

SPECIAL LABEL FOR EXPORT SHIPMENTS

VENDOR: Please attach a copy of this form to each package or carton for your International Customer. Your compliance will save your customer from inspection charges and costly delays at Customs. Thank you! (Questions?.....Call Scott Bundy, 336.889.6617)

VENDOR (required): _____

CONSOLIDATION NAME (required): _____

CUSTOMER NAME: _____

PO #: _____

OTHER REFERENCE: _____

TO: _____ (Consolidation Name)
c/o AMPAC FORWARDING, INC.
2401 SCHIRRA PLACE, WHSE 3
HIGH POINT, NC 27263



CONTENTS (required):

COUNTRY OF ORIGIN (required):

BOX _____ OF _____ (required)

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