

**FROM SHIPPER**

COMPANY  
**ACME SUPPLY COMPANY**

ADDRESS  
**123 AVENUE**

ADDRESS  
**SUITE A**

CITY + STATE / ZIP  
**ANYTOWN, USA 12345**

SENDER'S NAME  
**JOHN SMITH**

SHIPPER REFERENCE  
**P.O. #ABC123**

INSURED VALUE - (ALL RISK)  
**\$5,000.00**

SPECIAL INSTRUCTIONS/SERVICES REQUIRED  
**DELIVER TO DOOR #5**

SPECIAL DELIVERY BY **5:00 PM**

**TO CONSIGNEE**

COMPANY  
**ABC COMPANY**

ADDRESS  
**123 STREET**

ADDRESS  
**SUITE 1**

CITY + STATE / COUNTRY / ZIP  
**ANYWHERE, USA 34567**

ATTENTION  
**JANE DOE**

RECIPIENT REFERENCE  
**123456789**

DECLARED VALUE  
\$

THIRD PARTY

SHIP DATE  
**01/01/02**

ORIGIN CODE

DESTINATION CODE

BILL CHARGES TO  
 SHIPPER  
 CONSIGNEE  
 THIRD PARTY  
 OTHER (SPECIFY)

FREIGHT

PICKUP

DELIVERY

DECLARED VALUE FEE

INSURANCE FEE

RECEIVED BY CONSIGNEE IN GOOD ORDER (EXCEPT AS NOTED BY SIGNATURE X)

PRINTED NAME

DATE

TIME

ORDER TOTALS

PIECES	LENGTH	WIDTH	HEIGHT	DESCRIPTION OF CONTENTS - HAZARDOUS MATERIALS MUST BE NOTED	WEIGHT
1	75	X 50	X 19	MACHINE PARTS	515
2	12	X 12	X 12	PRINTED MATERIAL	60
3	48	X 40	X 50	ELECTRONIC EQUIPMENT	625

SENDER'S SIGNATURE (CONDITIONS ON REVERSE APPLY)  
**X John Smith**

TOTAL PIECES  
**6**

TOTAL WEIGHT (AS SHIPPED TO CONSIGNEE)  
**1200**

RECEIVED BY CONSIGNEE IN GOOD ORDER (EXCEPT AS NOTED BY SIGNATURE X)

PRINTED NAME

DATE

TIME

ORDER TOTALS

OTHER

ADVANCES

SHIPPER'S C.O.D.  
 CASHIER'S CHECK  
 COMPANY CHECK

CONDITIONS ON REVERSE APPLY  
C.O.D. AMOUNT

C.O.D. FEE

TOTAL CHARGES US\$

AR WAYBILL NO

PICKED UP FOR ADCOM BY

DATE

TIME  
\_\_\_ AM  
\_\_\_ PM

NO. PIECES

LOCATION  
\_\_\_ DOCK  
\_\_\_ FRONT DESK  
\_\_\_ OTHER

NON-NEGOTIABLE AIR WAYBILL SUBJECT TO CONDITIONS OF CONTRACT ON REVERSE