Move Date: Shipper:	Tim <u>e:</u>	Bill of Lading Invoice # Movers were paid \$	865-469-9523 107 Greenbrier Dr Knoxville TN 37919
Phone:		CC □ CASH	KIIOXVIIIE IIV 3/919
contained in the moving the Mover sign this cont		nd that there is no obligation b LC does not cover internal dar	guidelines. I do agree to the terms by either party until both the Shipper and mage to electronics. The maximum
Job Notes		Extra Stop	
		Hourly Ra	ate Flat Rate
	Points:	Man C Trucks 2 Hour Min Addl Hours Oversize Fee Start Time Break Finish Time Total Start Start Start Total	
		<u>Packing</u>	
		<u>B</u> D	W P TV M
Estimated Move Price	Shipper e:		Total Move Price
Print Name:			C
Signature:	X		$ \Phi $
Date:			
Card	Exp/ CV\	/2 Zip	Mover
I autho	orize the charge of \$		Signature:
I ad	gree to all charges x		Date: