Tax	payer Identification No.:	:								
Consignor/Exporter					Consignee/Buyer					
Address:					Address:					
Tel. #:					Tel. #:					
Date of Shipment:					Type of Package(s)					
Airline/Vessel:					Nationality of Airline/Vessel:					
Port of Lading:										
SEAFOOD DOCUMENT ONLY Supplier of Resources: Address of Supplier: Place of Storage: Form in which products is exported (List if dry, frozen, fresh, smoked, filleted, steak, whole gutted,					-					
#	ITEMS	WEIGHT (kg)	PKGS	PRICE	#	ITEMS	WEIGHT (kg)	PKGS	PRIC	
1					12					
2					13					
3					14					
4					15					
5					16					
6					17					
7					18					
8					19					
9					20					
10					21					
11					22					
For	official use only		_							
	C72 Form		C72 Cont	. Sheet		CARICOM Invoice				
	Com. Invoice		Schedule B			App for Fish License				
	Eur 1 Form									

Receipt Amt: \$ _____

16% VAT:

Signature of Exporter:_____

Set of Document(s):

\$100.00

Customs Processing

Date:_____

Fee:

Receipt #