

LO GO	TO: COMPANY NAME Address, City ZIP, State
	PRIORITY MAIL
FROM: COMPANY NAME Address, City, ZIP, State	
ORDER NR: 000000/2020 	LOT NUMBER:
	SHIP DATE:
ITEM NR: 000000/2020	WEIGHT:

TO: COMPANY NAME Address, City ZIP, State	PRIORITY MAIL			
		FROM: COMPANY NAME Address, City, ZIP, State	LOT NUMBER:	SHIP DATE:
LO GO		ORDER NR: 000000/2020 		ITEM NR: 000000/2020

LO GO	TO: COMPANY NAME Address, City ZIP, State
	PRIORITY MAIL
FROM: COMPANY NAME Address, City, ZIP, State	
ORDER NR: 000000/2020 	LOT NUMBER:
	SHIP DATE:
ITEM NR: 000000/2020	WEIGHT: