

	Agent	Carrier's Reference No.
Owner's Grade or Rating and Name		Contract or GBL No.
Origin Loading Address	City	State
Destination		Gov't Service Order No.
		Van Number

Descriptive Symbols	Exception Symbols	Location Symbols
CW Black & White TV Owner C Color TV Professional Books PE Professional Equipment PBO Packed by Owner CD Carrier Disassembled SW Stretch Wrapped	DBO Disassembled by CP Carrier Packed PP Professional Papers MCO Mechanical Condition Unknown BE Bent SO Soiled P Peeling G Gouged Chipped T Torn SC Scratched MI Mildew	D Dented MO Motheasten F Faded BU Burned S Stretched L Loose CU Contents W Badley Worn SH Short
		1. Arm 15. Seat 16. Drawer 17. Door Veneer 12. Edge 6. Legs 7. Rear
		8. Right 2. Bottom 3. Corner 4. Front 18. Shelf 19. Hardware 13. Center
		9. Side 10. Top 11. Top 5. Left 14. Inside

Note: The omission of these symbols indicates good condition except for normal wear.

Item No.	Contractor Reference	Articles	Condition at Origin	Shipper Ck/Dest. Ck.	Exceptions (if any) at Destination	Item No.
1						1
2						2
3						3
4						4
5						5
6						6
7						7
8						8
9						9
10						10
11						11
12						12
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14						14
15						15
16						16
17						17
18						18
19						19
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27						27
28						28
29						29
30						30
31						31
32						32
33						33
34						34
35						35
36						36
37						37
38						38
39						39
40						40

Item No.	Remarks/Exceptions
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"We have checked all the items listed and numbered 1 to \_\_\_\_\_, inclusive, and acknowledge that this is a true and complete list of the goods and services tendered and of the state of the goods received." **Before signing, check shipment, count items and describe loss or damage in space on the right above.**

	Contractor, carrier or authorized agent (driver) Signature: _____	Date: _____	Tape Lot No.	Tape Color
<b>At Origin</b>	Owner or authorized agent Signature: _____	Date: _____	Nos. From	Thru
<b>At Dest.</b>	Contractor, carrier or authorized agent (driver) Signature: _____	Date: _____		
	Owner or authorized agent Signature: _____	Date: _____		