GS1 Standard BOL: [WWW.GS1US.ORG](http://WWW.GS1US.ORG/) for complete GS1 BOL Guideline Information

|  |  |
| --- | --- |
| Date: **BILL OF LADING** | **Page**  |
|  **SHIP FROM**  | **Bill of Lading Number:** **BAR CODE SPACE** |
| Name: |
| Address: |
| City/State/Zip: |
| SID#: FOB: |
|  **SHIP TO** Name: Location #:  | **CARRIER NAME:** Trailer number: |
| Address: | Seal number(s): |
| City/State/Zip: | **SCAC:** |
| CID#: FOB: | **Pro number:** |
| **THIRD PARTY FREIGHT CHARGES BILL TO:**Name: | **BAR CODE SPACE** |
| Address: |  |
| City/State/Zip: | **Freight Charge Terms:*****(freight charges are prepaid unless marked collect)*** |
| SPECIAL INSTRUCTIONS: | **Prepaid Collect 3rd Party**  |
|  | (check box) | Master Bill of Lading: with attached underlying Bills of Lading |  |
|  | **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** |  |  | **COMMODITY DESCRIPTION** | **LTL ONLY** |
| **QTY** | **TYPE** | **QTY** | **TYPE** | **WEIGHT** | **H.M.****(X)** | Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.***See Section 2(e) of NMFC Item 360*** | **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 declaredvalue of the property as follows: Noting a value is not a request for Additional Cargo Liability under OD Rules 100, Item 574.“The agreed or declared value of the property is specifically stated by the shipper to be not exceeding per .” | **COD Amount: $** **Fee Terms: Collect: Prepaid: Personal/company check NOT acceptable:** |
| **NOTE - Liability Limitation applies. See OD Rules 100, Items 574 and 594.** |
| RECEIVED, subject to the rates, classifications and rules that have been established by the Carrier and are available on request to the Shipper (Shipper defined in 49 U.S.C.A. § 13102(13)(c)), and to all applicable state and federal regulations. Shipper 1) warrants it has read all applicable contract(s) or Carrier’s applicable tariff(s) and the limitation of liability provisions set forth therein; and 2) has actual knowledge of and accepts the applicable contract or tariff terms, including the limits on carrier liability. Carriers’ tariff(s), including OD Rules 100, take precedence in the event of any terms or conditions conflicts. | The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.**Shipper Signature** |
| **SHIPPER SIGNATURE / DATE**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. | Trailer Loaded: Freight Counted:By Shipper By ShipperBy Driver By Driver/pallets said to containBy Driver/Pieces | **CARRIER SIGNATURE / PICKUP DATE**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.***Property described above is received in good order, except as noted.*** |

6