

THANK YOU FOR SHIPPING WITH JJT

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JJT - 200 (Rev. 11-06)

<p>JJT LOGISTICS, INC.</p>	<p>1090 E. BELMONT ST. ONTARIO, CA 91761 MAIN (909) 456-2500 TOLL (800) 845-4900 FAX (909) 456-2520 www.jjtinc.com CA 490105 US DOT 2918976</p>	<p>1 DATE SHIPPED</p> <hr/> <p>SHIPPER NUMBER</p> <hr/> <p>CONSIGNEE P.O. NUMBER</p>	<p>APPLY PRO LABEL HERE</p> <p style="text-align: center;">→</p>
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<p>2 SHIPPER (FROM) COMPANY</p> <p>STREET ADDRESS (NOT A P.O. BOX)</p> <hr/> <p>CITY STATE ZIP</p>	<p>3 SHIPPER SELECT</p> <p><input type="checkbox"/> PREPAID (SHIPPER) <input type="checkbox"/> COLLECT (CONSIGNEE)</p> <p>FREIGHT CHARGES ARE COLLECT UNLESS MARKED.</p> <p><input type="checkbox"/> 3RD PARTY (FILL OUT BILLING INFO BELOW)</p>	<p>CONSIGNEE PHONE NUMBER</p> <hr/> <p>SPECIAL INSTRUCTIONS</p>
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<p>4 CONSIGNEE (TO) COMPANY</p> <p>STREET ADDRESS (JJT CANNOT DELIVER TO A P.O. BOX)</p> <p>WRITE C.O.D. IN BOX IF SHIPMENT IS C.O.D.</p> <hr/> <p>CITY STATE ZIP</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">3RD PARTY BILL TO</p> <p>COMPANY</p> <hr/> <p>ADDRESS</p> <hr/> <p>CITY STATE ZIP</p>
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<p>C.O.D.</p> <p>(C.O.D. AMOUNT)</p> <p>CONSIGNEE PHONE NUMBER</p>	<p>REMIT C.O.D. TO: (IF DIFFERENT THAN SHIPPER ABOVE.)</p> <p>NAME</p> <hr/> <p>ADDRESS</p> <hr/> <p>CITY STATE ZIP</p>
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5	NO. OF PIECES	TYPE OF PKG.	HM	6	CLASS	7	WEIGHT IN LBS. (subject to correction)	RATE

Mark with "X" to designate Hazardous Material as defined in the Department of Transportation regulations governing transportation of Hazardous Material.

NOTE (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."

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).

NOTE (2) Commodities 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.

RECEIVED, SUBJECT TO INDIVIDUALLY DETERMINED RATES OR CONTRACTS THAT HAVE BEEN AGREED UPON 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, in apparent good order except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown above, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to 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 Bill of Lading set forth in the National Motor Freight Classification 100-X and successive issues. The shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

FOR FREIGHT COLLECT SHIPMENTS:
 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.

X _____
 (Signature of Consignor)

Shipper Certification

THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED AND LABELED, AND ARE IN PROPER CONDITION FOR TRANSPORTATION ACCORDING TO THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

8 SHIPPER'S SIGNATURE X AND DATE	PRINT LAST NAME	DRIVER	PIECE COUNT	PALLET COUNT	DATE