

SHIP FROM		Master Bill of Lading Number: 06757168000024754	
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: G N P TRUCKING	
Name:	Macy's /Bloom Consolidation Center	Trailer number:	
DC#:	Div.	Seal number(s):	
Address:	C/O Dynamic High Point 1124 Elon Place,	SCAC:	
City/State/Zip:	High Point, NC 27260	Pro Number:	
SID#:	FOB: <input type="checkbox"/>		
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:	
Name:		Prepaid: <input type="checkbox"/> Collect: <input checked="" type="checkbox"/> 3rd Party: <input type="checkbox"/>	
Address:		<input checked="" type="checkbox"/> MASTER BILL OF LANDING: WITH ATTACHED (check box) UNDERLYING BILLS OF LANDING	
City/State/Zip:		Appointment Time: 2:30 AM PM Actual Driver Arrival Time: 12:22 AM PM Driver Departure Time: 7:45 AM PM	
SPECIAL INSTRUCTIONS:			
Load #: 50245836			

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# PKGS CTN	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)	BOL#	ADDITIONAL SHIPPER INFO DC#	Supplier#
8210439	4	42.47	Y N	06757168000017435	BM	
8210527	7	80.70	Y N	06757168000017459	CX	
8210659	11	124.67	Y N	06757168000017442	CF	
8210692	4	42.47	Y N	06757168000017442	CF	
8210802	5	57.54	Y N	06757168000017442	CF	
8211000	11	124.67	Y N	06757168000017442	CF	
8211198	7	80.70	Y N	06757168000017442	CF	
8211308	9	100.01	Y N	06757168000017466	HF	
8211319	11	124.67	Y N	06757168000017442	CF	
8211352	11	124.67	Y N	06757168000017442	CF	
8211418	16	185.28	Y N	06757168000017442	CF	
8211495	16	185.28	Y N	06757168000017442	CF	
8211605	11	124.67	Y N	06757168000017442	CF	

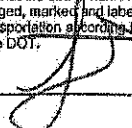
Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

COD Amount \$ _____
Fee Terms: Collect: 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 / 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.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input 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.
	SHIPPER SIGNATURE: 		CARRIER SIGNATURE: 