

**XPO STACKTRAIN – RAIL BILLING FORM**

Contract Holder Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Shipper Name: \_\_\_\_\_

Customer Code: \_\_\_\_\_ Quote #: \_\_\_\_\_

Service Origin: \_\_\_\_\_ Serve Destination: \_\_\_\_\_

Service Type: RR RP PR DP \_\_\_\_\_

Inbound: Yes No IT/TE #: \_\_\_\_\_

Vessel/Voyage #: \_\_\_\_\_ Port of Discharge: \_\_\_\_\_

Reference / Booking #: \_\_\_\_\_

Notify Party: \_\_\_\_\_

Notify Name #: \_\_\_\_\_ Notify Phone or e-mail: \_\_\_\_\_

Fumigate? Yes No Stop Off? Yes No City: \_\_\_\_\_

Container #	Box Type	Box Size (Lgt/Hgt)	Cargo Weight	Empty?	D&H?		# of D&H Pages
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____
_____	_____	_____	_____	Yes	No	Yes	No _____

Over dimensional? Yes No Size: \_\_\_\_\_

Commodity: \_\_\_\_\_

If Running Reefer, Temp: \_\_\_\_\_