

# Hargrove, Inc.

Bill of Lading #

INSTRUCTIONS: Please complete all shaded areas and return to the Hargrove Service Center when all materials have been packed, labeled and ready for shipment.

<b>SHOW</b>	<b>STRAIGHT BILL OF LADING — SHORT FORM — ORIGINAL — Not Negotiable</b>					
<b>BOOTH NO.</b>	<b>RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading.</b>					
<b>DATE</b>	the property described below, in apparent good order, except as noted (contents and conditions of contents of packages unknown), marked, consigned, and destined as indicated below, 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 to its usual place of delivery at said destination if on its route, other wise 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 terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern, Western and Illinois Freight Classifications in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.					
<b>EXHIBITOR</b>	Shipper hereby certifies that he is familiar with all of the terms and conditions of the said bill of lading, including those on the back thereof, set forth in classifications or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.					
<b>CITY</b>	<b>← WRITE "TRANSIT AIR CARGO" HERE</b>					
IN THE EVENT YOUR CARRIER FAILS TO SHOW ON FINAL MOVE OUT DAY, SELECT ONE OF THE FOLLOWING OPTIONS.  INITIAL _____	<b>CONSIGNEE TO:</b>					
	Company Name					
	Street					
	City	State	Zip			
1. ___ Re-route via air carrier	<b>MARK DESIRED BLOCK</b>					
2. ___ Re-route via ground carrier						
3. ___ Return to Hargrove warehouse at exhibitor's expense						
Attention _____						
Phone No. _____						
<b>Circle Number of Shipments in booth: 1 2 3 4 5 6 7 more</b>						
Common Carrier	Van Line	Other	Air	Next Day Air	2nd Day Air	Deferred
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CHECKER	NO PCS	DESCRIPTION OF ARTICLES, SPECIAL MARKS, AND EXCEPTIONS	WEIGHT (LBS.)	Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
		Crates Exhibition Material (Wooden)		Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
		Cartons (cardboard)				
		Trunks / Cases (Fiber) (color)				
		Skids / Pallets				
		Carpets (color)				
		Carpets Padding				
EXHIBITOR SHALL BE RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE (OR THE SIGNATURE OF EXHIBITOR'S AGENT) BELOW DENOTES ACCEPTANCE OF THE TERMS AND CONDITIONS ON THE REVERSE SIDE OF THIS FORM. EXHIBITOR OR ITS AGENT CERTIFIES & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS, OR IF FREIGHT CONTAINS SUCH MATERIALS, THAT THE EXHIBITOR IS REGISTERED IN CONFORMANCE WITH SUBPART G OF PART 107 CFR TITLE 49, IF APPLICABLE, AND THAT THE HAZARDOUS MATERIALS HAVE BEEN PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LAELED, AND ARE IN PROPER CONDITION FOR SHIPMENT AS REQUIRED, PERMITTED AND/OR AUTHORIZED UNDER APPLICABLE LOCAL, STATE AND FEDERAL STATUTES AND REGULATIONS.				IF NEITHER BOX IS CHECKED, SHIPMENT WILL BE SENT COLLECT. COLLECT <input type="checkbox"/> PREPAID <input type="checkbox"/>		
CHECKER SIGNATURE _____ DATE LOADED _____ TRAILER NO. _____ START TIME _____ FINISH TIME _____ EXHIBITOR _____ SIGNATURE _____				<b>BILL FREIGHT CHARGES TO:</b>		
				COMPANY _____		
				PERMANENT STREET ADDRESS _____		
				CITY _____	STATE _____	ZIP _____
				ATTN _____	PHONE _____	
CARRIER _____				DRIVER _____	DATE _____	PIECES RECEIVED _____