Bill of Lading

STAMP HERE YOUR COMPANY NAME

	Work (Order Nos.	
			İ
11			Ī
EL	IVER	~	_

Name:		Name:		
Address:		Address:		
City:	ST:	City:	ST:	
Phone:		Phone:		
Contact:		Contact:		

VEHICLES							
	STOCK #	YEAR	MAKE	MODEL	VIN	MILEAGE	PRICE
1							0
2			vi vi				
3							
4							
5							
6							

A - Broken B - Bent C - Chipped D - Dented E - Defective F - Scuffed

G - Gouged H - Stained

J - Cut

K - Cracked L - Loose

M - Missing

N - Painted over P - Paint defect

O - Hail damage

R - Punctured W - Wavy S - Scratched X - Present

T - Torn Z - Other

TOTAL Terms: Net C.O.D.















DI	M	AI	DL	10
KL	. 141	ΑI	۲ <i>n</i>	(2)

Receiving agent must have driver Sign hare acknowledging damages

* NOTE - No claims will be honored unless noted on this Bill of Lading at time of delivery

PRINTED NAME AND SIGNATURE MUST ACCOMPANY DELIVERY

Printed Name

Shipper's agent at pick up

Pick up date

Shipper's agent at delivery

Delivery date

