BAR CODE DESCRIPTIVE INVENTORY

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SHIPPER'S NAME RESMAN DAN & S			CODE #	CARRIER'S REFEREN	ICE NO.
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DESCRIPTIVE SYMBOLS				TRAILER NUMBER	
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AT (Signature) (TOMA) SHIPPED OR AUTHORIZED AGENT	S/14/14 DATE	_ AT DESTI-	(Signature) SHIPPER OR AUTHORIZED AG	TAIT.	
(Signature)		NATION	(Signature)	ENI	DATE
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ORIGINAL - SEND TO STI, P.O. BOX 80520 FT. WAYNE, INDIANA 46898-0520 AFTER FINAL DELIVERY





P.O. Box 80520 Fort Wayne, IN 46898-0520 www.stidelivers.com

AREA CODE (260) 429-3801 BILL OF LADING & FREIGHT BILL

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Original - If charges are C.O.D., record collection, and give this copy to shipper. Otherwise, driver mail this copy to Ft. Wayne.