Move Date: Shipper: Phone:	Time:	Bill of Lading Invoice # Movers were paid \$ CC CASH	Sebastian Moving St Louis 314-333-9883 1059 Rockman Pl St Louis MO 63119
ontained in the moving ag ne Mover sign this contrac		that there is no obligation be not cover internal damage	uidelines. I do agree to the terms y either party until both the Shipper and to electronics. The maximum claim for
	Points:	Hourly Ra Man Control Trucks 2 Hour Min Addl Hours Oversize Fee Start Time Break Finish Time Total Start Start Total	rew Pack
Estimated Move Price: Print Name: Signature: Date:	Shipper	B D	Packing W P TV M Total Move Price
	ee the charge of \$		Mover Signature: Date:

I agree to all charges x