S&L DISPATCHING

Lumper Payment & Reimbursement Request

Complete and attach supporting records. Broker approval is required for additional charges.

Carrier legal name

Broker company

Load number

Pickup / delivery facility

Facility city and state

Service date and time

Lumper provider / receipt number

Amount paid ($)

Payment method / paid by

Broker approval name and time

Broker reimbursement amount ($)

Receipt attached (yes/no)

Rate confirmation updated (yes/no)

Submitted by / date