


Date: 4/6/2026 3:29:34 PM

# Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757168001692532	
Name: E & E COMPANY LTD		 (402)06757168001692532	
Address: 311 International Trade Pkwy			
City/State/Zip: Port Wentworth, GA 31407			
SID#:			
PHONE:			
VENDOR: 9200233	FOB: <input type="checkbox"/>	CARRIER NAME: XPO LOGISTICS	

SHIP TO		Trailer number: 4636765
Name: Belk 0744	Location #: 0744	Seal number(s):
Address: 1018 Mendell Davis Drive		SCAC: CNWY
0744		Pro Number: 646276072
City/State/Zip: Byram, MS 39272		
CID#:		
Dept: 0760	FOB: <input type="checkbox"/>	

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Name:		Prepaid: <input type="checkbox"/>	Collect: X	3rd Party:
Address:		Master Bill of Lading: with attached underlying Bills of Lading		
City/State/Zip:		(check box)		
SPECIAL INSTRUCTIONS: Ship ID #925664789 1 envelope containing manifest		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
6081123	266	1138.98	Y	N	
<b>Grand Total</b>	266	1138.98			

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
266	ctns			1138.98		Pillow Sub 3 - 2 but less than 4	49260-3	250
266				1138.98		<b>Grand Total</b>		

<p>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 _____"</p>	<p><b>COD Amount:</b> _____</p> <p><b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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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).**

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;"><b>Shipper Signature</b></p>
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<p><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.</p>	<p><b>Trailer Loaded:</b></p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver</p>	<p><b>Freight Counted:</b></p> <p><input type="checkbox"/> By Shipper</p> <p><input type="checkbox"/> By Driver/pallets said to contain</p> <p><input type="checkbox"/> By Driver/Pieces</p>	<p><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.</p>
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Date: 4/2/26

# BILL OF LADING - ME

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### SHIP FROM

Name: JLA  
 Address: 311 INTERNATIONAL TRADE PARKWAY  
 City/State/Zip: PORT WENTWORTH, GA 31407  
 Contact: Halie Hill Phone: 912-373-7778

Shipment Number: **925664789**



### SHIP TO

Name: **BELK 744 DISTRIBUTION CENTER**  
 Address: 1018 MENDELL DAVIS DR  
 City/State/Zip: BYRAM, MS 39272  
 Delivery Date: 04-08-2026  
 Contact: MAIN SWITCHBOARD Phone: 601-346-7175

CARRIER NAME: XPO LOGISTICS FREIGHT, INC.

Trailer number:

Seal number(s):

SCAC: **CNWX** Mileage: **632 Miles**

Driver's signature acknowledges receipt of freight only. Received shipment is 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 tariff. (see www.xpo.com)

**XPO**

**646-276072**



Freight Charge Terms: (Freight charges are prepaid unless marked otherwise)

Prepaid: Prepaid Add: Collect:  3rd Party:

### BILL FREIGHT CHARGES TO:

Belk  
 C/O Uber Freight US LLC, PO Box 425  
 Lowell, AR 72745 USA

Master Bill of Lading: with attached  
 (check box) underlying Bills of Lading

### SPECIAL INSTRUCTIONS:

CONSIGNEE NOTES: NO DELIVERY APPT REQ FOR LTL SHIPMENTS. THIS IS A 24/7 DROP FACILITY. DEL APPT CHARGES WILL NOT BE PAID.

no ramp storage fees are approved since Belk is a 24 / 7 drop facility.

### CARRIER INFORMATION

HANDLING		QUANTITY		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.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC	CLASS
6 5	PLT	266	CTN	1389 LBS		Retail Goods	49880-7	250
		266		1389 LBS		<b>GRAND TOTAL</b>		

### CUSTOMER ORDER INFORMATION

BOL NUMBER	PRIMARY REFERENCE	# Pkgs	Weight	Pallet/Slip	Additional Shipper info
925664789	6081123-744	266	1389 LBS		ALL ITEMS VARIOUS
<b>GRAND TOTAL</b>		266	1389 LBS		

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:  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 Department of Transportation.

*JL* 4/2/26

### Trailer Loaded:

By Shipper  
 By Driver

### Freight Counted:

By Shipper  
 By Driver/pallets said to contain  
 By Driver/Pieces

### CARRIER SIGNATURE/PICKUP DATE

04-06-2026

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

*[Signature]* 4/6/26