



STRAIGHT BILL OF LADING-ORIGINAL-NOT NEGOTIABLE

This form contains only the basic information necessary for the carrier to deliver and invoice the shipment as detailed below. The shipper or consignee are the client of All Freight Systems Inc., a vendor, or 3PL and payer of the freight invoice. All agreements between the carrier and All Freight Systems are superceded beyond this Lading.

Ship Date:

Shipper:

Name:
Address:

Carrier

Name:
Pro #:
Load#:

Consignee:

Name:
C/O:
Address:

Freight Charges Bill To:
Bushnell C/O:
All Freight Systems Inc.
1134 South 12th Street
Kansas City, KS 66105

Cust Pick Up #: _____

Product Description:

SKU#'s:	Qty	Pallets	Weight	Class	Hazardous
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*					
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Handling Instructions:

Shipper attests that the product is in proper condition and fit for transportation as set forth in the code of federal regulations and the Federal Highway Administration. All product is properly marked and compliant with the Department of Transportation with regard to weight, classification, and labeling.

Shipper: _____	Date: _____	Seal#: _____
Consignee: _____	Date: _____	Seal#: _____
Driver: _____	Date: _____	Seal# _____