

Saturn Freight Systems P.O. Box 680308 Marietta, GA 30068

Bill No.		
Date	Org	Dest

Shipper:					Со	Consignee:								
Address:	ess:					Add	Address:							
Address Cont'd						Add	dress Cont'd							
City & State	Zip Code Phone Number			City	/ & State	Zip Phone								
Reference Number						Ref	erence Number							
Pickup Instructions						Del	ivery Instructio	ns						
Show	Booth			Sho	Show				Booth					
Decorator						Dec	corator							
C/O	Contact				C/C)	Contact							
Bill-To Party:	 Bill-To Party:				Sei	Service Requested:			Delivery Delivery					
St										Date	T	ime		
Street Address:									ī					
Address Cont'd Contact City & State Zip Code Phone Number						COD Company Check Certified Check OD Amount: \$	eed to be not more than \$.50 per nichever is greater unless excess eclared and applicable charges paid Value: \$							
Special Instructions						1 60	oo Amount. 9		Deciarea	varac.				
No. PCS	DG Type Commodity Description		escription	Ac	ct. Weight	Length	Width	Height	Dim. Weight					
	Total Pieces Total Act. WT							Total Dim WT		Ī				
	SIGNATURE				PRINTED NAME			DATE	TIME	# PCS				
SHIPPER														
REC'D BY DRIVER														
CONSIGNEE														

By tendering this shipment to Saturn Freight Systems Inc, the parties agree to be bound by the Terms and Conditions found at www.saturnfreight.com.