



RATE CONFIRMATION

Order ID: _____
Please reference the Order ID on your invoice

<p>Shipper</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Pickup # / Misc: _____</p> <p>Pickup Date/Time: _____</p>	<p>Consignee</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Delivery Appointment: _____</p>
<p>If you are interested in our "Quick Pay" program please call 412-490-3680 Option 1 then 5 for more information or check a box and sign below:</p> <p>4% Same Day <input type="checkbox"/></p> <p>3% Next Day <input type="checkbox"/></p> <p>Signature: _____</p>	<p>Stop/Pickup City/ State</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

Additional Information:

Commodity: _____

Approx. Weight: _____

Rate To Carrier: _____

Accessorials:

<i>Description</i>	<i>Carrier Pay</i>
_____	_____
_____	_____
_____	_____

Charges may be assessed to carrier for late pickup or delivery! Carrier must still adhere to all Hours of Service regulations.

Carrier send invoice to: **Greentree Transportation Company**
100 Industry Drive
Pittsburgh, PA 15275

ORIGINAL PAPERWORK MUST ACCOMPANY INVOICE!

TARP REQUIRED YES NO

EQUIPMENT _____

Driver : _____

Carrier: _____

Carrier Phone: _____

Carrier Fax: _____

Carrier/Clearance # _____
or MC # _____

Greentree Transportation Company Dispatching Terminal Information:

Terminal Phone # _____

Terminal Fax # _____

Terminal Contact _____

ABSOLUTELY NO DOUBLE-BROKERING
It is agreed that any re-brokering of this load will result in non-payment to carrier, in addition to any other penalties applicable by contract or by law.

CARRIER SIGN AND RETURN TO ABOVE FAX NUMBER

Authorized Carrier Signature : _____