

FTL LOGISTICS

123 Carrier Way, Logistics Hub
Phone: (555) 010-9999
Email: dispatch@ftl-logistics.com

SHIPPING MANIFEST / INVOICE

Date: _____
Invoice #: _____
BOL #: _____

SHIPPER (ORIGIN)

Company: _____
Address: _____
City/ST/Zip: _____
Contact: _____

CONSIGNEE (DESTINATION)

Company: _____
Address: _____
City/ST/Zip: _____
Contact: _____

CARRIER DETAILS

Truck #: _____ Trailer #: _____
Driver Name: _____
Pro Number: _____

SHIPPING TERMS

Method: ☐ FTL ☐ LTL ☐ Expedited
Payment: ☐ Prepaid ☐ Collect ☐ 3rd Party

Qty	Unit Type	Description of Goods / HM	Weight (lbs)	Rate	Total

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SPECIAL INSTRUCTIONS

Freight Charges: \$ _____

Fuel Surcharge: \$ _____

Accessorials: \$ _____

TOTAL DUE: \$ _____

Shipper Signature

Driver Signature

Consignee Signature

Subject to the terms and conditions of the FTL Logistics Standard Bill of Lading. Goods received in apparent good order except as noted.