

Date:		BILL OF LADING				Page _____		
<b>SHIP FROM</b>						Bill of Lading Number: _____		
Name: Address: City/State/Zip: SID#:		FOB:				BAR CODE SPACE		
<b>SHIP TO</b> Name: Address: City/State/Zip: CID#:		Location #: _____ FOB:				<b>CARRIER NAME:</b> _____ Trailer number: Seal number(s):		
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> Name: Address: City/State/Zip:						<b>SCAC:</b> <b>Pro number:</b> BAR CODE SPACE		
<b>SPECIAL INSTRUCTIONS:</b>						<b>Freight Charge Terms:</b> (freight charges are prepaid unless marked collect) Prepaid _____ Collect _____ 3 <sup>rd</sup> Party _____ Master Bill of Lading: with attached (check box) underlying Bills of Lading		
<b>CUSTOMER ORDER INFORMATION</b>								
<b>CUSTOMER ORDER NUMBER</b>		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	<b>ADDITIONAL SHIPPER INFO</b>			
				Y	N			
				Y	N			
				Y	N			
				Y	N			
				Y	N			
<b>GRAND TOTAL</b>								
<b>CARRIER INFORMATION</b>								
<b>HANDLING UNIT</b>		<b>PACKAGE</b>		<b>WEIGHT</b>	<b>H.M. (X)</b>	<b>COMMODITY DESCRIPTION</b> <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	<b>LTL ONLY</b>	
<b>QTY</b>	<b>TYPE</b>	<b>QTY</b>	<b>TYPE</b>				<b>NMFC #</b>	<b>CLASS</b>
<b>RECEIVING STAMP SPACE</b>								
<b>GRAND TOTAL</b>								
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: Noting a value is not a request for Additional Cargo Liability under OD Rules 100, Item 574 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						<b>COD Amount:</b> \$ _____ <b>Fee Terms:</b> Collect: Prepaid: Personal/company check NOT acceptable: <input type="checkbox"/>		
						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
						<b>Shipper Signature</b>		
<b>SHIPPER SIGNATURE / DATE</b> <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.</small>		<b>Trailer Loaded:</b> Freight Counted: By Shipper By Driver By Driver/pallets said to contain By Driver/Pieces				<b>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</small> <small>Property described above is received in good order, except as noted.</small>		

