

Bill Of Lading



Load Number	
BOL Number	
Ship Date	
Delivery Date	
P.O. Number	
Freight Charges	Prepaid

Shipper	Consignee

3rd Party Billing	Transportation Company
CHAINLINK SOLUTIONS 333 SE 2ND AVE SUITE 2000 Miami, FL, 33131 Tel: 305-546-4443	

# of pieces	Description of the goods, marks, exceptions	Weight in LBS.	Type	NMFC	HM	Class
Total Pieces		Total Weight	Emergency Response Phone			

Notes: STRICT APPOINTMENTS -- CALL YOUR CHAINLINK REPRESENTATIVE WITH ANY QUESTIONS.	C.O.D. Amount: \$0.00
	C.O.D. Fee: Prepaid
	Declared Value: \$
	If at consignor's risk, write or stamp here

Shipper	Carrier	Date	Number Of Pieces Received
Per	Per	Time	

Consignee Name	Date	Signature	Number Of Pieces Received