GOVERNMENT BILL OF LADING CORRECTION NOTICE			DATE NOTICE PREPARED
1. GBL NUMBER	2. DATE GBL WAS ISS	UED	3. TOTAL WEIGHT SHOWN ON GBL
4. ORIGIN (As shown in "Origin" block on GBL.)		5. DESTINATION (As s	shown in "Destination" block on GBL.)
6. ROUTE (Complete routine shown on GBL.)		7. ISSUING OFFICE (As shown on GBL under "For Use of Issuing Office.")	
8. TO: (Name and address of carrier/activity to which directed, including ZIP Code.)			9. Complete Items 9a, b, and c only when cor- rection is made after transportation charges have been paid.
			a. D.O. VOUCHER NUMBER
			b. D.O. VOUCHER DATE
			c. D.O. SYMBOL
BILL OF LADING NOW READS (Show the information as it reads prior to correction.)		12. CORRECT BILL OF LADING TO READ (Show how the corrected information should read.)	
13. AUTHORITY FOR CORRECTION (Tariff and ite	m numbers; classification and ite	m number; or other authorit	ty for making the change.)
14. REMARKS (Pertinent information not otherwise pr	ovided on the form. If more space	ce is required, use reverse si	ide of this form.)