



BILL OF LADING – SHORT FORM – NOT NEGOTIABLE

SHIP FROM	Bill of Lading Number:
SHIPPER: _____ ADDRESS: _____ CITY, ST ZIP CODE: _____ SID No.: _____	AMERICAN VETERANS LOGISTICS, LLC 16347 230 TH AVE NW, ELK RIVER, MN 55330 866.475.4601 TRUCK: _____ TRAILER: _____
SHIP TO	
CONSIGNEE: _____ ADDRESS: _____ CITY, ST ZIP CODE: _____ CID No.: _____	
THIRD PARTY FREIGHT CHARGES BILL TO	SCAC: AVLO
Company: _____ ADDRESS: _____ CITY, ST ZIP CODE: _____	Pro Number: _____
Special Instructions:	Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.

CUSTOMER ORDER INFORMATION					
Customer Order No.	# of Packages	Weight	Pallet/Slip (circle one)		Additional Shipper Information
			Y	N	
			Y	N	
			Y	N	
			Y	N	
Grand Total					

CARRIER INFORMATION									
Handling Unit		Package				LTL Only			
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description		NMFC No.	Class
							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		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."	COD Amount: \$ _____ Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>
---	--

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications, and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. Shipper Signature _____
Shipper Signature/Date _____ This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver Freight Counted: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By 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 DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.