

SHIPPER / EXPORTER (COMPLETE NAME AND ADDRESS)		BOOKING NO.		BILL OF LADING NO.	
		NO. OF DOCK RECEIPT <b>1 OF</b>		DOCK RECEIPT NO.	
		NO. OF ATTACHED SHEET		TOTAL NO. OF PAGE	
CONSIGNEE (COMPLETE NAME AND ADDRESS)		FORWARDING AGENT-REFERENCES FMC NO.			
		FAX NO.			
NOTIFY PARTY (COMPLETE NAME AND ADDRESS)		ALSO NOTIFY PARTY-ROUTING & INSTRUCTIONS			
PRE-CARRIAGE BY*		PLACE OF RECEIPT BY PARTICIPATING CARRIER/CARRIER*			
(INTENDED) + VESSEL / VOYAGE / FLAG		PORT OF LOADING		LOADING PIER / TERMINAL	
PORT OF DISCHARGE		PLACE OF DELIVERY BY PARTICIPATING CARRIER/CARRIER*		TYPE OF MOVEMENT (IF MIXED, USE DESCRIPTION OF PACKAGES AND GOODS FIELD)	
ORIGINALS TO BE RELEASED AT					

( CHECK "HM" COLUMN IF HAZARDOUS MATERIAL ) PARTICULARS FURNISHED BY SHIPPER

MARKS & NUMBERS	QUANTITY PACKAGES	H M	DESCRIPTION OF PACKAGES AND GOODS	GROSS WEIGHT	MEASUREMENT

**TOTAL NO. OF CONTAINER OR PACKAGES(IN WORDS)**

CONTAINER NO.	SIZE/TYPE	SEAL NO.	NO. OF PACKAGE PER CONTAINER	CARGO WEIGHT PER CONTAINER	TARE WEIGHT	GROSS WEIGHT PER CONTAINER	MEASUREMENT PER CONTAINER	REMARK

	NO. OF ORIGINAL BILL OF LADING							
VERIFICATION	RATING	OCR	INPUT	CHECK 1	CHECK 2			