

Date: 3/15/2024 2:09:31 PM

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: 06757163000867004



(402)06757163000867004

CARRIER NAME: Oak Harbor Freight Lines
 Responsible Acct.No: _____

SHIP TO

Name: DOLGEN- JANESVILLE DC Location #: 96130
 Address: 101 Innovation Drive
 96130
 City/State/Zip: Janesville, WI 53546
 CID#: _____
 Dept: 00

Trailer number: T4007L
 Seal number(s): _____

SCAC: OAKH
 Pro Number: 26491087

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:
 Load #: 5013814613
 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
1Z4QD5	14	41.58	Y N	
Grand Total	14	41.58		

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
1	Pallet			50.00		Pallet		
		14	ctns	41.58		Assorted Products of Different Class and NMFC No.	49260 Sub 4	175
1		14		91.58		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.

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: 3/15/2024										
SHIPPER					BILL OF LADING :5013814613					
Name: E E CO LTD Address: 221 HANSON WAY City/State/Zip: WOODLAND, CA 95776 Contact: ALEX GONZALEZ					TRAILER # SEAL # ORDER # : 1038319_JAN72360434S CR JAN72360434S P8 1Z4QD5-01 PO 1Z4QD5-01					
CONSIGNEE					CARRIER					
Name: HUBGROUP FONTANA CROSSDOCK Address: 13204 PHILADELPHIA AVE YARD City/State/Zip: FONTANA, CA 92337 Contact:					CARRIER NAME: OAK HARBOR FREIGHT LINES INC SCAC: OAKH PRO NUMBER: QUOTE NUMBER:					
THIRD PARTY FREIGHT CHARGES BILL TO					Freight Charge Terms :					
Name: DOLLAR GENERAL C/O HUB GROUP Address: 2001 HUB GROUP WAY City/State/Zip: OAK BROOK, IL 60523					(freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3rd Party <u> X </u>					
SPECIAL INSTRUCTIONS AND SPECIAL SERVICES										
CUSTOMS INSTRUCTION:										
SPECIAL INSTRUCTION: 70067195,PALLETS NON-STACKABLE UNLESS ALLOWED BY SHIPPER,Number of miles: 2032 STOP#:1 CR - JAN72360434S,STOP#:1 PO - 1Z4QD5-01										
SPECIAL SERVICES:										
CARRIER INFO										
PALLETS	QTY	WEIGHT (LB)	CUBE	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.</small>			NMFC#	CLASS	
1	14	92	115		EMERGENCY PH # 1-800-535-5053 GENERAL COMMODITIES			NMFC_CLASS	500.0	
1	14	92.00	115.00		GRAND TOTAL					
CUSTOMER										
CUSTOMER ORDER NUMBER	SKU	PALLETS	QTY	WEIGHT (LB)	CUBE	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO		
JAN72360434S		1	14	92	115	Y	N			
GRAND TOTAL		1	14	92.00	115.00					
PALLET TYPE										
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 <small>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.</small>			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 <small>Carrier acknowledges receipt of packages and required placards. C certifies emergency response information was made available and has the DOT emergency response</small> Property described above is received in good order, except as		
3/15/24								3/15/24		



Order No.: 70067195 Order Date: 03/05/2024 Customer: DOLGEN- JANESVILLE DC Customer PO No.: 1Z4QD5

SHIP FROM:
E & E COMPANY LTD
221 HANSON WAY
WOODLAND, CA 95776

BILL TO:
DOLLAR GENERAL
CORPORATION CO.111
100 MISSION RIDGE
GOODLETTSVILLE, TN 37072
US

SHIP TO:
DOLGEN- JANESVILLE DC
101 INNOVATION DRIVE
JANESVILLE, WI 53546
US

Shipping Date:
03/15/2024

Shipment No.:
300086700

Cust. SKU No.	Item No.	UPC	Description	UOM	Case Pack Qty	Qty Ordered	Ctns Ordered	Qty Shipped	Ctns Shipped
14077401	DG90-064	430000387892	Microfiber Pillow Protector	EA	12	168	14	168	14

Total Weight: 41.58
Total Quantity Ordered: 168
Total Cartons Ordered: 14
Total Quantity Shipped: 168
Total Cartons Shipped: 14