

INVENTORY LIST

Item list					
	Pieces	Description	Cargo value	Dimension	Remarks
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Number of packages	
Gross weight (Verified)	
Cargo value	

Shipper	
Full Name	
Telephone / Mobile	
Address	

Consignee	
Full Name	
Telephone / Mobile	
Address	

Please include consignee's passport copy

Print Name

Signature

Date