

ACE ELECTRONIC MANIFEST ADDITIONAL SHIPMENT FORM

THIS FORM MUST BE ACCOMPANIED WITH AN ACE ELECTRONIC MANIFEST REQUEST FORM

COMPANY NAME

DRIVER NAME

SHIPMENT RELEASE TYPE PAPS 3299 7523 SECTION 321

SHIPMENT CONTROL NUMBER
IF PAPS RELEASE USE PAPS BARCODE NUMBER

SHIPPER NAME

STREET

CITY PROVINCE POSTAL CODE

CONSIGNEE NAME

STREET

CITY STATE ZIP/POSTAL CODE

CARGO DESCRIPTION

QUANTITY UNIT OF MEASURE COUNTRY OF ORIGIN
BOX CARTON PACKAGE PIECES SKID UNIT OPTIONAL

WEIGHT LBS KGS VALUE (U.S. \$)
NOT NECESSARY FOR PAPS OR 3299 RELEASE

CHECK HERE IF THIS SHIPMENT CONTAINS FOOD

CHECK HERE IF THIS SHIPMENT CONTAINS FOOD AND ENTRY HAS ALREADY BEEN FILED WITH FDA

CHECK HERE IF THIS SHIPMENT CONTAINS HAZARDOUS MATERIALS

CHECK HERE IF THIS SHIPMENT IS IN BOND. INCLUDE COPY OF T&E BOND WITH THIS REQUEST