A logo with text on it

AI-generated content may be incorrect.

**BOL**

FNS PRO#: [insert our load #]

Reference#: [customer ref#]

19027 S Jodi Road, Unit G

Mokena, IL 60448

Office: 708-570-1040

Email: [insert dep’t email]

Contact: [insert CS rep phone]

**Shipment Requirements:**

[Include Pre-Shipment Requirements]

**Stop 1:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Stop 2:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Stop 3:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Stop 4:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Stop 5:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Stop 6:** [Scheduled Date, Time] at [Shipper Name, Street Adress, City, State Zip Code, Gate: and/or Dock: ]

**Actions:** [Include Stop Requirements]

**Post-Shipment Requirements:**

[Include Post-Shipment Requirements]

**Pieces Piece Type Commodity Weight Volume (CBM)**

[Total Pieces] [pallet, crate, box, etc] [Pharma, Hazardous, etc.] [Weight in lbs.] [Volume in CBM]

**Consignee**

[Enter consignee Name]

[Street Address]

[City, State Zip Code]

[**Gate:** and/or **Dock:** ]

**Shipper**

[Enter shipper. (Refers to international shipper). For now, this will always be blank. Also remove the title “**Shipper**” if no shipper information is entered, which it won’t for now]

Tracking #

123456789

QR CODE

**Delivery to:** [Shipper Name]

[Street Address]

[City, State Zip Code]

[**Gate:** and/or **Dock:** ]

**Delivery at:** [Scheduled Date, Time]

**Delivery #:** [Insert Delivery #]

**Receiver Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_**

**Pickup from:** [Shipper Name]

[Street Address]

[City, State Zip Code]

[**Gate:** and/or **Dock:** ]

**Pickup at:** [Scheduled Date, Time]

**Pickup #:** [Insert Pickup #]

**Shipper Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sign:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_**

**MAWB:** [insert MAWB, leave out Title **MAWB** if nothing entered]

**HAWB:** [insert HAWB, leave out Title **HAWB** if nothing entered]

**Flight Date:** [insert Flight Date, leave out…]

**Incoterm:** [enter 1 of the 11 int’l standardized terms, leave out…]

**Insurance:** [enter Insurer, leave out…]

**Truck Type:** [Insert as (TCV or Dry then Truck Type)]

**Trailer Set Point:** [Insert reefer temp in F, list as ‘Dry’ if not reefer]

**Standards:** [Insert ‘(Certification) Standards Compliant’]

[Enter ‘Standards as relates to attached’