



# SWAGAT ROAD LINES

DELIVERY ADDRESS _____		<b>AT OWNER'S RISK</b>		BOOOK NO. _____ GR NO. _____		
FROM _____		<b>The Customer Has Stated He Has Insured</b> <b>The Consignment OR</b> <b>He Has Not Insured The Consignment</b>		DATE <u>7/8/2025</u>		
TO _____				TIME <u>02:06 pm</u>		
TRUCK NO <u>MP09GH3989</u>						
Consignor's Name & Address M/S _____						
Consignee Name & Address M/S _____						
No Of Package	DESCRIPTION (said to Contain)	Package Mode	Weight	Rate	Freight Charges	
0	PIPE	LOOSE	5000		Freight	
					Advance	
					To Pay/ Paid	
<b>Values Rs. ....</b>						
<b>FOR :- SWAGAT ROAD LINES</b>						
<b>All Responsibility For Breakages &amp; Leakages Contain Not verified by We</b>						