



SHIP FROM		Bill of Lading Number: 08757164000166609
Name: E & E COMPANY LTD	Address: 1880 Tide Court	 (402)06757164000166609
City/State/Zip: Woodland, CA 95776	SID#: _____	
FOB: <input type="checkbox"/>		

SHIP TO		CARRIER NAME: Swift Transportation
Name: Wal-Mart DC 6031G-GENERAL	Location #: 6031G	Trailer number: 170677
Address: 23701 West Southern Avenue	6031G	Seal number(s): 0973152
City/State/Zip: Buckeye, AZ 85328	CID#: _____	SCAC: SWFT
Dept: 00022	FOB: <input type="checkbox"/>	Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:		
Name: _____	Address: _____	
City/State/Zip: _____	9/7	

SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Load # =69859588		Prepaid <input type="checkbox"/>	Collect <input checked="" type="checkbox"/> 3rd Party
		Master Bill of Lading: with attached underlying Bills of Lading	
		Appointment Time	Actual Driver Arrival Time
		11:00 ^{AM} PM	10:30 AM PM
		Driver Departure Time	
		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
5452729163	955	10535.34	Y	N	09/09/2019	6031G	0003	00022	TL-1
GRAND TOTAL	955	10535.34							

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 350</small>	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
955	ctns			10535.34		Comforters, Bedspreads	49017	200	
955				10535.34		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: \$ _____

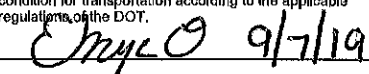
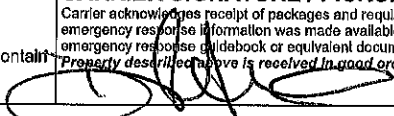
Fee Terms: Collect: Prepaid:

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 / 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: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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. Property described above is received in good order, except as noted. 
	Shipper Signature		