GCW RR Bill of Lading

Carrier: _____ **Date:** _____
Bill of Lading #: _____ **PO #:** _____
Order #: _____
Shipper/Consignor: _____
_____
Consignee: _____
_____
Instructions: _____
_____

Item Code	Details	Quantity	Weight (Unit)
	Total		

Terms: **Prepaid** [ ] **Collect** [ ] **Other** [ ]

Carrier: **Pick Up Date:** _____ **Signature:** _____

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

Shipper: **Pick Up Date:** _____ **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.

Received in Apparent Good Order

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