

<b>BILL OF LADING — PRIVATELY OWNED PERSONAL PROPERTY</b>				<b>ORIGINAL</b> B/L NO. ZY-083754			
1. TRANSPORTATION COMPANY (Agent) TENDERED TO <b>APOLLO VAN LINES INC (FOSTER VAN LINES)</b>				2. SCAC <b>APOV</b>	3. SERVICE CODE <b>1A</b>	4. SHIPMENT NO. <b>1 OF 1</b>	5. DATE B/L PRINTED <b>03-JUN-03</b>
6. REQUESTED PACKING DATE <b>12-JUN-03</b>	7. REQUESTED PICKUP DATE <b>13-JUN-03</b>	8. REQUIRED DELIVERY DATE <b>07-JUL-03</b>	9. <b>PRIVACY ACT DATA</b> (5 USC 552a) This form serves as a procurement, accountability and payment form in the shipment of privately owned personal property for the account of the U. S. Information thereon may be used to prepare related documents or collect excess costs. Disclosure of information is voluntary but its absence may preclude shipment of property.				
13. EXTRA PICKUP/DELIVERY (Complete address) <b>ALL BOARD STORAGE, 1900 MEEKE RICHMOND (CONTRA COST) CA 94804</b>				10. PROPERTY OWNER'S NAME, SOCIAL SECURITY NO., RANK AND PAY GRADE <b>RIEBEL, ROBERT P 123-13-6789 CPO E-7 PCS WD USCG TRAINING CENTER</b>		11. AUTHORITY FOR SHIPMENT (Order No. Par. No., HQ) <b>1203G83PRA04G CGPC-WASHINGTON, DC</b>	
16. Received by the transportation company named above, the property hereinafter described, in apparent good order and condition (contents and value unknown), to be forwarded to destination by the said company and connecting lines, there to be delivered in like good order and condition to said consignee. This bill of lading is governed by the regulations relating thereto as published in Title 41, Part 102-118 of the Code of Federal Regulations. Terms and Conditions are also contained in the Tender of Service.				17. FULL NAME OF SHIPPER <b>PERSONAL PROPERTY DEPARTMENT</b>			
18. CONSIGNEE (Name and destination delivery address) (See block 13) <b>MEMBER STORAGE IN TRANSIT CAPE MAY (CAPE MAY) NJ US19 08204</b>				19. FROM (Complete address of point of pickup) (See block 13.) <b>THE SHORES, 129 SHORELINE COURT RICHMOND (CONTRA COSTA) CA 94804 US87 RA:</b>			
20. RESPONSIBLE DESTINATION INSTALLATION/OFFICE <b>JPPSO-NEW JERSEY FORT DIX NJ 08640-7700 609-5622571</b>				21. BILL CHARGES TO (Dept./Agcy., Bur./Off., and complete mailing address) <b>USCG FINCEN (CODE 706000) C/O NATIONAL TRAFFIC SERVICE 151 JOHN JAMES AUDUBON PARKWAY AMHERST, NY 14228-1185</b>		22. VIA (Name of interlining carriers)	
25. REMARKS (Special services, use reverse) <b>DL:DL:REWEIGH REQUIRED-BEFORE EFFECTING DELIVERY TO RESIDENCE OR PLACING IN STORAGE, THE CARRIER SHALL NOTIFY THE PPSO SPECIFIED IN BLOCK 20-</b>				23. FOR CARRIER USE ONLY - WAYBILL/FREIGHT BILL NO. <b>GBLOC APAT</b>		24. APPROPRIATION CHARGEABLE <b>NMF -3-ZMHG P/301/299/21/0/01/7000/2104</b>	

28. PACKAGES		27. DESCRIPTION OF SHIPMENT* (Specify)	28. WEIGHT +		FOR USE OF DESTINATION CARRIER ONLY		
NO.	KIND		GROSS	NET	SERVICES	29. RATE	30. CHARGES
1	LOT	DOD SPONSORED HOUSEHOLD GOODS	34260	9480	LINE-HAUL TRANSPORTATION	5995	8524 89
					PACKING/UNPACKING		2199 98
					OTHER/ACCESSORIAL SERVICES		3730 87
					TOTAL		14455 74
					31. TARIFF OR SPECIAL RATE AUTHORITIES RS D-7 - 150%		

* Issued at lowest valuation cited in appropriate tender or tariff unless otherwise stated hereon.		B/L NO. ZY-083754	
CERTIFICATE FOR RECEIPT OF SHIPMENT AND ORIGINAL BILL OF LADING			
33a. NAME OF TRANSPORTATION COMPANY <b>APOLLO VAN LINES INC (FOSTER VAN LINES)</b>		33b. DATE OF RECEIPT OF SHIPMENT <b>6-13-03</b>	
33c. SIGNATURE OF AGENT/DRIVER <i>Ethel Foster</i>		33d. PER <i>agent</i>	
32a. ISSUING OFFICER (Name and Title) <b>JOSIANE K. STOKES DIRECTOR</b>			
32b. ISSUING OFFICE (Name and Complete address) <b>PERSONAL PROPERTY DEPARTMENT BLDG 3, COAST GUARD ISLAND ALAMEDA CA 94501-5100</b>			
34. FOR USE OF PAYING OFFICER (Does not affect carrier charges)			
UNAUTHORIZED ITEMS		EXCESS DISTANCE	
EXCESS VALUATION		EXCESS WEIGHT	
OTHERS (Explain under remarks)			

CERTIFICATE OF CARRIER BILLING FOR CHARGES - CONSIGNEE MUST NOT PAY ANY CHARGES ON THIS SHIPMENT		
35a. ON (Date) <b>6-27-03</b>	35b. AT (Actual delivery point) + + <b>MT. HOLLY NJ</b>	35c. THE (Name of delivery carrier) <b>APOLLO VAN LINES INC.</b>
35d. DELIVERED THIS CONSIGNMENT TO <input checked="" type="checkbox"/> STORAGE IN TRANSIT <input type="checkbox"/> RESIDENCE		35e. COMPLETE AND IN APPARENT GOOD ORDER EXCEPT AS MAY BE INDICATED HEREAFTER <input type="checkbox"/> SHORTAGE <input type="checkbox"/> DAMAGE <input type="checkbox"/> CARRIER OS&D REPORT ATTACHED
35f. NAME OF DESTINATION CARRIER (Carrier authorized to bill charges) <b>APOLLO VAN LINES INC.</b>		35g. SIGNATURE OF CARRIER'S AUTHORIZED AGENT <i>Nick J. Cook</i>

+ + Carrier to execute and attach Certificate of Storage and Liability for shipment placed in storage in transit

**Figure 12C-19 SF-1203, U. S. Government Bill Of Lading - Privately Owned Personal Property**

APPLICATION FOR SHIPMENT AND / OR STORAGE OF PERSONAL PROPERTY <small>(Before completing form, read Privacy Act Statement on Page 2)</small>		1. DATE PREPARED (YYMMDD)	2. SHIPMENT NUMBER
		04-01-06	1/1
3. NAME OF PREPARING OFFICE Transp Off USCG Academy, New London, CT C706320		4. TO (Responsible origin Personal Property Shipping Office) a. NAME Transportation Officer (FL)	
5. NAME OF DESTINATION PERSONAL PROPERTY SHIPPING OFFICE T.O. USCG Base, 196 Tradd St (CAPS) Charleston, SC 29401		b. ADDRESS (Street, City, State, Zip Code) U.S. Coast Guard Academy 15 Mohegan Ave New London, CT 06320	
6. MEMBER OR EMPLOYEE INFORMATION			
a. NAME (Last, First, Middle Initial) Smithe, Sam N.	b. RANK/GRADE Ens/O-1	c. SSN 123-12-1234	d. AGENCY U.S. Coast Guard
7. REQUEST ACTION BE TAKEN TO TRANSPORT OR STORE THE FOLLOWING			
a. HOUSEHOLD GOODS / UNACCOMPANIED BAGGAGE / ITEMS / NO. OF CONTAINERS (Enter quantity estimate)			
(1) POUNDS 1500 Lbs	(2) POUNDS OF PROFESSIONAL BOOKS, PAPERS, AND EQUIPMENT (Enter none, if not applicable)	(3) EXPENSIVE AND VALUABLE ITEMS. NUMBER OF CARTONS	
b. MOBILE HOME INFORMATION (Enter dimensions in feet and inches)			
(1) SERIAL NUMBER	(2) LENGTH	(3) WIDTH	(4) HEIGHT
(5) TYPE EXPANDO (Describe)			
(6) MOBILE HOME SERVICES REQUESTED (X as applicable)			
(a) Contents Packed	(b) Mobile Home Blocked	(c) Mobile Home Unblocked	(d) Stored at Origin
(e) Stored at Destination			
8. THIS SHIPMENT/STORAGE IS REQUIRED INCIDENT TO THE FOLLOWING CHANGE OF STATION ORDERS			
a. TYPE ORDERS (X one)		b. ISSUED BY	c. NEW DUTY ASSIGNMENT
(1) PERMANENT	<input checked="" type="checkbox"/>	(2) TEMPORARY	Comdt USCG
d. DATE OF ORDERS (YYMMDD) 03-12-19		e. ORDERS NUMBER 1204G84PRA123	f. PARAGRAPH NO.
h. IN TRANSIT ADDRESS (Street, City, State, Zip Code) Rt 1 Box 1, Anytown, NY 01234		g. IN TRANSIT TELEPHONE NO. (Include Area Code) 757 123-1234	
9. PICKUP (ORIGIN) INFORMATION		10. DESTINATION INFORMATION	
a. ADDRESS (Street, Address, City, County, State, and Zip Code) (if mobile home, also include mobile home court name) U.S. Coast Guard Academy (GSK) New London, CT 06320		a. ADDRESS (Street, Address, City, County, State, and Zip Code) (if mobile home, also include mobile home court name) Rt 1 Box 1 Anytown, NY 01234	
b. PHONE NUMBER (Include Area Code) 203 444-1234		b. AGENT DESIGNATED TO RECEIVE PROPERTY Susie Smithe	
11. EXTRA PICKUP/DELIVERY ADDRESS (If applicable)			
12. SCHEDULED DATE (YYMMDD) FOR	a. PACK 04-01-15	b. PICKUP 04-01-15	c. DELIVERY 04-02-02
13. REMARKS			
14. I CERTIFY THAT NO OTHER SHIPMENTS AND / OR NONTEMPORARY STORAGE HAVE BEEN MADE UNDER THESE ORDERS EXCEPT AS INDICATED BELOW (if none, indicate "NONE.")			
a. FROM	b. TO	c. NET POUNDS (Actual or est.)	d. POUNDS OF PROFESSIONAL BOOKS, PAPERS, EQUIPMENT (Actual or est.)
15. CERTIFICATION OF SHIPMENT RESPONSIBILITIES / STORAGE CONDITIONS. I certify that I have read and understand my shipping responsibilities and storage conditions printed on page 2 of this form.			
a. SIGNATURE OF MEMBER/EMPLOYEE	b. DATE SIGNED	c. ADDRESS OF CONTRACTOR (Street, City, State and Zip Code)	
d. NAME OF CONTRACTOR (Origin DPM or non-temporary storage)			
16. CERTIFICATE IN LIEU OF SIGNATURE ON THIS FORM IS REQUIRED WHEN REGULATIONS SO AUTHORIZE. Property is baggage, household goods, mobile home, and/or professional books, papers and equipment authorized to be shipped at government expense.			
a. REASON FOR NONAVAILABILITY OF SIGNATURE	b. CERTIFIED BY (Signature)		
	c. TITLE		

DD FORM 1299, DEC 85

Effective June 1, 1986 all previous editions of this form are obsolete.

Figure 12C-20 DD-1299, Application for Shipment and/or Storage of Personal Property

DEPARTMENT OF TRANSPORTATION U.S. COAST GUARD CG-5131 (Rev. 11-94)		STANDARD TRAVEL ORDER FOR MILITARY PERSONNEL												
1. SSN 123-12-1234		2. NAME (Last Name, First Name, MI) SMITHE, S.N.				3. RATE/RANK ENS/O-1		4. CURRENT DUTY STATION US COAST GUARD ACADEMY						
5. LEAVE ADDRESS (Street / Address, City, State, Zip / Area Code & Phone) RT 1 BOX 1 ANYTOWN, NY 01234							6. TRANSFER AUTHORITY COMDT MSG 020023Z DEC 03							
7. TRAVEL AND PAY NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTEREST AND IS AUTHORIZED CHARGEABLE AGAINST:														
A G E N C Y	D I S T R I C T	A P P N C O D E	L I M C O D E	A L L O T F U N D	A L L O T L V L	P R O G R A M E L E M E N T	C O S T C E N T E R	O B J E C T C L A S S	D O C U M E N T I D E N T I F I C A T I O N N U M B E R			E S T I M A T E D C O S T	M I S C	
									T Y P E	F Y	N U M B E R			S U F F I X
2	P	401	299	21	0	RA	78040	2104	12	04	G84PRA123	000	1500.00	
8. DAYS AUTHORIZED DELAY EN ROUTE BY REGULATIONS OR ENDORSEMENT HEREON (Indicate number of days delay authorized): _____ TRAVEL TIME    _____ PROCEED TIME    _____ LEAVE (INCONUS)    _____ LEAVE (OUTCONUS)    _____ COMPENSATORY ABSENCE <u>30</u> NON CHARGEABLE ABSENCE    _____ DATE LINE ADJUSTMENT														
9. PROCEED AND REPORT IN THE ORDER LISTED BELOW:						SCHEDULED DEPARTURE DATE:								
UNIT/STATION/PLACE						NATURE OF DUTY			TIME/DATE REPORTING					
COMMANDING OFFICER						FASDU			REP NLT 04 JAN 22					
USCGC EVEREADY						(OBC 12345B)								
						(BCN 1234567)								
10. REMARKS/AUTHORIZATIONS/ADDITIONAL INSTRUCTIONS: 7040610 AUTHORIZED ADVANCE MILEAGE AND PERDIEM AUTHORIZED 30 DAYS NONCHARGEABLE GRADUATION LEAVE MEMBERS HOME OF RECORD: ANYTOWN, NY SPM MOVE IS AUTHORIZED														
11. Member's Acknowledgement: I have been counselled on the appropriate provisions of the JFTR and Coast Guard Directives regarding my entitlements, and have had all my questions answered. If under PCS orders, I understand I must secure a "Release From Mandatory Assignment to Government Housing" from the Local Housing Authority (LHA) prior to procuring housing in the civilian sector of the area surrounding my new duty assignment. Further, I acknowledge receipt of these orders and understand that I must submit my travel claim for certification and liquidation purposes within 3 working days of either my PCS reporting, ADT greater than 20 weeks, or completion of travel in connection with my separation.														
12a. AUTHORIZING OFFICIAL (Name, Rate/Rank, Signature) R. K. GUARD, YNCS, USCG						12b. DATE 03DEC22		13a. MEMBER'S SIGNATURE AND PLACE ORDERS RECEIVED NEW LONDON, CT			13b. DATE 03DEC22			

Figure 12C-21 CG-5131, Standard Travel Order for Military Personnel