



Old Dominion Freight Line, Inc.

Letter of Authority for a Reconsignment

Today's Date _____

Pro number of shipment to be reconsigned _____

I _____ as a duly Authorized
(printed name)

representative of _____
(printed company name)

(mailing address)

(City) (State) (Zip)

Request the above pro number to be reconsigned per the following information. I understand all charges* will be the sole responsibility of the above named Company and will be billed to said Company.

Signature _____ Title _____

*May include, but are not limited to Original pro charges, relabeling, storage, sorting, etc.

New Consignee's name _____

Address _____

City _____ State _____ Zip _____

Return Authorization number _____ (If required)

Fax completed form to the Old Dominion Terminal listed below.

Old Dominion Use Only

(Terminal Fax Number)

(Terminal Phone Number)

Attn: O S & D

Terminal Alpha Code _____

ODFL Contact Person _____

New Pro Number _____