



BILL OF LADING

SHORT FORM — NON NEGOTIABLE

Ship From		BOL Number	
Name: Address: City/State: Phone:			
Ship To		Carrier Information	
Name: Address: City/State: Phone:		Name: USDOT/MC: Truck: Trailer:	
Qty.	Weight (lbs)	Description	Serial/VIN #
Special Instructions			
Shipper Signature		Carrier Signature	
Signature: x _____		Signature: x _____	
Date: _____		Date: _____	
		Consignee Signature	
		Signature: X _____	
		Date: _____	