


SHIP FROM	Shipment subject to the Amazon.com Terms and Conditions in effect on the date of shipment and available at vendorcentral.amazon.com.	
[Name] E & E COMPANY LTD	Bill of Lading Number: 06757163000880010	
[Street Address] 221 Hanson Way	 (402)06757163000880010	
[City,ST ZIPCODE] Woodland, CA 95776	Carrier Name: FLOCK FREIGHT	
[DC Contact] Alex Gonzalez	Trailer number: 152190 ARN: 28913616211	
[Phone Number] 530-669-5991	Seal number: 28789033	
SID#:FOB:	Serial number(s):	
SHIP TO	SCAC: FFJM	
[Name] Amazon Golden State FC LLC-LGB4	Pro Number: 7GW-LKP9	
[Street Address] 27517 Pioneer Ave		
[City,ST ZIPCODE] Redlands, CA 92374		
CID No.:		
FREIGHT CHARGE TERMS (FREIGHT CHARGES ARE PREPAID UNLESS MARKED OTHERWISE):		
Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>		

CUSTOMER ORDER INFORMATION							
Customer Order No.	ARN (WEPAY)	Unit Qty	# of Packages	Weight	Pallet/Slip (circle one)		Additional Shipper Information
8ZJOLYLW	28913616211	269	255	3023.48	Y	N	
Grand Total		269	255	3023.48			

CARRIER INFORMATION										
# of Pallets		Carton Count								LTL Only
Qty	Type	Qty	Type	WEIGHT	HM (X)	Commodity Description	NMFC No.	Class		
6	Pallet			300.00		Pallet				
		10	ctns	69.18		Bath Towel, Beach Towel	49260 Sub 4	175		
		228	ctns	2803.44		Comforters, Bedspreads	49017	200		
		5	ctns	51.36		Mattress Pads	149265	100		
		4	ctns	52.10		Pet Accessories or Furniture	2071	300		

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: No Limitation of carrier liability applies to this shipment, unless set forth in the Transportation Agreement between the parties.

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 charges and all other lawful fees. If a motor carrier, freight forwarder, broker or other transportation service provider accepts this shipment from anyone other than the shipper listed hereon, it agrees to seek payment of its charges exclusively from the entity from which it accepted the shipment (e.g. the broker) and expressly waives any other collection rights or remedies otherwise available to it, including any right to seek payment of the transportation charges from the consignor or consignee. Shipper Signature _____
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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. _____ 5/2/24	Trailer Loaded: <input checked="" type="checkbox"/> By shipper <input 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. _____ 5/2/24
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CARRIER INFORMATION										
# of Pallets		Carton Count								LTL Only
Qty	Type	Qty	Type	WEIGHT	HM (X)	Commodity Description	NMFC No.	Class		
		2	ctns	11.05		Rugs	70970-5	125		
		6	ctns	36.35		Throws,Blankets	49260	175		
6		255		3323.48		Grand Total				



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