

BILL OF LADING NUMBER: 18635455

Bill of Lading  
(NOT NEGOTIABLE)

CARRIER: ATS INC
Requested Pickup Date/Time: 07/28/2022 16:27 - 08/05/2022 22:59
Delivery Date/Time: 07/30/2022 01:01 - 08/06/2022 22:59

SHIPPER (ORIGIN)		BILL OF LADING NUMBER: 18635455	
NAME: OA LOGISTICS		Order Release Number(s): 4994290509550-003	
ADDRESS: 311 INTERNATIONAL TRADE PKWY		Shipment Numbers(s): 18635455	
ADDRESS:		PO Number(s): 4994290509550	
CITY, STATE, ZIP: PORT WENTWORTH, GA 31407		PRO(s):	
CONTACT: HALIE 9127377778		Loading Method: PALLET	
LOCATION			
REMARKS:			

ADDITIONAL SERVICES REQUESTED	PICKUP REMARKS
	FD.4994290509550-003 - Warehouse Contact : SV3.SHIP@JLAHOME.COM

CONSIGNEE (DESTINATION)		BILL TO (MAILING ADDRESS)	
NAME: FAMILY DOLLAR MARIANNA FL DC		NAME: Dollar Tree Stores, Inc.	
ADDRESS: 3949 FAMILY DOLLAR PARKWAY		ADDRESS: 500 Volvo Parkway	
ADDRESS:		ADDRESS:	
CITY, STATE ZIP: MARIANNA, FL 32448 USA		CITY, STATE ZIP: Chesapeake, VA 23320 USA	
CONTACT: DOLLAR		CONTACT:	
DELIVERY INSTRUCTIONS:			

CARTONS	TYPE OF PKG	HAZ MAT	NMFC	GLASS	PO NUMBER	ITEM NUMBER	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT LBS (Subject to Correction)																
77	Cartons		200.0	200.0	4994290509550	FDS_500929	IBD CHEETAH FQ COMFORTER 3PC SET																	
671	Cartons		200.0	200.0	4994290509550	FDS_599531	IBD MATILDA COMFORTER SET KING 4PC																	
<table border="0"> <tr> <td>TOTAL CTS</td> <td rowspan="2" style="text-align: center;">↑ MARK "X" IN COLUMN FOR HAZARDOUS MATERIALS</td> <td colspan="6"></td> <td>TOTAL WT</td> </tr> <tr> <td>748 Cartons</td> <td colspan="6"></td> <td>11621</td> </tr> </table>								TOTAL CTS	↑ MARK "X" IN COLUMN FOR HAZARDOUS MATERIALS							TOTAL WT	748 Cartons							11621
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748 Cartons								11621																

Pallets: 60 Positions: 30		COD	<b>FREIGHT CHARGES</b>  Collect
C.O.D. AMT. PAYMENT METHOLD	REMIT C.O.D. TO: NAME:		
C.O.D. FEE IS	ADDRESS:		
DECLARED VALUE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. If the value is omitted, the shipment will be subject to a maximum declared value of \$25 per lb.	CITY, STATE, ZIP:		
		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.	
		(Signature of Consignor)	

CARRIER LIABILITY: Shipper and Carrier acknowledge that Dollar Tree (and all subsidiaries) is not a carrier, and its role is limited to arranging for service by a third party carrier. Any services provided are exclusively pursuant to the terms and conditions set forth in the contract between Dollar Tree and the service provider.


RECEIVED subject to individually determined rates, rules and contracts that have been agreed upon in writing between Dollar Tree, and the carrier, if applicable, otherwise subject to all terms and conditions set forth in the National Motor Freight Classification documentation in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of packages unknown), marked consigned and destined as indicated above which said carrier (the word carrier being understood as meaning any person or corporation in possession of the property under the contract) agrees to carry to its place of delivery at said destination, if on its route, or otherwise to deliver to another carrier on the route to said 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 said property, that every service to be performed hereunder shall be subject to all the Bill of Lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he and all his assigns are familiar with all the Bill of Lading terms and conditions in the governing classification and the said terms and conditions.

This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. It is the shipper's responsibility to appropriately block and brace all contents for safe transport to destination to avoid shifting during transit.	SHIPPER: OA Logistics	CARRIER: ATS INC
	PER: Halie 9127377778	DRIVER: John Barber 8/18/22 3:18:00
	COLLECTED AT PICKUP \$	CASH CHECK CCTYPE

Date: 8/8/2022 3:51:06 PM

# Bill Of Lading

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<b>SHIP FROM</b>		Bill of Lading Number: 06757168000762335	
Name: E & E COMPANY LTD		 (402)06757168000762335	
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
PHONE: 912-373-7778			
VENDOR: 117256			
<b>SHIP TO</b>		CARRIER NAME: ATSK inc	
Name: Florida Distribution Center #9550		Responsible Accl.No:	
Address: 3949 Family Dollar Parkway		Trailer number: 96917	
9550		Seal number(s): 5624079	
City/State/Zip: Marianna, FL 32448		SCAC: ATSK	
CID#: _____		Pro Number: 000000	
Dept: 5		FOB: <input type="checkbox"/>	

<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)										
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>										
Address:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)										
City/State/Zip:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Appointment Time</td> <td style="width:33%;">Actual Driver Arrival Time</td> <td style="width:33%;">Driver Departure Time</td> </tr> <tr> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> <td style="text-align: center;">AM</td> </tr> <tr> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> <td style="text-align: center;">PM</td> </tr> </table>		Appointment Time	Actual Driver Arrival Time	Driver Departure Time	AM	AM	AM	PM	PM	PM
Appointment Time	Actual Driver Arrival Time	Driver Departure Time										
AM	AM	AM										
PM	PM	PM										
SPECIAL INSTRUCTIONS: Load #: 18635455 Packing List is Attached												

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
49942905	732	9899.13	Y N	
<b>Grand Total</b>	732	9899.13		

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 369</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
30	Pallet			1500.00		Pallet		
		732	ctns	9899.13		Comforters, Bedspreads	49017	200
30		732		11399.13		<b>Grand Total</b>		

Where the rate is dependent on value, shippers are required to stated 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 _____	<b>COD Amount:</b> _____ <b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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**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.  <p style="text-align: right;"><b>Shipper Signature</b></p>
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<b>SHIPPER SIGNATURE / DATE</b> 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.	<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</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 documentation in the vehicle.
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