

If you have 1 or 2 calipers to return: Rebox and ship UPS under account number 437491

If you have 3 or more calipers to return: Palletize the calipers and call Central at the number below

****If you have a Central business account and create the shipment on line you must use Central's BOL, not this form****

Straight Bill of Lading - Short Form - Original Non Negotiable

Received, subject to the classifications and tariffs in effect on the date of issue of this Original Bill of Lading

Date: _____ Bill of Lading No/SID: _____ Page 1 of 1

SHIP FROM Name: _____ Address: _____ City/State/Zip: _____ Country: _____ Supplier Code: _____	Subject to Section 7 of Conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of the shipment without payment of freight and other lawful charges. Per _____
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Intermediate Consignee Name: _____ Address: _____ City/State/Zip: _____ Country: _____	Final Destination Name: Bendix Warranty Center ATTN: ADB Recall Returns Address: 1155 E. Franklin St. City/State/Zip: Huntington, IN. 46750 Country: USA
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The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout the 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 otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform 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. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted himself on his assigns.

REMIT FREIGHT INVOICES TO: Name: Bendix C/O Ryder TM Address: 39550 Thirteen Mile Road City/State/Zip: Novi / MI / 48377 Forwarding Agent Name: Central Transport (586) 467-1900 Pro Number: _____	Trailer Number: _____ Incoterms: Prepaid _____ Collect <input checked="" type="checkbox"/> 3rd Party _____ Bill To: _____
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"The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon and all other requirements of the consolidated Freight Classification." Shipper's imprint in lieu of stamp, not part of bill of lading approved by the Interstate Commerce Commission.

Delivery Number	Customer Order	Pcs	Ctns	Plts	HM	NMFC Item	Description of Articles	Gross Weight (sub to cor)
TOTAL		-	Ctns	Plts				

Consignee Routing Deviation Authority No. _____	"If the shipment moves between ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight." NOTE - Where the rate is dependent on value, shippers are required to state specifically in writings the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to not be exceeding.
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Bendix CVS LLC



Per _____
 Permanent post office address of shipper _____

_____ Agent
 Per _____
 Date _____