\$	SHIPPER'S	LETTER (OF INSTRU	JCTION		
EXPORTER			AFC QUOTE#			
EXPORTER'S EIN NUMBER		PARTIES RELATED	ZIP CODE			
LII TRALTE CONCIONED	YES / NO	(CIRCLE ONE)				
ULTIMATE CONSIGNEE				FREIGHT CHARGES (INDICATED PPD OR COL) PREPAID OR COLLECT		
				INTERMEDIATE CONSIGNEE / NOTIFY PARTY		
INTERMEDIATE CONSIGNEE / NOTIFY		SHIPPER REQUESTS INSURANCE (IF NO LEAVE BLANK)				
				\$		
ANTILLES FREIGHT CORP.						
	ENUE		STATE OF ORIGIN	COUNTRY	OF ULTIMATE DESTINATION	
Tel	33167 305-688-9651					
Tel: 305-688-5488 Fax: 305-688-965						
LOADING PIER EXPORTING CARRIER		MODE OF TRANSPORT AIR / OCEAN (CIRCLE ONE) PORT OF EXPORT		SHIPPER'S REFERENCE NUMBER		
				\dashv		
EM ONTHO CARREST		TOKE OF EXTOKE		CONSIGNEE'S REFERE	ENCE NUMB	ER
PORT OF UNLOADING		CONTAINERIZATION		1		
		YES / NO (CIRCLE ONE)				
D / F H.S. NUMBER		<u> </u>	QUANTITY	SHIPPING WEIGHT		VALUE (USD)
LICENSE / ECCN						
INLAN	D ROUTING INI	FORMATION		_		TRUCTIONS IN CASE OF
CARRIER		CHARGES	505			DELIVER AS CONSIGNED
		PREPAID	COLL			NO
SHIPPING DOCUMENTS:		OVERHEAD ATTACHED		RETURN TO SHIPPER CONTACT SHIPPER	YES	NO NO
SIMITING DOCCMENTS.	ATTACHED		_		_	
DOCUMENTS TO BE COM	APLETED			ADDITIONAL C		
(STATE YES/NO TO WHICH APPLY)				or if any special handling is required.)		
COMMERCIAL INVOICE		1				
CERTIFICATE OF ORIGIN]			
CONSULAR INVOICES]			
ADDITIONAL DOCUMENTS:]			
BANKING SERVICES: (eg		YES / NO				
DULY AUTHORIZED OFFICER OR EMPLOYEE. THE EXPORTER AUTHORIZES				RECEIVED BY:		
THE FORWARDER NAMED ABOVE TO				(BY TRUCKER)		
EXPORT CONTROL AND CUSTOMS PU	RPOSES. (SHIPPER MU	ST SIGN HERE)		DATE & TIME		
SIGNATURE: FAX	PRE-ALERTS TO	O BE SENT:		_ DATE & TIME:		
	-					
CONTACT:				FAX NUMBER:		