



STRONG
TRANSPORT

801-447-1046

SHIPPER	Company		
	Address		
	City	State	Zip
	Sent By		Phone
	P.O. No. or Ref. No.		
	Ready At		Close By
SPECIAL SERVICES REQUESTED			
CONSIGNEE	Company		
	Address		
	City	State	Zip
	Attention		Phone
P.O. No. or Ref. No.			
Ready At		Close By	
Bill freight charges to:			
Address			
City		State	Zip
PIECES	DESCRIPTION OF PIECES AND CONTENTS		WEIGHT

Shipment Date
Partner
Tracking #
MAWB #
Check Service Level
Next Day <input type="checkbox"/>
2nd Day <input type="checkbox"/>
Ground <input type="checkbox"/>
LTL <input type="checkbox"/>
TRUCKLOAD <input type="checkbox"/>
Insurance Amount
\$

<p>SHIPPER'S SECURITY ENDORSEMENT</p> <p>I CERTIFY THAT WHILE UNDER MY CONTROL, THIS SHIPMENT HAS BEEN ADEQUATELY SAFEGUARDED TO ENSURE THAT UNAUTHORIZED EXPLOSIVES, DESTRUCTIVE DEVICES OR HAZARDOUS MATERIALS HAVE NOT BEEN ADDED. I CONSENT TO A SEARCH OF THE SHIPMENT. I AM AWARE THAT THIS ENDORSEMENT AND ORIGINAL SIGNATURE, ALONG WITH OTHER SHIPPING DOCUMENTS, WILL BE RETAINED ON FILE FOR THIRTY DAYS OR UNTIL THE SHIPMENT IS DELIVERED, WHICH EVER IS LONGER.</p>	<p>ATTACH PRO NUMBER HERE</p>
<p>SENDER'S SIGNATURE (BY TENDERING THIS SHIPMENT TO SHIPPING CONTAINERS, LLC. AND ITS PARTNERS, I AGREE TO BE BOUND BY THE CONDITIONS OF CONTRACT IN THE NMFC AND THAT OF SHIPPING CONTAINERS, LLC. OR ITS AGENTS.)</p> <p>X</p>	

DATE RECEIVED ___/___/___	DATE TIME ___:___ AM/PM	# OF PEICES	RECEIVED IN GOOD CONDITION BY: X
------------------------------	----------------------------	-------------	-------------------------------------