

PACKING LIST-SAMAN EXPRESS

INVOICE NO.:

INVOICE DATE:

SHIPPER

COMPANY NAME:
CONTACT PERSON:
CONTACT NUMBER:
ADDRESS:
POSTAL CODE:

CONSIGNEE

COMPANY NAME:
CONTACT PERSON:
CONTACT NUMBER:
ADDRESS:
POSTAL CODE:

ITEM NO.	DESCRIPTION	Quantity	DIMENSION			NET WEIGHT
			L	W	H	

Origin:

Total Cartons:

Gross Weight:

SIGNATURE & STAMP