

Shipper _____ Order # _____ Page ___ of ___

Item #	Item Description	Contents	Make, Model, Ser #
___1			
___2			
___3			
___4			
___5			
___6			
___7			
___8			
___9			
___0			

- ONE item to a line. Begin with item # 001. List 10 items on each page.
- List electronics first, then boxes, then furniture
- Make, Model and Serial Number required on ALL electronics – even battery powered toys and tools
- Do NOT use the term 'MISC'. All containers must have a description of the general contents within.

001Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

002Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

003Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

004Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

005Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

006Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

007Customer Name
Address
City State Zip
Order Number

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008Customer Name
Address
City State Zip
Order Number

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009Customer Name
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Order Number

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010Customer Name
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Order Number

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011Customer Name
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012Customer Name
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013Customer Name
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014Customer Name
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015Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

016Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

017Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634

018Customer Name
Address
City State Zip
Order Number

MexiCo Forwarding 956-440-0634