


SHIP FROM		Bill of Lading Number: 06757168000046404
Name: E & E COMPANY LTD	 (402)06757168000046404	
Address: 311 International Trade Pkwy		
City/State/Zip: Port Wentworth, GA 31407		
SID#:		
PHONE:		
VENDOR: 9200233	FOB: <input type="checkbox"/>	CARRIER NAME: EPES LOGISTICS
		Responsible Acct.No:

SHIP TO		Trailer number: 2104
Name: Belk 0744	Location #: 0744	Seal number(s): 2871229
Address: 1018 Mendell Davis Drive		
0744		
City/State/Zip: Byram, MS 39272		
CID#:		
Dept: 0745	FOB: <input type="checkbox"/>	SCAC: EPEG
		Pro Number:

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Name:				
Address:				
City/State/Zip:				
SPECIAL INSTRUCTIONS: Ship ID #2134857 1 envelope containing manifest	Prepaid: <input type="checkbox"/>	Collect: X	3rd Party:	
		Master Bill of Lading: with attached underlying Bills of Lading		
		(check box)		
		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
		2:30 AM PM	13:02 AM PM	6:11 AM PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
5698360	647	7550.09	Y N	
Grand Total	647	7550.09		

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
647	ctns			7550.09		Pillows,Valance,Towels	49390	100
647				7550.09		Grand Total		

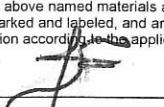
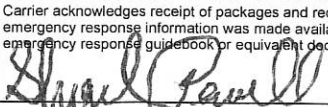
Where the rate is dependent on value, shippers are required to stated specifically in writing the agreed or declared value of the property as follows:
 "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount: _____
Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
Customer check acceptable: <input type="checkbox"/>

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 property 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.  10/30
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