

Pro Number  
**777-5800355-0**

Ship Date  
**2019-05-02**

Reference Number  
MVDP5497982

Org DC  
**958 328**

Freight Terms  
**Freight Charges Are Collect**

P.O. Number  
EC4E6KH

SCAC:

Consignee:  
BBB 2651%PATHMARK TRANSPORT  
3019 MERCY DR  
ORLANDO, FL 32808

Shipper:  
E-E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

Special Instructions

Firm BBB 2651%PATHMARK TRANSPORT

By [Signature]  
Shipment received in good order

HUs Received 2

Driver CT-32838 (1700097) Date 5/9/2019

Arrive Time 11:40 AM Depart Time 11:47 AM

Date: 5/1/2019 2:42:50 PM **Bill Of Lading** Page 2 of 4

**SHIP FROM**  
Name: E & E COMPANY LTD - 028372  
Address: 221 Hanson Way  
City/State/Zip: Woodland, CA 95776  
SID#: \_\_\_\_\_ FOB:

**SHIP TO**  
Name: Bed Bath & Beyond #2651 Location #: ORL-VDP  
Address: Pathmark Transportation - ORL  
3019 Mercy Drive, ORL-VDP  
City/State/Zip: Orlando, FL 32808  
CID#: MVDP5497982 FOB:

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
Name: Bed Bath & Beyond c/o  
Address: Benman Blake Associates  
PO Box 9202  
City/State/Zip: Old Bethpage, NY 11804-9002

**SPECIAL INSTRUCTIONS**  
BB & B Vendor #: 028372  
MVDP5497982

Bill of Lading Number: 06757163000320844  
Barcode: (402)06757163000320844

**CARRIER NAME:** Central Transport  
Responsible Acct.No:  
Trailer number: 1600102  
Seal number(s):  
SCAC: CTII  
Pro Number: 777 5800355 0

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

Prepaid:  Collect:  3rd Party:   
Master Bill of Lading: with attached uncopying Bills of Lading

Appointment Time AM Actual Driver Arrival Time AM Driver Departure Time AM

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
ED7S2NG	16	71.04	Y N	
ED7W8HD	4	81.76	Y N	
ED7X3DL	2	29.58	Y N	
ED7X8SV	2	8.36	Y N	
ED8A2DQ	5	60.30	Y N	
ED8B4DB	3	9.45	Y N	
ED8B6WB	1	18.73	Y N	
ED8B8US	2	3.19	Y N	
ED8E7PZ	6	26.40	Y N	
ED8F5HL	4	6.76	Y N	
ED8J9QF	3	22.13	Y N	
ED8M6TR	2	37.48	Y N	
ED8P6RN	1	12.38	Y N	

Barcode: 777-5800355-0 BL Pg 2

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 noted by the shipper to be not exceeding \_\_\_\_\_

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, s.t., not to individually determine 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, or 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 / DATE  
Trailer Loaded:  By Shipper  By Driver  
Freight Counted:  By Shipper  By Driver/pallets sold to carrier  By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE  
Carrier acknowledges receipt of packages and accurate placards. Carrier carries emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

SHIPPER SIGNATURE

Pro Number **777-5800355-0**

**Additional Delivery Services Requested**

Inside Delivery  Sort - Segregate  Driver Delay

Residential Delivery  Liftgate  Redelivery


By signing below, Consignee acknowledges that additional delivery service was performed and agrees to pay any and all additional delivery service fees at the rate(s) listed above.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Date 5/9/2019 # And Type of Container \_\_\_\_\_ # And Type of PCS \_\_\_\_\_ Exception Type \_\_\_\_\_

Log # \_\_\_\_\_  
Total \_\_\_\_\_  
Exceptions \_\_\_\_\_

Central Transport Delivery Receipt

Date: 5/1/2019 2:42:50 PM		<b>Bill Of Lading</b>	Page 2 of 4
<b>SHIP FROM</b>		Bill of Lading Number: 06757163000320844	
Name: E & E COMPANY LTD - 028372	Address: 221 Hanson Way	 (402)06757163000320844	
City/State/Zip: Woodland, CA 95776	SID#: _____		
FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		CARRIER NAME: Central Transport	
Name: Bed Bath & Beyond #2651	Location #: ORL-VDP	Responsible Acct.No: _____	
Address: Pathmark Transportation -ORL 3019 Mercy Drive, ORL-VDP		Trailer number: 1800102	
City/State/Zip: Orlando, FL 32808		Seal number(s): _____	
CID#: MVDP5497982	FOB: <input type="checkbox"/>	SCAC: CTII	
Dept: _____		Pro Number: 777 5800355 0	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name: Bed Bath & Beyond c/o	Address: Berman Blake Associates PO Box 9202		
City/State/Zip: Old Bethpage, NY 11804-9002			
SPECIAL INSTRUCTIONS: BB & B Vendor # : 028372 MVDP5497982		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: _____ <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
		Appointment Time	Actual Driver Arrival Time
		AM	AM
		AM	AM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLETS	ADDITIONAL SHIPPER INFO
ED7S2NG	16	71.8	Y	N
ED7W8HD		61.76	Y	N
ED7X3DL			Y	N
ED7X8SV			Y	N
ED8A2B0			Y	N
ED8B405	3	60.30	Y	N
ED8B6WB			Y	N
ED8B8US		18.76	Y	N
ED8E7PZ			Y	N
ED8F5HL	4	6.76	Y	N
ED8J9QF	3	22.13	Y	N
ED8M6TR	2	37.46	Y	N
ED8P6RN	1	12.38	Y	N

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: <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.

<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 U.S. DOT.	<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>SHIPPER SIGNATURE</b>  <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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
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