Transportation Services Order No.	**This Government shipment is subject to terms/conditions of 41 CFR 102-117 & 118.**	Privately Owned Personal Property

1. Transportation Company , Shipment Tendered To:	2. SCAC	3. Shipment No. Of	4. Date TSO Issued *(MM/DD/YYYY)*	5. Requested Packing Date *(MM/DD/YYYY)*
	6. Requested Pickup Date *(MM/DD/YYYY)*		7. Required Delivery Date *(MM/DD/YYYY)*	

8. Property Owner's Name, Pay Grade **Name:** **SSN:** **Pay Grade:**	9. Authority for Shipment (Order #)	10. Date of Order *(MM/DD/YYYY)*	11. Department/Agency

12. Agency ITMS ID Number	14. Full Name of Shipper	15. Extra Pickup/Delivery (complete address)
13. Appropriation Chargeable		

16. Consignee (Name & destination delivery address)	17. From: (Complete address of point of pickup)
18. Responsible Destination Office	19. Bill Charges To (Dept/Agy, & complete mailing address)

20. Remarks

21. Packages		22. Description of Shipment* (specify)	23. Weight✱	**Applicable Rate Information**		
No.	Kind		Gross ➡	Services	24. Rate	25. Charges
			Tare ➡	Line-Haul Transportation		
			Net ➡	Packing/Unpacking		
			✱Incl. Prof. Books, Papers, & Equip. weighing.	Other Accessorial Services		
				TOTAL ➡		0.00
			BL #:	26. Tariff/Tender/Special Rate Authority		
				27. Issuing Officer (Name, title, address, phone number, e-mail)		

*Issued at lowest valuation cited in appropriate tender or tariff unless otherwise stated hereon.

28. For Use of Paying Officer (does not affect carrier charges)

Certificate for Receipt of Shipment & BL		Unauthorized Items		Excess Distance		**Other (explain under remarks)**
		Excess Valuation		Excess Weight		

29a. Name of Transportation Company (Phone & fax numbers, e-mail)	29b. Date of Receipt of Shipment *(MM/DD/YYYY)*	29c. Signature of Agent/Driver	29d. Per

Applicable Destination Information

30a. Date *(MM/DD/YYYY)*	30b. Actual Delivery Point	30d. Delivered This Consignment To ➡	☐ Storage In Transit ☐ Residence

30c. Name of Delivering TSP	30e. Complete & in Apparent Good Order Except as May be Indicated Hereafter ➡	☐ Storage	☐ Damage	☐ Carrier OS&D Report Attached
30f. Name of Destination TSP	30g. Signature of TSP's Authorized Agent			

↕TSP to execute & attach Certificate of Storage & Liability for shipment placed in storage in transit.

Clear All Fields