


Date: 6/14/2023 8:58:05 AM

Bill Of Lading

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SHIP FROM		Bill of Lading Number: 06757168000963244	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 PHONE: 912-875-2828 VENDOR: 679816		 (402)06757168000963244	
SHIP TO		CARRIER NAME: UPS	
Name: Home Depot Redlands DC - 5087 Address: 27352 River Bluff Ave. City/State/Zip: Redlands, CA 92374 CID#: _____ FOB: <input type="checkbox"/> Dept: 023		Responsible Acct.No: Trailer number: UPST8718368 Seal number(s): 5624514 SCAC: UPSN Pro Number:	
THIRD PARTY FREIGHT CHARGES BILL TO:			
Name: Address: City/State/Zip:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>	
SPECIAL INSTRUCTIONS: Load #: 935916706		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		Driver Departure Time	AM PM
CUSTOMER ORDER INFORMATION			
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
26920488	1	32.26	Y N
Grand Total		1	32.26
CARRIER INFORMATION			
HANDLING UNIT		PACKAGE	
QTY	TYPE	QTY	TYPE
1	ctns	32.26	Rugs
COMMODITY DESCRIPTION		PACKAGE	
1		32.26	Grand Total
		70970-5	125

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: <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.
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.  6/14/23	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 sold to contain <input type="checkbox"/> By Driver/Pieces	SHIPPER SIGNATURE _____
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.	