

RATE SHEET FOR TRUCK: _____

Company:

MC Number:

Phone:

Fax:

Reference No:

Commodity:

Contact:

Weight:

Rate:

PICK UP INFORMATION:

Date:

Appointment Time:

Shipper:

Address:

City:

State:

Phone:

DELIVERY INFORMATION:

Date:

Appointment Time:

Consignee:

Address:

City:

State:

Phone:

EXTRA STOPS/SPECIAL INSTRUCTIONS:

BILLING INFORMATION:

SIGNATURE: