

Date: 10/4/2019 4:00:01 PM

Master Bill Of Lading

SHIP FROM		Master Bill of Lading Number: 06757168000033336	
Name:	E & E COMPANY LTD		
Address:	311 International Trade Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:		FOB:	<input type="checkbox"/>

SHIP TO		CARRIER NAME: SALSON CARRIERS	
Name:	Stein Mart DC # 00952	DC#:	00952
		Div.:	
Address:	767 Douglas Hills Road 00952	Trailer number:	0775353
		Seal number(s):	2781890
City/State/Zip:	Lithia Springs, GA 30122	SCAC:	SLSN
SID#:		Pro Number:	0
		FOB:	<input type="checkbox"/>

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid:	<input type="checkbox"/>
Address:		Collect:	<input checked="" type="checkbox"/>
		3rd Party:	<input type="checkbox"/>
City/State/Zip:		<input checked="" type="checkbox"/>	MASTER BILL OF LANDING: WITH ATTACHED UNDERLYING BILLS OF LANDING
SPECIAL INSTRUCTIONS: Load #: SM236609		Appointment Time	Actual Driver Arrival Time
		1:00 ^{AM} _{PM}	3:07 ^{AM} _{PM}
			Driver Departure Time
			4:05 ^{AM} _{PM}

SCANNED

CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLEONE)		BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
808702001	4	59.50	Y	N	06757168000033312	00953	
808702004	6	89.25	Y	N	06757168000033305	00952	
808702005	5	73.38	Y	N	06757168000033312	00953	
808702006	3	43.63	Y	N	06757168000033312	00953	
808702010	3	45.62	Y	N	06757168000033305	00952	
808702011	1	13.88	Y	N	06757168000033305	00952	
808702012	1	15.87	Y	N	06757168000033305	00952	
808702013	2	31.74	Y	N	06757168000033312	00953	
808702014	4	59.50	Y	N	06757168000033312	00953	
808702016	3	45.62	Y	N	06757168000033305	00952	
808702018	3	45.62	Y	N	06757168000033305	00952	
808702019	1	15.87	Y	N	06757168000033305	00952	
808702023	2	29.75	Y	N	06757168000033312	00953	

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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>	

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 / 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. <i>JC 10/4/19</i>	Trailer Loaded:	Freight Counted:	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. <i>[Signature] 10-04-19</i>
	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	