

Web straight bill of lading—original—not negotiable



SCAC: RDWY

For shipment information, visit yrcfreight.com or call 1-800-610-6500

639-624383-X



Date: 10/07/2016

B/L number:

Shipper number:		Trailer number:	
Shipper name: SIMON ENTERPRISES CO			
Address: 10785 INDIAN HEAD INDUSTRIAL BLVD			
City: OLIVETTE	State: MO	ZIP code: 63132	
Origin city (if different than before):	State:	ZIP code:	
Invoicee:			
Address:			
City:	State:	ZIP code:	

PRO Number:

Consignee name and address: CIRCLE K/CORE MARK		
8313 W LATHAM ST STE B		
Destination City TOLLESON	State: AZ	ZIP Code: 85353
Phone Number:		
Customer number:	Store number:	Department:
P.O. Number:		
Special instructions:		

Contact Name:	Contact Phone:
<input checked="" type="checkbox"/> Standard	<input type="checkbox"/> Faster Standard
<input type="checkbox"/> Standard Guaranteed*	<input type="checkbox"/> Accelerated
<input type="checkbox"/> Guaranteed Standard Service by 5 p.m. or end of business day	<input type="checkbox"/> Expedited Guaranteed*
<input type="checkbox"/> Guaranteed Multiday Window Between: ___/___/___ & ___/___/___	<input type="checkbox"/> Time-Critical Deliver by: ___/___/___ <input type="checkbox"/> By noon <input type="checkbox"/> By 5 p.m. or end of business day
	<input type="checkbox"/> Time-Critical Hour Window Deliver on: ___/___/___ Between: ___ & ___
	<input type="checkbox"/> Time-Critical (fastest ground delivery – no delivery date required)
Quote I.D.: 16045860	<small>*guarantee only applies to direct service points</small>
All shipments are subject to individual pricing programs as published by YRC or by written transportation contracts.	

Cod fee: Prepaid <input type="checkbox"/> Collect <input type="checkbox"/>				COD amount: \$		Customer check OK for COD amount? Yes <input type="checkbox"/> No <input type="checkbox"/>					
No. shipping units	Kind of package	No. pieces	Unit of measure	HM	Description of articles, special marks and exceptions	NMFC item number	Class	Weight (lb) Subject to correction	Shipment dimensions		
									Length	Width	Height
4	PLT	96	CAS		APEX CLEAR WIDE			3072	51	48	82
1	PLT	19	CAS		APEX CLEAR WIDE			650	51	48	72
5		115			GRAND TOTAL			3722			

EMERGENCY CONTACT Phone: _____ Name: _____ Contract #: _____				Shipment charges are prepaid unless marked collect: Collect <input type="checkbox"/>		Total charges: \$	
NOTE (1) Where the rate depends on value, shippers must state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____.				Note (3) Products 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 Sec. 2(e) of NMFC item 360.			
Note: (2) Liability limitation for loss or damage on this shipment may be applicable. See 49 U.S.C. §14706 (c)(1)(A) and (B).				If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. Signature of consignor _____			
Received subject to individually determined rates or written contracts that have been agreed on in writing between the carrier and shipper, if applicable, otherwise to rates, classifications and rules that have been established by the carrier and are available to the shipper on request.							
The property described above is in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined, as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry its usual place of delivery of said destination, if on its route, otherwise to deliver to another carrier on the route to said destination.				It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.			
I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded and are in all respects in proper condition for transport according to applicable international and national governmental regulations.							
Shipper company name: SIMON ENTERPRISES CO		Carrier: YRC FREIGHT		Trailer #		Date:	
Shipper signature:		YRC Freight employee signature:		H/U received:		Trailer loaded by: <input type="checkbox"/> Shipper <input type="checkbox"/> Driver	
						Freight counted by: <input type="checkbox"/> Driver: pallets said to contain	
						<input type="checkbox"/> Shipper <input type="checkbox"/> Driver: pallets containing	
						<input type="checkbox"/> Driver: Loose pieces	

Mark "X" in "HM" column for hazardous materials.

Single shipment pickup: