

<b>GOVERNMENT BILL OF LADING CORRECTION NOTICE</b>		DATE NOTICE PREPARED
1. GBL NUMBER	2. DATE GBL WAS ISSUED	3. TOTAL WEIGHT SHOWN ON GBL
4. ORIGIN <i>(As shown in "Origin" block on GBL.)</i>		5. DESTINATION <i>(As shown in "Destination" block on GBL.)</i>
6. ROUTE <i>(Complete routing shown on GBL.)</i>		7. ISSUING OFFICE <i>(As shown on GBL under "For use of Issuing Office.")</i>
8. TO: <i>(Name and address of carrier/activity to which directed, including ZIP Code.)</i>		9. <b><i>Complete Items 9a, b, and c only when correction is made after transportation charges have been paid.</i></b>
		a.D.O. VOUCHER NUMBER
		b.D.O. VOUCHER DATE
		c.D.O. SYMBOL
10. FROM:		
11. BILL OF LADING NOW READS <i>(Show the information as it reads prior to correction.)</i>		12. CORRECT BILL OF LADING TO READ <i>(Show how the corrected information should read.)</i>
13. AUTHORITY FOR CORRECTION <i>(Tariff and item numbers; classification and item number; or other authority for making the change.)</i>		
14. REMARKS <i>(Pertinent information not otherwise provided on the form. If more space is required, use reverse side of this form.)</i>		
15. INFORMATION COPY TO <i>(Name and address, including ZIP Code.)</i>		16. SIGNATURE AND TITLE OF INITIATING OFFICIAL
		17. CARRIER REPRESENTATIVE'S SIGNATURE <i>(Require when notice is initiated by shipper and transportation charges are affected.)</i>