

# Shipper's Letter of Instruction

1a. EXPORTER (Name and address, including Zip code)		2. DATE OF EXPORTATION		3. TRANSPORTATION REFERENCE NO.		
b. USPPIS EIN (IRS) NO.	c. PARTIES TO TRANSACTION Related      Non-Related		 <p><b>Supply Chain Shipping</b>                  4607 44th Street SE                  Grand Rapids, MI 49512                  Tel: (616) 554-8900   Fax: (616) 554-8922  <b>FMC-OTI No. 019916NF</b></p>			
4a. ULTIMATE CONSIGNEE						
b. INTERMEDIATE CONSIGNEE						
5. FORWARDING AGENT <b>Supply Chain Shipping, LLC</b> 4607 44th Street SE Grand Rapids, MI 49512						
8. LOADING PIER		9. MODE OF TRANSPORT (specify)	14. CARRIER IDENTIFICATION CODE		15. SHIPMENT REFERENCE NO.	
10. EXPORTING CARRIER		11. PORT OF EXPORT	16. ENTRY NUMBER		17. HAZARDOUS MATERIALS YES      NO	
12. PORT OF UNLOADING (vessel and air only)		13. CONTAINERIZED (vessel only)	18. IN BOND CODE		19. ROUTED EXPORT TRANSACTION YES      NO	
20. SCHEDULE B NUMBER DESCRIPTION OF COMMODITIES (Use columns 22-24)						
D/F OR M (21)	SCHEDULE B NUMBER (22)	QUANTITY-SCHEDULE B UNITS (23)	SHIPPING WEIGHT (kilograms) (24)	VIN/PRODUCT NUMBER/VEHICLE TITLE NUMBER (25)	VALUE (U.S. dollars, omit cents) (Selling price or cost if not sold) (26)	
27. LICENSE NO./LICENSE EXCEPTION SYMBOL/AUTHORIZATION			28. ECCN (When required)			
29. Duly authorized officer or employee		The USPPI authorizes the forwarder named above to act as forwarding agent for export control and customs purposes.		# OF PIECES:	DIMENSIONS:	TOTAL WEIGHT:
30. I certify that all statements made and all information contained herein are true and correct and that I have read and understand the instructions for preparation of this document, set forth in the "Correct Way to Fill Out the Shipper's Export Declaration." I understand that civil and criminal penalties, including forfeiture and sale, may be imposed for making false or fraudulent statements herein, failing to provide the requested information or for violation of U.S. laws on exportation (13 U.S.C. Sec. 305; 22 U.S.C. Sec. 401; 18 U.S.C. Sec. 1001; 50 U.S.C. App 2410).		SHIPPER REQUESTS INSURANCE?		YES	NO	
		ULTIMATE CONSIGNEE TYPE:		Direct Consumer Government Entity Other/Unknown Reseller		
		LICENSE VALUE		SPECIAL INSTRUCTIONS:		
Signature	<b>Confidential</b> - for use solely for official purposes authorized by the Secretary of Commerce (13 U.S.C. 301 (g)).					
Title	Export shipments are subject to inspection by U.S. Customs Service and/or Office of Export Enforcement.					
Date	31. AUTHENTICATION (When Required)					
Telephone No. (Include Area Code)	E-mail address					
NOTE: The Shipper or his Authorized Agent hereby authorizes the above named Company, in his name and on his behalf, to prepare any export documents, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the conditions of carriage and the tariffs of the carriers employed. The shipper guarantees payment of all collect charges in the event the consignee refuses payment. Hereunder the sole responsibility of the Company is to use reasonable care in the selection of carriers, forwarders, agents, and others to whom it may entrust the shipment.						