

**STRAIGHT BILL OF LADING - SHORT FORM
ORIGINAL - NOT NEGOTIABLE**



164 Northwest Industrial Ct.
Bridgeton, MO 63044
Phone: 314-209-7333
Fax: 314-209-1716

SHIPPER NO.

DATE SHIPPED

To:

Consignee	
Street	
Destination	Zip

From:

Shipper	
Street	
Origin	

NO. PACKAGES	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT	RATE	CHARGES
<small>Subject to Section 7 of conditions, 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.</small>		<small>C. O. D. FEE TO BE PAID BY</small> SHIPPER <input type="checkbox"/> CONSIGNEE <input type="checkbox"/>		C. O. D. AMOUNT C. O. D. FEE
(Signature of Consignor) _____ <small>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 outward 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. 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 Department of Transportation.</small>		ADDRESS _____		TOTAL CHARGES FREIGHT CHARGES ARE PREPAID UNLESS MARKED COLLECT. CHECK BOX IF CHARGES ARE COLLECT. <input type="checkbox"/>

SHIPPER NAME	CARRIER NAME	NUMBER OF PIECES RECEIVED
AUTHORIZED SIGNATURE	AUTHORIZED SIGNATURE	

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