



Shipment #	Shipping Date	Truck Number	Trailer Number	Carrier Signature
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Shipper Name	Consignee Name
Shipping Address	Consignee Address
City State Zip Code	City State Zip Code
Shipper Phone Number HAZMAT 24 Hour Number	Consignee Phone Number P.O. Number
Shipper Shipment Number Special Requirements	Special Requirements

Driver Time IN Driver Time OUT	Driver Time IN Driver Time OUT
Shipper Signature	Consignee Signature
Shipper Print Name	Consignee Print Name

No of Pieces	Packaging	HAZMAT	Description of Articles, Special Marks, and Exceptions	Length	Dimensions Width	Height	Weight and Measure

FREIGHT CHARGES

<input type="checkbox"/> PREPAID	<input type="checkbox"/> COLLECT	<input type="checkbox"/> THIRD PARTY PAYORS NAME: BILLING ADDRESS:
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DECLARED VALUE \$ _____ DECLARED VALUE Maximum Liability \$2.00/pound unless declared value states otherwise.	PROTECTIVE SERVICE _____ REQUIRED TEMPERATURE If product(s) to be protected from Heat or Frost, state required temperature.	C.O.D. \$ _____ AMOUNT If a C.O.D. is to be collected state the amount to be collected
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NOTICE OF CLAIM (a) No carrier is liable for loss, damage or delay to any goods under the Bill of Lading unless notice thereof setting out particulars of the origin, destination and date of shipment of the goods and the estimated amount claimed in respect of such loss, damage or delay is given in writing to the originating carrier or the delivering carrier within sixty (60) days after the delivery of the goods or in the case of failure to make delivery within nine (9) months from the date of shipment. (b) The final statement of the claim must be filed within nine (9) months from the date of shipment together with a copy of the paid freight bill.