

STRAIGHT BILL OF LADING – SHORT FORM – ORIGINAL – NOT NEGOTIABLE

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier

of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

From **1**
At **2** **3** 20 _____ DESIGNATE WITH AN (X) BY TRUCK FREIGHT **4**
Carrier **6** Shipper's No. **5**
Agent's No. **7**
(Mail or street address of consignee—For purposes of notification only.)

Consigned to **8**
Destination **9** State of _____ County of _____
Route **10**

Delivering Carrier **11** Vehicle or Car Initial **12** No. _____

No. Packages 13	Kind of Package, Description of Articles, Special Marks, and Exceptions 14	*Weight (Sub. to Cor.) 15	Class or Rate 16	Check Column

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. **17**
Per _____
(Signature of Consignor.)
If charges are to be prepaid, write or stamp here, "To be Prepaid." **18**
Received \$ **19** _____ to apply in prepayment of the charges on the property described hereon.
Agent or Cashier
Per _____
(The signature here acknowledges only the amount prepaid.)
Charges Advanced: **20** _____
C O D . S H I P M E N T
Prepaid Collect \$ _____ **21**
Collection Fee _____
Total Charges _____
*If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "Carriers or Shippers weight."
†Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Department of Transportation.
NOTE—Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
THIS SHIPMENT IS CORRECTLY DESCRIBED. CORP. WEIGHT IS **22** _____ LBS.
DECLARED VALUE IF SO STATED \$ _____
Subject to verification by the Respective Weighing and Inspection Bureau According to Agreement.
Per _____

TOTAL PIECES _____
The fibre containers used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Rule 41 of the Uniform Freight Classification and Rule 5 of the National Motor Freight Classification. Shipper's imprint in lieu of stamp, not a part of bill of lading approved by Interstate Commerce Commission.

Agent, Per **25** Shipper, Per _____

Permanent post-office address of shipper **26** _____

INSTRUCTIONS FOR PREPARING THE STRAIGHT BILL OF LADING

1. Shipper (From) – Enter the company name and address of the shipper (Consignor).

2. Point of Origin (At) – Enter the city and state of the actual shipping point.

3. Date of Shipment – Enter the date of the shipment, the date the Carrier took control of the merchandise.

4. Truck/Freight – check the Truck block if shipment is to move by truck, or the Freight block if the shipment is to move by rail.

5. Shipper's No. – Enter a unique control number to reference the shipment with the Carrier.

6. Carrier – Enter the name of the Company which will take initial control of the shipment and cause its delivery to the consignee.

7. Agent's No. – Enter Carrier's control number, if known or required.

8. Consigned to – Enter the full name of the final recipient of the shipment, the ultimate consignee; also enter the mailing or street address of the ultimate consignee, if different than destination, for Carrier notification purposes.

9. Destination – Enter the street address, city, and zip code where the Carrier will make delivery to the Consignee in Field 8.

10. Route – If applicable, enter the route the Carrier will take to the consignee. This Field may also be used to specify docks, warehouses, etc., and to specify any intermediate Carriers.

11. Delivering Carrier – If applicable, specify the carrier which will deliver the shipment to the ultimate consignee at the Destination, but only if different than the Carrier entered in Field 6.

12. Vehicle/Car No. – Enter any vehicle identifying numbers or initials, if applicable.

13. No. Packages – Enter the total number of packages per line item; if the packages are consolidated on a pallet or in an outer container, note this

information on a second line. Ex: 112 PKGS 3 Pall.

14. Description of Shipment

– Enter the description of each line item, noting the type of package (carton, barrel, etc.) and the quantity per package. Since the correct freight classification is essential in describing an item, there must be a separate line item for each different freight classification description. If more than one type of packaging is used per freight classification, a separate entry must be used for each type of package. Enter any special package markings, special handling requirements, and delivery instructions. Note: For hazardous material items, special provisions must be met in completing this field.

15. Weight – Enter the total gross weight, in pounds, for each line item. For Bulk shipments, the TARE and Net weights should also be referenced in the description field. For package shipments, include the weights of pallets and skids. The total weight of the merchandise should be shown after the last line item, with pallet and dunnage weights shown separately.

16. Class or Rate – Enter either the 5-digit class (per the Uniform Freight Classification or the National Motor Freight Classification) or a two digit Class Rate (a percentage of the First class 100 rate) per line item. This information may be determined by contacting the Carrier.

17. Without Recourse – Per standard Bill of Lading terms, the shipper is ultimately liable for freight charges, even when the shipment is sent on a collect basis to the consignee. By signing this statement, the shipper is released from the liability of freight charges for collect shipments delivered by the Carrier to the consignee without the Carrier's collecting the freight charges. For prepaid shipments, leave blank.

18. Prepaid Shipments – Enter "Prepaid" if shipment is to be paid for by the Shipper. If this Field is left

blank, the Carrier will seek to collect the freight charges from the consignee (see Field 17).

19. Prepayments Received – Carrier enters any payments received in advance from the shipper for the shipment.

20. Charges Advanced – Carrier enters any advanced charges for the shipment, if applicable.

21. C.O.D. Shipment – First, check whether the freight charges are prepaid (the Carrier bills the shipper) or collect (the Carrier deducts the freight charges from the amount collected from the Consignee). Second, enter the amount to be collected for the merchandise itself – be sure to include the freight charges. Third, enter any collection fees, if applicable. Enter total charges to be collected by Carrier.

22. Shipment Declared Value – When the weight charged by the Carrier is dependent upon the value of the shipment, the dollar value per unit of measure (ex: \$100.00/pound) must be stated by the Shipper – enter this information in Field 14.

23. Shipper – Enter the company name of the shipper.

24. Shipper's Agent – Enter the signature of the individual preparing the shipment for the shipper.

25. Carrier's Agent – The Carrier's agent will sign here prior to taking control of the shipment.

26. Permanent Address – Enter the permanent (business) mailing address of the shipper. This may be the same as for Field 1.

27. Certification – A signature is required by the Department of Transportation after this statement for all shipments of hazardous material.