



**HANDLE
WITH CARE
EXPRESS**

PO BOX 649
BOUNBROOK, NJ 08805
P (732) 563-0533 F (123) 456-7890

#

DATE

SHIPPER

NAME

STREET

CITY ST ZIP

CONSIGNEE

NAME

STREET

CITY ST ZIP

SHIPPER B/L #		SPECIAL INSTRUCTIONS		
NO. PIECES	DESCRIPTION OF ARTICLES & SPECIAL REMARKS	WEIGHT	MILES	TOTAL CHARGES

DECLARED VALUE

YOUR DECLARED VALUE DAMAGED OR LOSS

We are liable for no more than \$50,000 per shipment in the event of physical loss or damage unless you fill in a higher Declared Value and document higher actual loss in the event of a claim.

CONSEQUENTIAL DAMAGES

We will not be responsible or liable for any loss of damage resulting from delay, non-delivery or damage to a shipment except as noted above. This includes loss of sale income, interest profits, attorneys fees and other costs, but is not limited to these items. Such damages are called "consequential damages."

PREPAID	COLLECT	OTHER
TRUCK #		
SPECIAL HANDLING REQUIRED		
AIR RIDE		
COD AMOUNT \$		
NOTES		

DELIVERY RECORD

Received shipment described above in good order and condition except as noted.

SIGNATURE

PRINT

SHOW COMPLETE COMPANY NAME AND SIGNATURE. **INITIALS NOT ACCEPTED.**

TIME DATE

DELIVERED BY

DRIVER'S NAME

L O A D	SCHEDULE	DATE	TIME	AM	PM
	ARRIVED				
	DEPARTED				

U N L O A D	SCHEDULE	DATE	TIME	AM	PM
	ARRIVED				
	DEPARTED				