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CHARGE:	CALLED IN BY:		DATE:		DEL. RT. P.U.
	YOUR FILE NO.:				WT. MIN
P.U. FROM:	DELIVER TO:			<input type="checkbox"/> ASAP (1 Hr.)	LBS.
				<input type="checkbox"/> RUSH (2 Hrs.)	POS
INSTRUCTIONS:				<input type="checkbox"/> REG. (4 Hrs.)	COD
					FEES ADVANCED
SIGNATURE OF RECIPIENT (PRINT NAME):				TIME	MSGR1
CONTROL #				MSGR2	CK. CHR.G.
					TOTAL