


SHIP FROM		Bill of Lading Number: 06757164000163820
Name: E & E COMPANY LTD		 (402)06757164000163820
Address: 1680 Tide Court		
City/State/Zip: Woodland, CA 95778		
SID#:	FOB: <input type="checkbox"/>	

SHIP TO		CARRIER NAME: JB Hunt Intermodal
Name: Wal-Mart DC 6016G - General	Location #: 6016G	Trailer number: JBHU-319117
Address: 3920 lh 35 North		Seal number(s): 0972908
	6016G	
City/State/Zip: New Braunfels, TX 78130		SCAC: HJBI
CID#:	FOB: <input type="checkbox"/>	Pro Number:
Dept: 00022		[REDACTED]

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i>
Name:		Prepaid Collect X 3rd Party
Address:		<input type="checkbox"/> Master Bill of Lading: with attached
City/State/Zip:		(check box) underlying Bills of Lading

SPECIAL INSTRUCTIONS:		
Load # =69781551		
Appointment Time	Actual Driver Arrival Time	Driver Departure Time
9:00 AM PM	11:00 AM PM	11:30 AM PM

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
5402729131	1029	11720.34	Y	N	09/02/2019	6016G	0003	00022	TL#1
GRAND TOTAL	1029	11720.34							

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>	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #	CLASS							
1029	ctns			11720.34		Comforters, Bedspreads	49017	200				
1029				11720.34		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
	Customer check acceptable: <input type="checkbox"/>

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.
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SHIPPER SIGNATURE / DATE <small>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.</small> <i>Scott 9/4/19</i>	Trailer Loaded:	Freight Counted:	CARRIER SIGNATURE / PICKUP DATE <small>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. Property described above is received in good order, except as noted.</small> <i>X [Signature] 9-4-19</i>
	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	