



**AIR & SURFACE LOGISTICS  
POWER OF ATTORNEY  
AS EXPORT FORWARDING AGENT**

**KNOW ALL MEN BY THESE PRESENTS:**

That \_\_\_\_\_ doing business as a  
(hereinafter, "Grantor")

\_\_\_\_\_, under the laws of the  
(Insert one of the following: Individual, Corporation, Partnership or Sole Proprietorship)

State of \_\_\_\_\_, residing or having a principal place of business at  
(State)

\_\_\_\_\_ hereby:  
(Address of Grantor)

appoints and authorizes Air & Surface Logistics (hereinafter, "Grantee"), as an authorized freight forwarder, with its principal place of business at 16 Technology Drive, Suite #200, Irvine, CA 92618, its subsidiaries, related companies, employees and/or specifically authorized agents to act on its behalf as a true and lawful agent and attorney of the Grantor for and in the name, place, and stead of said Grantor, from this date, in the United States either in writing, electronically or by other authorized means to:

- 1.) make, endorse, sign, declare or withdraw any certificate, bill of lading, carnet, shipper's export declaration, commercial invoice, insurance certificate, draft or any other documents required by law or regulation in connection with the exportation or transportation of any merchandise shipped by said Grantor;
- 2.) perform any act or condition which may be required by law or regulation in connection with such merchandise deliverable from said Grantor; and
- 3.) arrange, dispatch, book and process all transportation of any goods from said Grantor.

This Power of Attorney is to remain in full force and effect until revocation in writing is duly given and received by Grantee.

Grantor hereby acknowledges receipt of Air & Surface Logistics Terms and Conditions of Service as posted on our Web site ([www.airandsurface.com](http://www.airandsurface.com)) and agrees to abide by the same.

**IN WITNESS WHEREOF**, the said \_\_\_\_\_  
(Full name of company)

caused these presents to be ratified, confirmed and signed.

Signature: \_\_\_\_\_

Capacity: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Company Tax ID#: _____-_____ (required)
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