TRANSPORTATION SERVICES ORDER		1. TRANSPORTATION ORDER NUMBER				2. DATE	2. DATE OF REQUEST			3. SHIPMENT PICKUP DATE			
		4a TSP (Complete mailing address)				4b SCAC			5. PREFERRED DELIVERY				
This government shipment is subject to the terms and conditions of 41 CFR 102-117 and						L				DATE			
118	11 41 CFR 102-117 and												
6. REQUESTING	a. NAME AND MAILI	NG ADDR	ESS			b. CONT	ACT FOR AD	DDITIONAL	INFORMAT	TION			
AGENCY						Name: Email:							
						Phone No: Fax No:							
7. TYPES OF RATES	TRUCK		AIL	AIR		8. IF IN	a. NO. OF CARLOA		9. SHIPM	ENT SI	ZE		
REQUESTED	IMPORT					LOAD LOTS			L	W	Н		
	RATE AND I VIA CHEAP		Ξ	PECIFY):	SHOW	b. NO OF TRUCKLO	OADS	10. GROS	S WEIG	GHT .			
11. COMMODITY	(Give UFC, NMFC numb	ber or a cle	ar nontechnica	l description; sh	ow number of	packages as pre	pared for ship	oment			lbs.		
	(e.g.,crated, uncrated, bo				v	. 0 .			NOTE: C				
									multiple or or commod		estinations		
12. CONSIGNOR (SI	I HIPPER) <i>(Name, mailin</i> g	g address, p	hone number,	fax and email)	13. ORIGI	N (Freight addi	ress of actual :	shipping poin	t)				
14. CONSIGNEE (RI	ECEIVER) (Name, mailir	ng address,	phone number	, fax and email)	15. DEST	NATION (Name	e, Mailing ada	dress, phone i	umber, fax a	ınd ema	il)		
,				,		,							
16 CDI DEGLIESTI	TD A NICHODITATI	ON ADDD	DDIATION N	IIMDED TO	b DAVIN	C OFFICE OF D	EOLIECTING	A GENCY (Name and m	ailina a	dduagg if		
16. CBL REQUESTED a. TRANSPORTATION APPROPRIATION NUMBER TO BE SHOWN ON B/L b. PAYING OFFICE OF REQUESTING AGENCY (Name and mails different than item 6a)								anng a	uuress ij				
17. IF RAIL ROUTING	RAIL CA a. Consignor	RRIER SE	RVING	PRIVA' YES	TE SIDING NO	If no	private siding,	give nearest	point of rail	delivery	<i>V</i> .		
REQUESTED 18. ADDITIONAL S	b. Consignee HIPPING INFORMATIO	ON (Descril	be articles of u	YES nusual size or w	NO eight (e.g., 35'	long, 8' wide or	high); specia	l handling 1	9. GIVE GS	SA CON	TROL		
	rials); special carrier ser			0 7 7		*	0 / 1	N	NUMBER AS REVIOUS F	SSIGNE	D TO A		
SIMILAR RATE/ROUT INSTRUCTIONS (if an													
								1	Norkoerk	5115 (1)	uny)		
				RATE/ROUT									
TO: REQUESTING (Shown in item	n 6a)	reasona	ble period, a ne	w request shoul		1 28) is as of the with reference 1					in a		
20. TRANSPORTATION SERVICE PROVIDER (Name, Phone, Fax, and Email) a. RATE(S) b. WEIGHT (Lbs.) c. TARIFF OR OTHER d. ESTIMATEI									IMATED				
							,	RATE AUT		COS			
	G DESCRIPTION WHE		ENT FROM IT	EM 11	23. TECHNI	CIAN'S NAME				l			
(include hazardous materials description, if any) 25. a. AGENCY INITIATING OFFICER'S ADDRESS, NAME, Al								Æ, AN	D EMAIL				
					ISSUING OFFICER								
24. REMARKS AND	SPECIAL SERVICES				-								
26. CONTROL NUMBER/AGENCY ID NUMBER 27. DATE ISSUED								D					
			A DDI 104	ABLE DESTIN	ATION INFO	DMATION							
28a. DATE	28b. Actual Delivery Po	oint 28c	Delivered This	Consignment T	o 28d. COM	PLETE & IN A					D		
				in Transit		AS MAY BE INI	•			orage	Damage		
28e. NAME OF DEL	IVERING TSP		28f. NAME C	OF DESTINATI	ON TSP		28g. SIGNA	TURE OF TS	SP'S AUTHO	ORIZED) AGENT		

29. FOR COM	PLETION BY REQUESTING AG		30. FOR COMPLETION BY TSP						
COMMODITY DESCRIPTION AND GROSS WEIGHT (a)	ORIGIN, CONSIGNOR AND RAILROAD (b)	DESTINATION, CONSIGNEE AND RAILROAD (c)	RATE (a)	WEIGHT/ DIMENSION (b)	TARIFF OR OTHER AUTHORITY (c)	ROUTE AUTHROIZED FOR SHIPMENT (d)			
EQUESTING AGENCY REMARKS				KS					
and the state of t			TSP REMAR						