

ADVANTAGE LTL INC	BILL OF LADING	P/U #
--------------------------	-----------------------	--------------

SHIP FROM	
Name:	
Address:	
City/State/Zip:	
Phone#	

Bill of Lading Number:

SHIP TO	
Name:	BOOTH#
Address:	
City/State/Zip:	
Phone#	

CARRIER :

Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:	
Name: : ADVANTAGE LTL INC	
Address: 26489 Ynez Rd Ste c134	
City/State/Zip: Temecula, CA 92591	

Freight Charge Terms:
SEE 3RD PARTY BILLING INFO

SPECIAL INSTRUCTIONS:

<input type="checkbox"/>	Master Bill of Lading: with attached underlying Bills of Lading
(check box)	

CUSTOMER ORDER INFORMATION			
----------------------------	--	--	--

CUSTOMER ORDER NUMBER	# SKIDS	WEIGHT	ADDITIONAL SHIPPER INFO
PO#			

CARRIER INFORMATION							
---------------------	--	--	--	--	--	--	--

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
GRAND TOTAL								

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 U.S.C. § 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 freight and all other lawful charges.
 _____ 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:	Freight Counted:
<input type="checkbox"/> By Shipper	<input type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<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.