

Date: 2/8/2022 11:12:32 AM

Bill Of Lading

SHIP FROM

Name: E & E COMPANY LTD
 Address: 221 Hanson Way
 City/State/Zip: Woodland, CA 95776
 SID#: _____
 PHONE: _____
 VENDOR: _____

Bill of Lading Number: 06757163000678112



CARRIER NAME: USF REDDAWAY

Responsible Acct.No: _____

SHIP TO

Name: DOLGEN - AMSTERDAM DC Location #: 96150
 Address: 2041 State Highway 5 South
 96150
 City/State/Zip: Amsterdam, NY 12010
 CID#: _____
 Dept: 00

Trailer number: 531012

Seal number(s): _____

SCAC: RETL

Pro Number: 7425802648

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: X 3rd Party:

(check box) Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:
Packing List is Attached

Appointment Time: _____ Actual Driver Arrival Time: _____ Driver Departure Time: _____

SHIPPER BOL 790

07/16/21

742-580264-8



AM
PM

Carrier tariffs are incorporated herein (copies available upon request). Carrier tariffs limit its liability. This shipment is subject to the terms and conditions of the Uniform Straight Bill of Lading as stated in the NMFC 100 series tariff.

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	
1LJ4P0	15	53.55	Y	N
Grand Total	15	53.55		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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 Section 2(e) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		15	ctns	53.55		Sheet Set & Pillowcase	49390 Sub 4	175
1		15		103.55		Grand Total		

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 _____

COD Amount: _____

Fee Terms: Collect: Prepaid:
Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

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 carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

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 documentation in the vehicle.

Juan
410071

2/8/22
SLC
531012

Order No.: 6439017 Order Date: 01/21/2022 Customer: DOLGEN - AMSTERDAM DC Customer PO No.: 1LJ4P0

SHIP FROM: E & E COMPANY LTD 221 HANSON WAY WOODLAND, CA 95776	BILL TO: DOLLAR GENERAL CORPORATION 100 MISSION RIDGE GOODLETTSVILLE, TN 37072 US	SHIP TO: DOLGEN - AMSTERDAM DC 2041 STATE HIGHWAY 5 SOUTH AMSTERDAM, NY 12010 US	Shipping Date: 02/08/2022 Shipment No.: 300067811
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Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
18714101	DG21-131	086569017901	Std Microfiber Pillowcase	EA	12	180	15	180	15

Total Weight:	53.55
Total Quantity Ordered:	180
Total Cartons Ordered:	15
Total Quantity Shipped:	180
Total Cartons Shipped:	15