

# AirWaves Global Logistics

USPPI (United States Principal Party of Interest)		INLAND CARRIER (See note #2 below)	SHIP DATE	PRO NO.
Phone#:		ZIP CODE		
EXPORT EIN (IRS) NO.	PARTIES TO TRANSACTION <input type="checkbox"/> Related <input type="checkbox"/> Non-related		SHIPPER REQUESTS INSURANCE:	
FPPI (Foreign Principal Party of Interest)		YES	If Shipper has requested insurance as provided for at the left hereof shipment is insured in the amount indicated (recovery is limited to actual loss) in accordance with the provisions as specified in the Carrier's Tariffs Insurance is payable to Shipper unless payee is designated in writing by the shipper.	
		NO		
FORWARDING AGENT AIRWAVES GLOBAL LOGISTICS 160-51 ROCKAWAY BLVD. SUITE 207 JAMAICA, NY 11434		Delivery address:		
		POINT (STATE) OF ORIGIN OR FTZ NO.	COUNTRY OF ULTIMATE DESTINATION	

## SHIPPER'S LETTER OF INSTRUCTIONS

NOTE: ① IF YOU ARE UNCERTAIN OF THE SCHEDULE B. COMMODITY NO.---DO NOT TYPE IT IN---WE WILL COMPLETE WHEN PROCESSING THE 7525-V.  
 ② IF YOU HAVE SHIPPED THIS MATERIAL TO US VIA AN INLAND CARRIER---PLEASE GIVE US THE INLAND CARRIER'S NAME, SHIPPING DATE, AND RECEIPT OR PRO. NO. (IF AVAILABLE). THIS WILL HELP US EXPEDITE YOUR SHIPMENT WITH THE INLAND CARRIER  
 ③ BE SURE TO PICK UP TOP SHEET AND SIGN THE FIRST BUFF EXPORT DECLARATION WITH PEN AND INK.

SHIPPER'S REF. NO.	DATE	SHIP VIA	<input type="checkbox"/> CONSOLIDATE <input type="checkbox"/> DIRECT <input type="checkbox"/> EXPRESS
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SCHEDULE B DESCRIPTION OF COMMODITIES						VALUE (U.S. dollars, omit cents) (Selling price or cost if not sold)
D/F	MARKS, NOS., AND KIND OF PKGS SCHEDULE B NUMBER	QUANTITY--- SCHEDULE B UNIT(S)	SHIPPING WEIGHT (Kilos)	SHIPPING WEIGHT (Pounds)	CUBIC METERS	

VALIDATED LICENSE NO. GENERAL LICENSE SYMBOL	ECCN (When required)	<b>SHIPPER MUST CHECK</b> ➔	PREPAID
Duly authorized officer or employee	The exporter authorizes the forwarder named above to act as forwarding agent for export control and customs purposes.	<b>C.O.D. AMOUNT \$</b>	COLLECT

### SPECIAL INSTRUCTIONS

	SHIPPER'S INSTRUCTIONS IN CASE OF INABILITY TO DELIVER CONSIGNMENT AS CONSIGNED: <input type="checkbox"/> ABANDON <input checked="" type="checkbox"/> RETURN TO SHIPPER <input type="checkbox"/> DELIVER TO
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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.