Contract Labor Receipt



| Paid by | Unit | \$\$ |
|--|------------|--------|
| Reg # | | |
| Scale Weight lbs | Load | Unload |
| | Date | |
| The undersigned recipient of the above fee, a businessman in his own right, states that he is | Paid to | |
| fully responsible for the payment of his own self- employment tax and all other income tax liability. | Address | |
| Received by | City/State | |
| SS # | Zip | |
| MUST BE COMPLETED) | - | |

This form must be completed in full.