

(503) 597-1100

## STRAIGHT BILL OF LADING

					CDS Ref:		
					Shipper No:		
					Carrier No:		
					Date:		
	(Name of Carrier)						
TO:				FROM:			
Consignee:				Shipper:			
Address:				Address:			
Address:	-			Address:			
Destination:				Origin:			
Phone:		Ext.		Phone:		Ext.	<u> </u>
Customer PO:							
Comments:							
No Shipping	*HM		f Packaging, Description		Weight	Rate	Charges
Units			Special Marks and Exce	eptions	(Subject to Correction)		
				CARRIER BILL	CHARGES TO:	_	
					stribution Service	es, Inc.	
				PO Box 2305			
	۰.	EIV DD 0 1 ADEL 115		Portland, OR	97281		
AFFIX PRO LABEL HERE				This is to certify that the			CHARGES
				are properly classified, d	, ,	FREIGHT PREPAID except when box at	Check box if charges are
							to be collected
				regulations of the Depart	tment of Transportation.		
		ty described above in ap					
		nsigned, and destined as					
delivery at said	destina	ny person or corporation ation, if on its route, othe	rwise to deliver to anoth	ner carrier on the route	to said destination.	ils usuai piace oi	
SHIPPER: CARRIER:				CONSIGNEE:			
PER:			PER:		PER:		
EMERGENCY PHONE #: DATE:			DATE:		DATE:		
LIVERSENCT FROME #.			DATE.		DATE:		

Monitored at all times the Hazardous Material is in transportation including storage incidental to transportation (Section 172.604)

<sup>\*</sup> Mark with an "X" to designate Hazardous Material as defined in the Department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional method for identifying hazardous materials on bills of lading per Section 172.201(a)(1)(iii) of Title 49, code of Federal Regulations. Also, when shipping hazardous materials, the shipper's certification statement prescribed in Section 172.204(a) of the Federal Regulations must be indicated on the bill of lading, unless a specific exception from this requirement is provided in the Regulations for a particular material.