

SHIPPER'S DETAILS: Name/ Company Address: City: Country: TEL: (Important)		Date : Invoice Number : AirWay Bill Number:
PACKING LIST		
RECEIVER'S DETAILS: Name/ Company Address: City: Country: TEL: (Important)		Number of Pcs : Total Weight : HS Code :
Marks & Numbers	Description of Goods	Quantity
Total Weight in KG's		
Country of Origin : Sri Lanka Purpose of Export : SAMPLES OF NO COMMERCIAL VALUE Value : Value declared on this invoice for customs clearance purpose only.		
I Undersigned, hereby that the information given on this packing list true and accurate and the containes of airway bill, invoice; descriptions are tally with this packing list & does NOT contain CASH, GEMS, DRUGS or any Hazardous restricted illegal items to best of my knowledge.		
Signature :	Date :	
Designation :		
Name :		