

<b>SHIP FROM</b>		Master Bill of Lading Number: 06757168001307351
Name:	E & E COMPANY LTD	
Address:	311 International Trade Pkwy	
City/State/Zip:	Port Wentworth, GA 31407	

SID#:	FOB: <input type="checkbox"/>	<b>SHIP TO</b>	CARRIER NAME: Paschall Trucking
Name:	Consolidation Dock 7101	DC#: 7101	Trailer number: <del>39865</del> 195895 (K)
Address:	1200 Mason Dixon Ln 7101	Div.	Seal number(s): 38975867
City/State/Zip:	Conley, GA 30288		SCAC: PASC
SID#:	FOB: <input type="checkbox"/>		Pro Number:

<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms:
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING
City/State/Zip:		(check box)
<b>SPECIAL INSTRUCTIONS:</b>		Appointment Time Actual Driver Arrival Time Driver Departure Time
Load #: 36356555		1000 AM PM 1000 AM PM 1837 AM PM

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC# Supplier#
1431601863	391	4993.07	Y	N	06757168001307276	7035G
1431601975	50	526.50	Y	N	06757168001307306	7035A
1431601976	4	67.38	Y	N	06757168001307313	7035A
3158527521	136	1609.04	Y	N	06757168001307320	6043R
3508527396	88	1076.16	Y	N	06757168001307290	7035R
9782210506	198	2144.91	Y	N	06757168001307283	6043A
<b>Grand Total</b>	<b>867</b>	<b>10417.06</b>				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION <small>Covered fees regarding special or additional care or attention in handling or stowage must be so marked and packaged as to secure safe transportation with ordinary care. See Section 2(e) of NMFC Item 380.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
867	ctns			10417.06		Comforters, Bedspreads	49017	200
867				10417.06		<b>Grand Total</b>		

Where the rate is dependant 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.

<b>SHIPPER SIGNATURE / DATE</b> 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. Total Pallet: 30 <i>[Signature]</i>	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> 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. <i>[Signature]</i>
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