

SHIPPER PLEASE NOTE

FREIGHT CHARGES ARE PREPAID ON THIS BILL OF LADING UNLESS MARKED COLLECT

STRAIGHT BILL OF LADING - ORIGINAL - NOT NEGOTIABLE



ABF FREIGHT SYSTEM, INC.
P.O. BOX 10048
FORT SMITH, AR 72917

abf.com

800-610-5544 ABFS

PLACE PRO LABEL HERE

Shipper's Bill of Lading No. _____

Consignee's Reference/PO No. _____

On 'Collect On Delivery' shipments, the letters "COD" must appear before consignee's name or as otherwise provided in item 430, Sec. 1.

CONSIGNEE

TO: **NMMA – National Marine Manufacturers Association – 593812**

NAME PLUS

STREET

CITY/ST/ZIP

Check box if consignee contact required prior to delivery.

Consignee telephone _____

TRAILER NUMBER

B/L DATE

ROUTE

ABF FREIGHT SYSTEM, INC.

SPECIAL INSTRUCTIONS

SHIPPER

FROM: **(EXHIBITOR)**

NAME PLUS

STREET

CITY/ST/ZIP

FOR PAYMENT, SEND BILL TO:

NAME

STREET

CITY/ST/ZIP

Collect on Delivery \$ _____ and remit to _____

Street _____ City _____ State _____

Carrier must collect cash, money order, bank cashier's check, or bank-certified check unless shipper signs here to accept company check.

Signed: _____

C.O.D. charge to be paid by

Shipper

Consignee

Hdlg Units No. Type	Packages No. Type	* HM	Kind of Package, Description or Articles, Special Marks and Exceptions (subject to correction)	Weight (subject to correction) (LBS)	Class or Rate Ref. (for info. only)	Cube (optional) (CuFT)

* Mark "X" to designate Hazardous Materials as defined in DOT regulations.

NOTE (1) 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 _____."

NOTE (2) Liability Limitation for loss or damage on this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A)(B).

NOTE (3) 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 Sec. (2)e of NMFC item 360.

Notify if problem en route or delivery _____ Name _____ Tel No. _____ Fax No. _____ (for informational purposes only)

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. Every service to be performed hereunder shall be subject to all terms and conditions of the uniform bill of lading set forth in the National Motor Freight Classification. The shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns. See item 780-1 ABF 111 rules for general liability limitations and for additional coverage available at additional expense.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation, according to the applicable regulations of the Department of Transportation. Additionally, by signature on this bill of lading, Shipper authorizes consent to the Transportation Security Administration (TSA) to screen the shipment when transportation of the shipment requires movement via an air carrier.

SHIPPER

PER (SIGNATURE REQUIRED)

Freight charges are PREPAID unless marked collect CHECK BOX IF COLLECT

FOR FREIGHT COLLECT SHIPMENTS
If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

CARRIER **ABF FREIGHT SYSTEM, INC.**
PER _____ DATE _____
Driver signature only acknowledges receipt of freight