

Bill of Lading

Carrier: _____

Date: _____

Bill of Lading #: _____

PO #: _____

Shipper/Consignor: _____ BW# _____

Consignee: _____ BW# _____

Instructions: _____

Item Code	Description	Alc %	Quantity	(Unit)
Total				

Tax Status: Bond to Bond Transfer Tax Paid

Shipper: Pick Up Date: _____

Carrier: Pick Up Date: _____

Signature: _____

Signature: _____

This section is to make it sure that all materials are properly classified, described, packaged, marked and labeled and are in good condition to be transported and according to the applicable regulations of transporting department.

Carrier acknowledges receipt of packages and that they are properly described as above and are in good order except as noted.

Received in Apparent Good Order

Received By: _____ (Signatures)
 Print Name Here: _____
 Date: _____