

BLINDS ACCEPTANCE LIST

Client: Vessel No:

ine Line Io Size	Line Lbs	Line Description	Date in	Name	Date Out	Name
1.			Client:			
			IPS:			
2.			Client:			
			IPS:			
3.			Client:			
			IPS:			
l.			Client:			
			IPS:			
			Client:			
			IPS:			
			Client:			
			IPS:			
' .			Client:			
			IPS:			
3.			Client:			
			IPS:			
			Client:			
			IPS:			
0.			Client:			
			IPS:			
1.			Client:			
			IPS:			



BLINDS ACCEPTANCE LIST

Line Line No Size	Line Lbs	Line Description	on		Date in	Name	Date Out	Name
12.				Client:				
				IPS:				
13.				Client:				
				IPS:				
14.				Client:				
				IPS:				
15.				Client:				
				IPS:				
16.				Client:				
				IPS:				
17.				Client:				
				IPS:				
18.				Client:				
				IPS:				
19.				Client:				
				IPS:				
20.				Client:				
				IPS:				
Signatures								
Client (print)			Client (signatur	re)			Date	
IPS (print)			IPS (signature)				Date	
J (piiit)			ii o (signature)				Dato	