One Distribution

STRAIGHT BILL OF LADING -- SHORT FORM

ONE DISTRIBUTION LLC
310.408.0865 --- 507.399.3281

SHIP FROM:

SHIP TO:

BILL OF LADING #:
SHIPPERS #
SHIP DATE:
PHONE #:

P.O. #:
DUE DATE:
PHONE #:
DELIVERY HOURS:

TRUCK ROUTE:	CARRIER	VEHICLE & TRAILER NUMBER

QUANTITY:	ITEM:	DESCRIPTION:	WEIGHT
0	TOTALS		

SPECIAL INSTRUCTIONS:

FREIGHT CHARGES:

REMARKS:

CARRIER MAY NOT SUBSTITUTE SERVICES

SHIPMENTS ARE TENDERED & ARE TO BE DELIVERED IN A SORTED & SEGREGATED MANNER; DRIVER LOAD & COUNT, DRIVER UNLOAD & COUNT IS REQUIRED.

IF THIS SHIPMENT IS TO BE DELIVERED TO THE CONSIGNEE WITHOUT RECOURSE ON THE CONSIGNER SHALL SIGN THE FOLLOWING STATEMENT: "THE CARRIER SHALL NOT MAKE DELIVERY OF THIS SHIPMENT WIHTOUT PAYMENT OF THE FRIEGHT & ALL OTHER CHARGERS.
SIGNATURE:

COLLECT ON DELIVERY:

REMIT TO:

CHARGE C.O.D. FEE TO:

SHIPPED BY: SHIPPER/DRIVER: _____ DATE: _____

RECEIVED COMPLETE & IN GOOD CONDITION BY: CARRIER(S): _____ DATE: _____

_____ DATE: _____

CONSIGNEE: _____ DATE: _____