box or signing, I agree to these terms _____ Name of USPPI Authorized Individual _____ USPPI Authorized Signature
