Straight Bill of Lading — Short Form
Original — Not Negotiable

Shippers No. __________________
Carrier’s No. __________________

(Name of Carrier)

Received, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading

19 From

Consigned to

Destination State Country Delivery address

Route

Delivery Carrier Car or Vehicle initials No.

No. Packages Kind of Package, Description of Articles, Special Marks, and Exceptions

* Weight (Subject to Correction)

Class or Rate

Check Column

C.O.D. charge

Shipper

Consignee

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. (Signature of consignor)

If charges are not to be prepaid, write or stamp here, "to be prepaid."

Received

to apply in prepayment of the charges on the property hereon.

Agent or Cashier

Par

(The signature here acknowledges only the amount prepaid.)

Charges Advanced:

$ ______________________

Shippers imprint in lieu of stamp; not a part of Bill of Lading approved by the Interstate Commerce Commission.

- If the shipment moves between two points by a carrier by water, the law requires that the bill of lading shall state whether it is carrier’s or shippers weight.

NOTE — Where the rate is dependent on the value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding ____________________ per

This is to certify that the above named articles are properly classified, described, packaged, marked and labeled, are in the proper condition for transportation, according to the applicable regulations of the Department of Transportation.

Shipper, Per

Agent, Per

permanent post-office address of shipper, ______________________________________________________________

The fibre boxes used for this shipment conform to the specifications set forth in the box maker’s certificate thereon, and all other requirements of the Consolidated Freight Classification.

FORM #49

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This is to certify that the above named articles are properly classified, described, packaged, marked and labeled, are in the proper condition for transportation, according to the applicable regulations of the Department of Transportation.

Shipper, Per

Agent, Per

permanent post-office address of shipper, ______________________________________________________________

The fibre boxes used for this shipment conform to the specifications set forth in the box maker’s certificate thereon, and all other requirements of the Consolidated Freight Classification.

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