

FREIGHTWAY LOGISTICS

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WAREHOUSE RECEIPT

Receipt Number: _____

Date Received: _____

Depositor (Owner) Name and Address:

Warehouse Facility Name and Address:

Item #	Description of Goods	Qty	Weight	Condition on Receipt

Storage Terms and Conditions:

Special Handling Instructions:

Warehouse Agent Signature:

Date: _____

Depositor Signature: _____

Date: _____