

Customer Invoice

AMB Logistic
55 East Long Rd Suite no. 457
Troy, MI, USA 48085
Phone: 888-538-6433
Fax:



Dispatcher	Rajinder	LOAD #	10008
Phone #:	785458569,	Ship Date:	08-17-2023
Fax #:		Today's Date:	08-17-2023
Email:	raj.rana@amblogistic.us		
W/O:			

Customer Details

Name	Phone #	Fax #	Address	
kartik	845878585		banglor, banglor	

Shipper

Date:

Time:

Type:

Quantity:

Weight:

Major Intersection:

Shipping Hours:

Appointment:

Notes:

Consignee

Date:

Time:

Type:

Quantity:

Weight:

Major Intersection:

Shipping Hours:

Appointment:

Notes: Load

Customer Pay: Line Haul: \$20 TOTAL: \$20

Rate & Load Confirmation



55 East Long Rd Suite no.
457 Troy, MI, USA 48085
Phone: 888-538-6433
Fax:

Dispatcher:	Rajinder	LOAD #	10005
Phone #:	785458569	Ship Date:	2023-16-08
Fax #:		Today's Date:	08-14-2023
Email:	raj.rana@amblogistic.us		
W/O:			

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
KELVIS SMITH	847-785-0100		Reefer or Vented Van		Open

Shipper 1 Vishal Shipping Delhi Delhi Delhi 11600	Date: Time: Type: Quantity: Weight:	2023-16-08 12:00	Purchase Order #: Major Intersection: Receiving Hours: Appointment: Description:	12:00 Driver is responsible for any damage or mishandling of this load.Handle the load according to rate Conformation
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Consignee 1 rohit , chandigarh , chandigarh , 16500	Date: Time: Type: Quantity: Weight:	2023-18-08 6:00	Purchase Order #: Major Intersection: Receiving Hours: Appointment: Description:	4545 6:00 no Driver is responsible for any damage or mishandling of this load.Handle the load according to rate Conformation
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Carrier Pay: Line Haul: GateFee: \$, TOTAL:

Accepted By: _____ Date: _____ Signature: _____

Driver Name: _____ Cell #: _____ Truck #: _____ Trailer #: _____

Rate & Load Confirmation



55 East Long Rd Suite no.
457 Troy, MI, USA 48085
Phone: 888-538-6433
Fax:

Dispatcher:	Rajinder	LOAD #	10005
Phone #:	785458569	Ship Date:	2023-16-08
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Consignee 1 rohit , chandigarh , chandigarh , 16500	Date: Time: Type: Quantity: Weight:	2023-18-08 6:00	Purchase Order #: Major Intersection: Receiving Hours: Appointment: Description:	4545 6:00 no Driver is responsible for any damage or mishandling of this load.Handle the load according to rate Conformation
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Carrier Pay: Line Haul: GateFee: \$, TOTAL:

Accepted By: _____ Date: _____ Signature: _____

Driver Name: _____ Cell #: _____ Truck #: _____ Trailer #: _____