

Manifest Billing Copy

6/962506100/0020/0290/0678/0020/0013052736/3

3. Shipment Information		Total Weight 126 <small>lbs</small> <input type="checkbox"/> kg <input checked="" type="checkbox"/>		DIM 53 27 9		<input type="checkbox"/> in. <input type="checkbox"/> ft. <input type="checkbox"/> cm Value for Customs 775	
Total Packages Shipper's Load and Count/SLAC		Commodity Description Alloy Sheet		Harmonized Code		Country of Manufacture USA	
<input type="checkbox"/> Has EEI been filed in AES? For U.S. Export Only Check One		<input type="checkbox"/> No EEI required, value \$2500 or less per Sch. B Number, no licensee required (NLR), not subject to ITAR. <input type="checkbox"/> No EEI required, serial exemption number:		Total Declared Value for Carriage		Total Value for Customs (Specify Currency) 775	
<input type="checkbox"/> Yes - Enter AES prior to filing of bill of lading.				If other than NLR, enter License Exemption			

8 Required Signature Use of this Air Waybill constitutes your agreement to the Conditions of Contract on the back of this Air Waybill, and you represent that this shipment does not require a U.S. State Department License or certain dangerous goods. Certain international treaties, including the Warsaw or Montreal Convention, may apply to this shipment and limit our liability for damage, loss, or delay as described in the Conditions of Contract. WARNING: These commodities, technologies or software were exported from the United States in accordance with Export Administration Regulations. Diversion contrary to U.S. law prohibited.		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Sender's Signature: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Receiver's Name: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached: <input type="checkbox"/> CI <input type="checkbox"/> CO	
Date Shipped: <i>[Signature]</i>		Country Code/Destination Station ID		URSA Routing		Handling Units		Total Volume (cm)		Forms Attached:	

Page 2 of 5

Place 1st IMPS
Label here

Place 2nd IMPS
Label here

Place 3rd IMPS
Label here



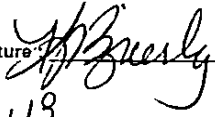
Place 4th IMPS
Label here

PROFORMA INVOICE

HAYNES INTERNATIONAL, INC
1020 WEST PARK AVENUE
KOKOMO, IN 46904-9013

Invoice No	Date	Customer PO	ECCN: EAR99	Terms of payment	
1880496-1,2	30-Jul-19	SM-HAYNES/100719	EIN: 06-1185400 7506.20.1500	COL	
Sold to:			Ship to:		
Sales Order # 1880496-1,2					
Mail checks or drafts to: Haynes International, Inc. 35082 Eagle Way Chicago, IL 60678-1350			Send wire transfer to: WIRE PAYMENTS TO ACCT #641625124 JP MORGAN CHASE WIRE TRANSFER SUPPORT 131 S DEARBORN 9TH FLOOR CHICAGO IL 60603 SWIFT CODE CHASUS33		
Description of Goods					
		Qty	UOM	Price/UM	Amount USD
1	HASTELLOY® X ALLOY SHEET	1	PC	\$5.00	\$5.00
	0.0235, 3.94 X 7.88				\$0.00
	HASTELLOY® X ALLOY SHEET				\$0.00
	0.125, 21.66 X 48.0	1	PC	\$720.00	\$720.00
KRISTINA BRIERLY				Total	\$725.00

Consignment Note

1.From (Collection Address) Name : HAYNES INTERNATIONAL INC Address : LAPORTE SERVICE CENTER,3238 NORTH HWY.39,LAPORTE INDIANA City : Laporte Province : In Contact Name : KRISTINA BRIERLY Postal/Zip Code : 46350 Location : UNITED STATES Tel No : +12193268530	  *150759291* Please quote this number if you have an enquiry.
2.To (Receiver Address) Name : CONG TY TNHH MTV SIEU VAT LIEU Address : 201/15 LE VAN VIET,HIEP PHU WARD,DISTRICT 9,HO CHI MINH City : District 9 Province : Thanh Pho Ho Chi Minh Contact Name : MS LY Postal/Zip Code : 70879 Location : VIET NAM Tel No : +840822999987	A. Delivery Address Name : CONG TY TNHH MTV SIEU VAT LIEU Address : 201/15 LE VAN VIET,HIEP PHU WARD,DISTRICT 9,HO CHI MINH City : District 9 Province : Thanh Pho Ho Chi Minh Contact Name : MS LY Postal/Zip Code : 70879 Location : VIET NAM Tel No : +840822999987
3.Goods General Description : ALLOY SHEET HS Tariff Code : Total Packages : Total Weight : Total Volume : 1 57.153 kg 0.211 m3	B. Dutiable Shipment Details Receivers VAT/TVA/BTW/MWST No. : Invoice Value of Dutiables Currency:VND Value:16823612
4. Services Service : G 48N Economy Express Options : Receiver Pays NON DANGEROUS GOODS	C. Special Delivery Instructions D. Customer Reference HM5 929620
Sender's Signature  Date : 8/1/19 LIABILITY FOR LOSS, DAMAGE AND DELAY IS LIMITED BY THE CMR CONVENTION OR THE WARSAW CONVENTION WHICHEVER IS APPLICABLE.THE SENDER AGREES THAT THE GENERAL CONDITIONS, ACCESSIBLE VIA THE HELP TEXT THAT ARE ACCEPTABLE AND GOVERN THIS CONTRACT.IF NO SERVICE OR BILLING OPTION IS SELECTED THE FASTEST AVAILABLE SERVICE WILL BE CHARGED TO THE SENDER	E. Invoice Receiver (Receiver's Account Number) Received by TNT by (Name) : _____ Date : ____/____/____ Time : ____:____ Custom's Copy Please Keep For Reference