



Date: _____		BILL OF LADING		Page _____					
SHIP FROM				Bill of Lading Number: _____ <div style="text-align: center; font-weight: bold; color: #ccc;">BAR CODE SPACE</div>					
Name: _____ Address: _____ City/State/Zip: _____ SID#: _____ FOB: <input type="checkbox"/>									
SHIP TO									
Name: _____ Location #: _____ Address: _____ City/State/Zip: _____ CID#: _____ FOB: <input type="checkbox"/>									
THIRD PARTY FREIGHT CHARGES BILL TO:				CARRIER NAME: _____ Trailer number: _____ Seal number(s): _____ SCAC: _____ Pro number: _____ <div style="text-align: center; font-weight: bold; color: #ccc;">BAR CODE SPACE</div>					
Name: _____ Address: _____ City/State/Zip: _____									
SPECIAL INSTRUCTIONS: _____									
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO			
				Y	N				
				Y	N				
				Y	N				
				Y	N				
				Y	N				
GRAND TOTAL									
CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY		
QTY	TYPE	QTY	TYPE			NMFC #	CLASS		
RECEIVING STAMP SPACE									
GRAND TOTAL									
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: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						COD Amount: \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B). RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">Signature _____ Shipper</div>			
SHIPPER SIGNATURE / DATE <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>				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP DATE <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. <i>Property described above is received in good order, except as noted</i></small>	