CAROLINA TRANSPORT SOLUTIONS LLC. BROKER – CARRIER LOAD TENDER AND RATE CONFIRMATION		
Name of Carrier:		Load Number:
Fax/Email:	Date:	Pickup Date:
Origin:	Destination:	Commodity & Weight:
MC, A LI	R/CARRIER TERMS AND CO	R BY, ER, PURSUANT TO WRITTEN SIGNED CONTRACTS, IF NDITIONS FOUND AT WWWCOM
Shipment Information:		
Special Service Require	ements:	
Communications and Ir	nvoicing Requirements:	
Send Freight Bills to:		MUST INCLUDE THIS COPY OF CONFIRMATION, P.O.D. AND INVOICE
AGREED RATE:		CARRIER SIGNATURE: