


Date: 6/5/2023 11:52:22 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		SHIP TO	
Name:	E & E COMPANY LTD	Name:	DOLGEN - BESSEMER DC Location #: 96930
Address:	221 Hanson Way	Address:	4101 Lakeshore Pkwy 96930
City/State/Zip:	Woodland, CA 95776	City/State/Zip:	Bessemer, AL 35022
SID#:		CID#:	
PHONE:		Dept:	00
VENDOR:		FOB:	<input type="checkbox"/>
Bill of Lading Number: 06757163000800322		Trailer number: 168	
		Seal number(s): 8068880	
(402)06757163000800322		SCAC: HGLS	
CARRIER NAME: HUB CITY GROUP		Pro Number:	
Responsible Acct.No:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Prepaid:		Collect: X	
		3rd Party:	
<input type="checkbox"/>		Master Bill of Lading: with attached	
(check box)		underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Packing List is Attached		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
			Driver Departure Time
			AM
			PM
			PM

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
1TB1H6	110	675.91	Y N	
Grand Total	110	675.91		

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
2	Pallet			100.00		Pallet		
		29	ctns	408.61		Mattress Pads	149265	100
		81	ctns	267.30		Sheet Set & Pillowcase	49390 Sub 4	175
2		110		775.91		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.

MASTER BILL OF LADING

ESTIMATED PICK UP DATE: 6/2/2023

SHIPPER

Name: E E CO LTD
 Address: 221 HANSON WAY
 City/State/Zip: WOODLAND, CA 95776
 Contact: ALEX GONZALEZ

BILL OF LADING : 5004995537

ORDER #: 1038319_ARD70409099S, 1038319_BES70408706S,
 1038319_BTH70410339S, 1038319_FLT70410450S, 1038319_IND70409312S,
 1038319_JAC70409211S, 1038319_JAN70410380S, 1038319_JON70409104S,
 1038319_LEB70409012S, 1038319_LGV70408707S, 1038319_MAR70410325S,
 1038319_SAT70408708S

CONSIGNEE

Name: TAGG
 Address: 13204 PHILADELPHIA AVE YARD
 City/State/Zip: FONTANA, CA 92337
 Contact:

CARRIER

CARRIER NAME: HUB HIGHWAY SERVICES
 SCAC: HHWY
 PRO NUMBER: 13802060001

seal # 8068880

THIRD PARTY FREIGHT CHARGES BILL TO

Name: DOLLAR GENERAL C/O HUB GROUP C/O Unyson
 Address: 2001 HUB GROUP WAY
 City/State/Zip: OAK BROOK, IL 60523

Freight Charge Terms :

(freight charges are prepaid unless marked otherwise)

Prepaid _____ Collect _____ 3rd Party X _____

SPECIAL INSTRUCTIONS AND SPECIAL SERVICES

CUSTOMS INSTRUCTION:

SPECIAL INSTRUCTION:

67388689,Number of miles: 1731,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,67388690,Number of miles: 2345,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,67388972,Number of miles: 2724,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,67388691,Number of miles: 1884,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2143,67388725,67388729,Number of miles: 2528,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2032,67388688,67388726,Number of miles: 2648,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER, 67388823,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 329,67388728,Number of miles: 1874,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,67388722,Number of miles: 2212,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,67388724,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 1760 | STOP#:1 CR - ARD70409099S;BES70408706S;BTH70410339S;FLT70410450S; IND70409312S;JAC70409211S;JAN70410380S;JON70409104S;LEB70409012S;LGV70408707S;MAR70410325S;SAT70408708S,STOP#:1 PO - 1TB1H1-01; 1TB1H6-01;1TB1H7-01;1TB1H9-01;1TB1J3-01;1TB1V3-01;1TB1V4-01;1TB1V8-01;1TB239-01;1TB255-01;1TB273-01;1TB2F8-01 | |

SPECIAL SERVICES:

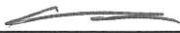
CARRIER INFO

PALLETS	QTY	WEIGHT (LB)	CUBE	H.M.(X)	COMMODITY DESCRIPTION	NMFC#	CLASS
					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.		
2	41	440	231		GENERAL COMMODITIES	NMFC_CLASS	400.0
19	522	5737	2193		GENERAL COMMODITIES	NMFC_CLASS	300.0
6	302	2301	693		GENERAL COMMODITIES	NMFC_CLASS	250.0
27	865	8478.00	3117.00		GRAND TOTAL		

CUSTOMER

CUSTOMER ORDER NUMBER	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
LEB70409012S	2	41	505	231	Y	N	
SAT70408708S	2	59	672	231	Y	N	
JAC70409211S	2	41	440	231	Y	N	
ARD70409099S	3	88	1012	346	Y	N	
MAR70410325S	2	105	803	231	Y	N	
JAN70410380S	4	129	1252	462	Y	N	
JON70409104S	2	46	554	231	Y	N	
FLT70410450S	2	87	722	231	Y	N	
LGV70408707S	3	64	804	346	Y	N	
BES70408706S	2	110	776	231	Y	N	
IND70409312S	2	67	666	231	Y	N	
BTH70410339S	1	28	272	115	Y	N	
GRAND TOTAL	27	865	8478.00	3117.00			

MASTER BILL OF LADING

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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.	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, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.  6/5/23	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 8) Jan 6/5/23 Property described above is received in good order, except as noted.