# Packing List

DATE: _____

TO

_____

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_____

FROM

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_____

SHIP DATE: _____

SHIP VIA: _____

F.O.B. SHIPPING POINT: _____

ACCOUNT NO.: _____

ORDER NO.: _____

DEPARTMENT: _____

TERMS - NO ANTICIPATION

| QUANTITY ORDERED | QUANTITY SHIPPED | PRODUCT NUMBER | DESCRIPTION | UNIT WEIGHT | TOTAL WEIGHT | TOTAL CUBIC FT. |
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**COMMENTS**

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