


Date: 8/29/2019 10:22:51 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757166000449744	
Name: E & E COMPANY LTD		 (402)06757166000449744	
Address: 550 Northport Pkwy			
City/State/Zip: Port Wentworth, GA 31407		CARRIER NAME: RED CLASSIC TRANSIT	
SID#:		Responsible Acct.No:	
PHONE:		Trailer number: 191922	
VENDOR: 9200233		Seal number(s): 2200565	
FOB: <input type="checkbox"/>		SCAC: RCXB	
SHIP TO		Pro Number:	
Name: Belk 0737		Trailer number: 191922	
Address: 120 Belk Court		Seal number(s): 2200565	
City/State/Zip: Blythewood, SC 29016		SCAC: RCXB	
CID#:		Pro Number:	
Dept: 0769		Trailer number: 191922	
FOB: <input type="checkbox"/>		Seal number(s): 2200565	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party:	
Address:		Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS: Ship ID #2115365 4401131		Appointment Time 10:00 AM	Actual Driver Arrival Time 10:05 PM
		Driver Departure Time 10:22 PM	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3632010	11	135.74	Y N	
3632009	830	9785.70	Y N	
Grand Total	841	9921.44		

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
841	ctns			9921.44		Throws, Blankets	49040	150
841				9921.44		Grand Total		

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

<p>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.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p style="text-align: right;">Shipper Signature</p>
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<p>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>MDG</i> 8-29-19</p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces</p>	<p>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]</i> 8-29-19</p>
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C 019033910

Date: 8/30/2019 3:25:15 PM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757166000450917	
Name:	E & E COMPANY LTD	 (402)06757166000450917	
Address:	550 Northport Pkwy		
City/State/Zip:	Port Wentworth, GA 31407		
SID#:			
PHONE:		CARRIER NAME: Schneider Transportation Management	
VENDOR:	9200233	FOB: <input type="checkbox"/>	Responsible Acct.No:
SHIP TO		Trailer number: 160621	
Name:	Belk 0744	Location #:	0744
Address:	1018 Mendell Davis Drive	Seal number(s): 2200579	
	0744	SCAC: SCNN	
City/State/Zip:	Byram, MS 39272	Pro Number:	
CID#:			
Dept:	0769	FOB: <input type="checkbox"/>	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: <input type="checkbox"/> Collect: X 3rd Party: <input type="checkbox"/>	
Address:		Master Bill of Lading: with attached underlying Bills of Lading	
City/State/Zip:		(check box)	
SPECIAL INSTRUCTIONS: Ship ID #2115367 401133		Appointment Time	Actual Driver Arrival Time
		12:00 ^{AM} _{PM}	12:00 ^{AM} _{PM}
			Driver Departure Time
			3:25 ^{AM} _{PM}

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3632010	281	3467.54	Y N	
3632020	233	1540.13	Y N	
3632009	438	5164.02	Y N	
Grand Total	952	10171.69		

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
952	ctns			10171.69		Throws, Blankets	49040	150
952				10171.69		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: 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

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.
ch/ck 8-30-19.

Trailer Loaded: By Shipper By Driver

Freight Counted: By Shipper By Driver/pallets said to contain 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.
W W 8-30-19

Date: 9/10/2019 11:27:59 AM

Bill Of Lading

Page 1 of 1

SHIP FROM

Name: E & E COMPANY LTD
 Address: 550 Northport Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: 9200233 FOB:

Bill of Lading Number: 06757166000452232



CARRIER NAME: RED CLASSIC TRANSIT

Responsible Acct.No: _____

Trailer number: 08277

Seal number(s): 2781592

SCAC: RCXB

Pro Number: _____

SHIP TO

Name: Belk 0737 Location #: 0737
 Address: 120 Belk Court
 0737
 City/State/Zip: Blythewood, SC 29016
 CID#: _____
 Dept: 0747 FOB:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____
 City/State/Zip: _____

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

Prepaid: **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
11:00 AM	10:30 AM	11:27 AM

SPECIAL INSTRUCTIONS:

Ship ID #2115362
 4401128

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3611677	84	870.68	Y N	
3632010	517	6379.78	Y N	
3632020	472	3119.92	Y N	
Grand Total	1073	10370.38		

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(a) of NMFC Item 360</small>	PACKAGE	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
84	ctns			870.68		Comforters, Bedspreads	49017	200
989	ctns			9499.70		Throws, Blankets	49040	150
1073				10370.38		Grand Total		

SCANNED

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:** **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

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.

[Signature] 9-10-19.

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 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.

[Signature] 9/10/19