

Date: 8/26/2022 8:59:46 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: 06757163000725861



CARRIER NAME: USF REDDAWAY

Responsible Acct.No: _____

SHIP TO

Name: DOLGEN - ALACHUA DC Location #: 96800
 Address: 12000 Nw 173 Street
 96800
 City/State/Zip: Alachua, FL 32615-8141
 CID#: _____
 Dept: 00

Trailer number: 48199

Seal number(s): _____

SCAC: RETL

Pro Number: 6248347974

SHIPPER BOL

11/10/21
790

624-834797-4



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.

THIRD PARTY FREIGHT CHARGES BILL TO:

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

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

Prepaid: Collect: 3rd Party:

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
AM	AM	AM
PM	PM	PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO
1P53Q4	21	69.30	Y	N	
Grand Total	21	69.30			

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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallet			50.00		Pallet		
		21	ctns	69.30		Sheet Set & Pillowcase	49390 Sub 4	175
1		21		119.30		Grand Total		

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 _____

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.

Antonio D 8/26/22

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.

Wen 8/26/22
 410071

Order No.: 6780054 Order Date: 08/11/2022 Customer: DOLGEN - ALACHUA DC Customer PO No.: 1P53Q4

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 - ALACHUA DC 12000 NW 173 STREET ALACHUA, FL 32615-8141 US	Shipping Date: 08/26/2022 Shipment No.: 300072586
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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	252	21	252	21

Total Weight:	69.3
Total Quantity Ordered:	252
Total Cartons Ordered:	21
Total Quantity Shipped:	252
Total Cartons Shipped:	21