


# Bill Of Lading

<b>SHIP FROM</b>		Bill of Lading Number: 06757163001056513	
Name: E & E COMPANY LTD Address: 221 Hanson Way City/State/Zip: Woodland, CA 95776 SID#: _____ PHONE: _____		 (402)06757163001056513	
VENDOR: 6552100      FOB: <input type="checkbox"/>		CARRIER NAME: RXO Responsible Acct.No: _____	
<b>SHIP TO</b>		Trailer number: SIDD8233 Seal number(s): 69894017	
Name: COSTCO KATY DRY      Location #: 1354 Address: 31031 US HWY 90 TE, 1354 City/State/Zip: BROOKSHIRE, TX 77423 CID#: _____ Dept: 14      FOB: <input type="checkbox"/>		SCAC: XPOC Pro Number: _____	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: _____ Address: _____ City/State/Zip: _____		Prepaid: _____      Collect: X      3rd Party: _____	
SPECIAL INSTRUCTIONS: Packing List is Attached		<input type="checkbox"/> Master Bill of Lading: with attached (check box)      underlying Bills of Lading	
		Appointment Time	Actual Driver Arrival Time
		AM PM	AM PM
		1:30	2:40

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
013540728177	30	12951.90	Y    N	
<b>Grand Total</b>	30	12951.90		

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	
15	Pallet			750.00		Pallet			
		30	ctns	12951.90		Pet Accessories or Furniture	2071	300	
15		30		13701.90		<b>Grand Total</b>			

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.  
 \_\_\_\_\_ 8/4/25

Trailer Loaded:      Freight Counted:

By Shipper       By Shipper

By Driver       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.  
 \_\_\_\_\_ X