PACKING LIST

ORDER #
DATE

SHIPPED TO

NAME
ADDRESS
CITY, STATE, ZIP

NOTE:

When referring to this shipment be sure to give order # and shipping date.

DATE ORDERED	CUSTOMER ORDER NUMBER	DATE SHIPPED	ATTENTION
SHIPPED VIA		CONTAINER NUMBER	OUR INVOICE NUMBER

#	ITEM NUMBER	QUANTITY	SHIPPED	BACKORDERED	DESCRIPTION	UNIT WEIGHT	TOTAL WEIGHT
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

Comments

_____
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_____

PACKED BY

☐ _____