

Straight Bill of Lading

Shipper Name

Shipper Address

Date

Consignee Name

Consignee Address

Bill of Lading No.

Carrier Name

Carrier Address

Carrier Phone

Shipment Details

Origin

Destination

Route

Special Instructions

Freight Description

Quantity	Description of Goods	Packaging Type	Weight	Class	NMFC #

Total Weight

Freight Charges

Notes / Instructions

Shipper Signature

Carrier Signature

Consignee Signature