FREIGHT MANIFEST & INVOICE

Carrier Name:
Address Line 1
MC/DOT#:

Invoice #: _____
Date: _____
Load #: _____

SHIPPER / ORIGIN

Name:
Address:
Contact:
Pickup Date:

CONSIGNEE / DESTINATION

Name:
Address:
Contact:
Delivery Date:

EQUIPMENT & PERMIT DETAILS

Tractor #:	**Trailer Type:**	**Escort Vehicles:**	**Permit #:**

CARGO DESCRIPTION (HEAVY LIFT / OVERSIZE)

Description of Goods	Dimensions (L x W x H)	Weight	Rate/Unit	Total

ACCESSORIAL CHARGES

Service (Permits, Pilot Cars, Rigging, Fuel Surcharge)	Quantity	Rate	Amount

Subtotal:$_____
Tax/Fees:$_____

Balance Due:$_____

SHIPPER SIGNATURE

Date:

RECEIVER SIGNATURE

Date:

Terms: Payment due within ___ days. Goods received in apparent good order except as noted.