



YOUR COMPANY'S NAME

Your Company's Address Line 1
Your Company's Address Line 2
Your Company's Tel. and Fax Number

PACKING LIST

ORIGINAL

Pack'g List/Inv. # : -1 / 1

Customer Code: 1000011003

Billing Customer:
A/R - Client C

Contact Person:

Tel. / Fax:

Our Ref.:

Date: 20 NOV 1998

Salesman Code: 1000000001

Delivery To:
A/R - Client C

Contact Person:

Tel. / Fax:

Your Ref.:

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Code	Description	Measurement
1000010001	Stock Item 1	
	packing details.....	measurement details.....

Remarks:

YOUR COMPANY'S NAME

Authorised Signature(s)

A/R - Client C

Authorised Signature(s) & Company Chop