

Date: 3/2/2026 10:00:08 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757163001137786	
Name:	E & E COMPANY LTD	 (402)06757163001137786	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776	CARRIER NAME: XPO LOGISTICS	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 4635252	
VENDOR:		Seal number(s):	
	FOB: <input type="checkbox"/>	SCAC: CNWY	
		Pro Number: 425241773	
SHIP TO			
Name:	PEYTONS MID SOUTH	Location #:	1191030
Address:	120 KIRBY ROAD		348004
City/State/Zip:	PORTLAND, TN 37148		
CID#:			
Dept:		FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid:	Collect: <input checked="" type="checkbox"/> 3rd Party:
Address:		<input type="checkbox"/> Master Bill of Lading, with attached (check box) underlying Bills of Lading	
City/State/Zip:		Appointment Time	Actual Driver Arrival Time
SPECIAL INSTRUCTIONS:		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
20059	302	5162.85	Y N	
Grand Total	302	5162.85		

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(a) of NMFC Item 260.</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallet			350.00		Pallet		
		148	ctns	3763.99		Bath Towel, Beach Towel	49260-4	175
		80	ctns	952.96		Comforters, Bedspreads Sub 3 - 2 but less than 4	49260-3	250
		18	ctns	110.88		Mattress Pads	149265	100
		56	ctns	335.02		Sheet Set & Pillowcase	49260-3	250
7		302		5512.85		Grand Total		

Driver's signature acknowledges receipt of freight only. Received shipment subject to terms of a written contract, if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Freight Inc. rules and/or. (see www.xpo.com)

425-241773 XPO



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 _____ PWT _____	COD Amount: _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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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.
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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.  3/2/26	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 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.  3/2/26
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