



UNIVERSAL INTERMODAL SERVICES, INC.

8954



DATE 08-05-19

DATE 08-05-19

PRO NUMBER

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PT - LANDED
8610 S ATLANTIC AVE
SOUTHGATE CA

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R
TRAPAC
BERTH 136
HARBOR CA

SIZE 40 TYPE

CONTAINER BMOU5725460

CHASSIS FLX2429806

COMM. HAZARDOUS MATERIAL

BILL OF LADING # YMLVW236278954

BKG. # VSL

PRO#

SEAL # YMAE630408 WEIGHT

SS LINE

COMMENTS

INTEROFFICE USE ONLY

BILL TO

RATE

ACCESSORIAL

CUSTOMER REF. #

DROP LIVE UNLOAD LIVE LOAD

DRIVER Zoukounboem DATE 08/05/19

TIME IN TIME OUT

RECEIVED THE ABOVE IN GOOD ORDER

FIRM BY:

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission credit is limited to (7) days. We must request your compliance. A reduction or allowance may be made to this bill as permitted by 49 CFR (65.2 (2) (i)).

Equipment Per Day: 3 free days - \$150.00 - \$300.00 per day thereafter.



18020 S. SANTA FE AVENUE
 RANCHO DOMINGUEZ, CA 90220
 DISPATCH (310) 900-2161 or
 (310) 900-2162
 FAX (310) 605-8755

» A Universal Company

DATE 08.05.19 BILL NUMBER

TO PERFORMANCE TEAM

FROM TRADAC

VESSEL	BOOKING - B/L	DESTINATION
CONTAINER <u>TEMU 7027523</u>	CHASSIS <u>TLX2 510154</u>	SEAL <u>640873</u>
LOADED <input checked="" type="checkbox"/> EMPTY <input type="checkbox"/>	53 <input type="checkbox"/> 48 <input type="checkbox"/> 45 <input type="checkbox"/> 40 <input checked="" type="checkbox"/>	24 <input type="checkbox"/> 20 <input type="checkbox"/>
STANDARD <input type="checkbox"/> HIGH CUBE <input checked="" type="checkbox"/>	REEFER <input type="checkbox"/>	FLAT RACK <input type="checkbox"/>

APPOINTMENT DATE:

APPOINTMENT TIME:

REMARKS

The above trailer was received in good condition. Receiver, as agent for the customer, acknowledges that is Receiver's responsibility to notify Southern Counties Express when the trailer is available for pick-up. Customer and Receiver will be liable for any charges accrued against trailers which are out of the carrier's control.

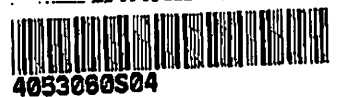
DRIVER	TRUCK #	DISPATCH MOVE#	RECEIVED BY:	DATE	TIME
<u>Richard</u>	<u>328</u>		<u>[Signature]</u>	<u>8/5/19</u>	

SIGNATURE

PRINT NAME

DELIVERY RECEIPT

THE LIABILITY, IF ANY, OF SOUTHERN COUNTIES EXPRESS FOR ANY CARGO LOSS OR DAMAGE, HOWEVER CAUSED OF \$100,000.00 OR INVOICE VALUE, WHICHEVER IS LESS. SOUTHERN COUNTIES EXPRESS SHALL NOT BE LIABLE FOR PUNITIVE DAMAGES. CUSTOMER IS LIABLE FOR ALL DEMURRAGE, DETENTION, PER DIEM AND DAMAGE TO CARGO CONTAINER. IN THE EVENT OF LITIGATION, THE PREVAILING PARTY SHALL BE ENTITLED TO ITS REASONABLE ATTORNEY'S FEES.



4053060504

DRIVER DELAY AUTHORIZATION -		ALL FIELDS MUST BE FILLED IN AND SIGNED.		
TIME ARRIVED _____	TIME DEPART _____			
TIME START _____	TIME FINISHED _____			
TOTAL HOURS _____	- LESS FREE TIME _____	=	CHARGEABLE HOURS _____	
DRIVER WAIT <input type="checkbox"/>	DRIVER LOAD <input type="checkbox"/>	DRIVER UNLOAD <input type="checkbox"/>	DRIVER COUNT <input type="checkbox"/>	DRIVER ASSIST <input type="checkbox"/>
I AGREE THAT THE ABOVE TIMES AND DESCRIPTIONS ARE CORRECT:				
DRIVER _____	AUTH# _____	RECEIVER _____	DATE _____	TIME _____

Universal INTERMODAL SERVICES, INC.

DATE 8-31-19

DATE _____

 4027623504

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8010 ATLANTIC
SOUTH GATE

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R
TRAPAC B-130
HARBOR.

2412270

SIZE 40 TYPE _____

SEAL # YMAE2100893 WEIGHT _____

CONTAINER TGBU-10319979

SS LINE _____

CHASSIS SCEZ450215

COMMENTS SOON - 8954

COMM. _____ HAZARDOUS MATERIAL

INTEROFFICE USE ONLY

BILL OF LADING # _____

BILL TO _____

BKG. # _____ VSL _____

RATE _____

ACCESSORIAL _____

PRO# _____

CUSTOMER REF. # _____

RECEIVED THE ABOVE IN GOOD ORDER
 FIRM [Signature] BY 08-01-19

DROP LIVE UNLOAD LIVE LOAD
 DRIVER WALTER DATE 1/1

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission credit is limited to (7) days. We must request your compliance. A reduction or allowance may be made to this bill as permitted by 49 CFR 105.2 (2) (i).
Equipment Per Day - 3 free days - \$150.00 - \$300.00 per day thereafter.

TIME IN _____ TIME OUT _____



18000 S. SANTA FE AVENUE
 RANCHO DOMINGUEZ, CA 90220
 DISPATCH (310) 900-2181 or
 (310) 900-2182
 FAX (310) 805-8765

» A Universal Company

DATE 8/05/19 BILL NUMBER

TO Perf Team 8610 S. Atlantic Ave Southgate
 FROM Trapani - autsvi

VESSEL _____ BOOKING - E/L _____ DESTINATION _____

CONTAINER YMLU8949717 CHASSIS SCVZ450228 SEAL _____
 LOADED EMPTY 53 48 45 40 24 20
 STANDARD HIGH CUBE REEFER FLAT RACK

APPOINTMENT DATE: _____ APPOINTMENT TIME: _____

REMARKS _____



The above trailer was received in good condition. Receiver, as agent for the customer, acknowledges that is Receiver's responsibility to notify Southern Counties Express when the trailer is available for pick-up. Customer and Receiver will be liable for any charges accrued against trailers which are out of the carrier's control.

DRIVER	TRUCK #	DISPATCH MOVE#	RECEIVED BY:	DATE	TIME
<u>George</u>	<u>138A</u>		<u>[Signature]</u>	<u>8/05/19</u>	
			SIGNATURE		

DELIVERY RECEIPT

PRINT NAME _____

THE LIABILITY, IF ANY, OF SOUTHERN COUNTIES EXPRESS FOR ANY CARGO LOSS OR DAMAGE, HOWEVER CAUSED, IS LIMITED TO \$1.00 PER POUND UP TO A MAXIMUM OF \$100,000.00 OR INVOICE VALUE, WHICHEVER IS LESS. SOUTHERN COUNTIES EXPRESS SHALL NOT BE LIABLE FOR LOST PROFITS, SPECIAL, INCIDENTAL, CONSEQUENTIAL OR PUNITIVE DAMAGES. CUSTOMER IS LIABLE FOR ALL DEMURRAGE, RETENTION, PER DIEM AND DAMAGE CLAIMS ARISING FROM CUSTOMER'S POSSESSION OR USE OF CARGO CONTAINER. IN THE EVENT OF LITIGATION, THE PREVAILING PARTY SHALL BE ENTITLED TO ITS REASONABLE ATTORNEYS FEES AND COSTS.

DRIVER DELAY AUTHORIZATION -		ALL FIELDS MUST BE FILLED IN AND SIGNED.			
TIME ARRIVED _____	TIME DEPART _____				
TIME START _____	TIME FINISHED _____				
TOTAL HOURS _____	- LESS FREE TIME _____	= CHARGEABLE HOURS _____			
DRIVER WAIT <input type="checkbox"/>	DRIVER LOAD <input type="checkbox"/>	DRIVER UNLOAD <input type="checkbox"/>	DRIVER COUNT <input type="checkbox"/>	DRIVER ASSIST <input type="checkbox"/>	
I AGREE THAT THE ABOVE TIMES AND DESCRIPTIONS ARE CORRECT:					
DRIVER _____	AUTH# _____	RECEIVER _____	DATE _____	TIME _____	