



**Task Title: Completing a Bill of Lading Form**

OALCF Cover Sheet – Practitioner Copy

**Learner Name:** \_\_\_\_\_

**Date Started:** \_\_\_\_\_

**Date Completed:** \_\_\_\_\_

**Successful Completion:** Yes  No

**Goal Path:** Employment  Apprenticeship

Secondary School  Post Secondary  Independence

**Task Description:**

Read a Bill of Lading form to understand the requirements for filling it out as a Material Handler in the workplace.

**Main Competency/Task Group/Level Indicator:**

- Find and Use Information/Interpret documents/A2.3

**Materials Required:**

- Pen and paper and/or digital device

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### Note to Instructor/Facilitator

The Bill of Lading form is best viewed online in magnifying format.

### Learner Information


Completing a Bill of Lading for items being shipped is a common part of many Material Handling jobs. It is important to understand and fill in this document with correct shipping information for your employer.

Scan the FedEx Bill of Lading.

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## UNIFORM STRAIGHT BILL OF LADING ORIGINAL---NOT NEGOTIABLE

ALL SERVICES SUBJECT TO THE TERMS AND CONDITIONS OF THE FXF 100 SERIES RULES TARIFF. SEE FEDEX.COM FOR DETAILS. --- QUESTIONS? CALL 1.866.393.4585

		Date		Purchase Order #				
		Shipper #		Shipper #				
<b>REQUIRED: Please select a service type</b> <input type="checkbox"/> FedEx Freight® Priority <input checked="" type="checkbox"/> FedEx Freight® Economy				<b>OPTIONAL: You may select a money-back guarantee delivery (charges and tariff limitations may apply).</b> <input type="checkbox"/> A.M. Delivery <input type="checkbox"/> Close of Business Delivery				
<b>SHIPPER (from)</b> Please provide ZIP codes and phone numbers.			<b>CONSIGNEE (to)</b>					
Shipper		FXF Acct. #	Consignee	FXF Acct. #				
Attn. to		Area Code Phone Number	Attn. to	Area Code	Phone Number			
Address			Address					
Address (Store, Dept., Ste., Flr., Apt., Div.)			Address (Store, Dept., Ste., Flr., Apt., Div.)					
Address			Address					
City			City					
State/Province		ZIP/Postal Code	Country	Country				
Optional or Additional Service Fees and Charges <input type="checkbox"/> Liftgate <input type="checkbox"/> Inside Pickup <input type="checkbox"/> Limited Access			Optional or Additional Service Fees and Charges <input type="checkbox"/> Liftgate <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Limited Access					
Shipper Bill of Lading #			<input type="checkbox"/> Custom Delivery Window:					
Special Instructions								
<b>BILL FREIGHT CHARGES TO (if different than above):</b>								
Name		FXF Acct. #	Mailing Address					
City		State	ZIP/Postal Code	Country	Area Code Phone Number			
Freight charges are <b>PREPAID</b> unless marked collect.		<input type="checkbox"/> USD <input type="checkbox"/> CAD	<b>C.O.D.</b>	1. The letters "C.O.D." must appear in box before consignee's name above.				
<b>CHECK BOX IF COLLECT</b>		AMOUNT	2. C.O.D. funds to be collected as: Certified Funds Company Check	<input type="checkbox"/> Personal Check				
			3. C.O.D. fee to be paid by: Shipper Consignee					
Name		Mailing Address						
City		State	ZIP/Postal Code	Country	Country Code Area Code Phone Number			
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations, the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned and destined as shown hereon, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. 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, and the conditions of the FXF 100 Series Rules Tariff, or otherwise referenced, which are hereby agreed.								
HANDLING UNITS (H/U) TYPE	H/U PKG.	PIECES	H M	KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS (subject to correction)	WEIGHT IN LBS. NMFC (subject to correction)	ITEM #	CLASS	CUBE (optional)
<b>TOTAL H/U:</b>			H MARK "X" OR "RQ" IN THE HM COLUMN TO DESIGNATE HAZARDOUS MATERIALS OR REPORTABLE QUANTITY AS DEFINED IN DOT REGULATIONS.					
HM EMERGENCY CONTACT PHONE NUMBER ( )			<b>FOR INTERNATIONAL SHIPMENTS INDICATE BROKER NAME, FAX AND PHONE NUMBERS.</b>					
CUSTOMER REGISTERED W/EMERGENCY RESPONSE INFO. PROVIDER or CONTRACT #			EEI/SED Number or Exception			AREA CODE Phone # ( ) AREA CODE Broker		
NOTE (1) Where the rate and carrier's liability for loss or damage may be dependent 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 specifically stated by the shipper to be not exceeding _____ per _____." Note (2) Liability limitation for loss or damage on this shipment shall be applicable as provided by contract _____ or in the current NMFC or this carrier's governing tariffs. See FXF 100 Series Rules Tariff for complete limited liability provisions. Carrier's maximum standard liability is limited to \$25 per pound per package for NEW articles and \$.50 per pound per package (or its equivalent in Mexican Pesos (MXN) or Canadian Dollars (CAD), at the rate of exchange which is in effect at the place and on the date of shipment) for USED or RECONDITIONED articles. In no case shall carrier liability exceed \$100,000 per occurrence (or its equivalent in MXN or CAD at the rate of exchange which is in effect at the place and on the date of shipment) for NEW articles or \$10,000 per occurrence (or its equivalent in MXN or CAD at the rate of exchange which is in effect at the place and on the date of shipment) for USED or RECONDITIONED articles. For availability and limits of excess liability coverage and applicable rates and charges, please refer to FXF 100 Series Rules Tariff. Not selecting an additional coverage option is considered to be a waiver of same and standard liability coverage will apply.			<b>FOR FREIGHT COLLECT SHIPMENTS</b>					
			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.			Consignor Signature		
			Shipper Signature			Date		
			<b>CARRIER CERTIFICATION</b>					
			Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent document in the					
DATE		DRIVER/EMPLOYEE NUMBER		PIECE COUNT		TRAILER #		
Create your next Bill of Lading online at <a href="http://fedex.com/us/billfreight/main/">fedex.com/us/billfreight/main/</a>			<b>FedEx Freight</b>			CO202/518-FXF 0023776PM		

## Work Sheet

**Task 1: Which two service types does Fedex offer?**

Answer:

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**Task 2: List 5 pieces of information about the Shipper that are needed to complete the form.**

Answer:

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**Task 3: Where must the letters "C.O.D." appear for a collect shipment?**

Answer:

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**Task 4: How do you designate an item you are shipping as a Hazardous material?**

Answer:

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**Task 5: List 3 pieces of information you need to fill in about the items you are shipping.**

Answer:

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**Task 6: When do you need to provide an emergency contact number?**

Answer:

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**Task 7: What information must you provide for international shipments?**

Answer:

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## Answers

### **Task 1: Which two service types does FedEx offer?**

Answer: FedEx Freight Priority and FedEx Freight Economy

### **Task 2: List 5 pieces of information about the Shipper that are needed to complete the form**

Answer: Any 5 of the following:

- name
- FXF Acct #
- Attn to:
- address
- Phone number
- city
- state/province
- postal code
- Country
- Shipper Bill of Lading #

### **Task 3: Where must the letters "C.O.D." appear for a collect shipment?**

Answer: The letters "C.O.D." must appear in the box before the consignee's name at the top of the form.

### **Task 4: How do you designate an item you are shipping as a Hazardous material?**

Answer: Mark "X" or "RQ" in the HM Column

### **Task 5: List 3 pieces of information you need to fill in about the items you are shipping**

Answer: Any 3 of the following:

- Handling units
- H/U Pkg. type
- Pieces
- HM
- Kind of package
- description of articles
- special marks
- exceptions
- Weight in lbs.
- NMFC Item#
- Class
- Cube (optional)

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**Task 6: When do you need to provide an emergency contact number?**

Answer: When shipping Hazardous Materials

**Task 7: What information must you provide for international shipments?**

Answer: Broker Name, Fax and Phone numbers

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Performance Descriptors

Levels	Performance Descriptors	Needs Work	Completes task with support from practitioner	Completes task independently
A2.3	Interpret somewhat complex documents to connect, evaluate and integrate information			

This task: Was successfully completed  Needs to be tried again

Learner Comments:

Instructor (print):

\_\_\_\_\_

Learner (print):

\_\_\_\_\_

URLs

Link to printable FedEx Bill of Lading:

[www.fedex.com/content/dam/fedex/us-united-states/freight/images/2019/Q3/fxfbol\\_1932893323.pdf](http://www.fedex.com/content/dam/fedex/us-united-states/freight/images/2019/Q3/fxfbol_1932893323.pdf)