PERSONAL EFFECT PACKING LIST & INVOICE

**BOOKING#**

**Shipper Name:**

ADDRESS:

PHONE NO.

**Consignee Name:**

ADDRESS:

PHONE NO.

|  |  |  |
| --- | --- | --- |
| Box | DESCRIPTION | GROSS WEIGHT |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |
| 11 |  |  |
| 12 |  |  |
| 13 |  |  |
| 14 |  |  |
| 15 |  |  |
|  |  |  |
| Total |  |  |