

## Debit Memo# 142108 Details

## Debit Memo Information

Claim Number:	142108	Ref Claim Number:	N/A
Date:	N/A	Status:	P
R/A Number:	N/A	Authorized By:	N/A
PO Number:	059714	Department:	75
Vendor Number:	1109	Vendor Name:	E AND E CO LTD
Debit Memo Type:	FREIGHT BILL ERRORS		

## Style Details



There are no styles associated with this Debit Memo.

## Summary

Total Cost:	\$0.00	Terms Adjustment:	\$0.00
Discount Adjustment:	\$0.00	Excessive Shipping Charges:	\$322.07
Return Shipping Charges:	\$0.00	Handling Charges:	\$275.00
Total Claims:	\$597.07		

## Comments

- \* OTHER 700701
- \* SHIPPED 2/03 VIA CTII PRO 77704995022 PO 050714
- \* YOU WERE TO SHIP TO OUR CONSOLIDATOR IN CA
- \* YOU SHIPPED TO FLORIDA
- \* CHARGING YOU BACK FULL FREIGHT PLUS HANDLING FEE
- \* PLANZA@BEALLSINC.COM

Date: 1/31/2020 2:55:40 PM		<b>Bill Of Lading</b>		Page 1 of 1				
<b>SHIP FROM</b>			Bill of Lading Number: 06757163000415144					
Name: E & E COMPANY LTD			 (402)06757163000415144					
Address: 221 Hanson Way								
City/State/Zip: Woodland, CA 95776								
SID#:								
PHONE:			CARRIER NAME: Central Transport					
VENDOR:			Responsible Accl.No:					
<b>SHIP TO</b>			Trailer number: TL1901368					
Name: Bealls Department Stores-050 Location #: 050			Seal number(s):					
Address: 1806 38th Avenue East			SCAC: CTII					
Bradenton, 050			Pro Number: 777 6499592 2					
City/State/Zip: Bradenton, FL 34208								
CID#:								
Dept:								
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>			Freight Charge Terms: (freight charges are prepaid unless marked otherwise)					
Name:			Prepaid: Collect: X 3rd Party:					
Address:			<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading					
City/State/Zip:			Appointment Time  777-6499592-2 B/L					
SPECIAL INSTRUCTIONS: Load #: 8000410232			Subject to: NMFC 100, CT 100/CT 101 Rules Tariffs; 49 U.S.C. 14700 and 49 CFR 370 Drivers signatures only acknowledges receipt of freight					
Packing List is Attached			AM PM					
<b>CUSTOMER ORDER INFORMATION</b>								
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP				
0356714		26	541.40	Y	N			
Grand Total		26	541.40	Dept. 075				
<b>CARRIER INFORMATION</b>								
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
2	Pallet			80.00		Pallet		
		26	ctns	541.40		Sleepwear, Underwear	49880	100
2		26		621.40		Grand Total		

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>John M. 1/31/20</i>		Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <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. <i>D. Magan 86 2-3-20</i>	

TRH 1901368

TRAILER INFO FOR: 1700039 *DC*

SUMMARY

LOCATION: 337      DOM: 337

LTG  
LOCAL

STATUS: TO CTYS

BEALLS  
810

TIME IN      4 HOURS AND 44  
STATUS:      MINUTES

TIME AT      11 DAYS AND 7  
LOCATION:      HOURS

FLAGS:

ORIGINAL      02/11/2020 08:00  
CUT:

PLANNED:      NONE

UNIT      2019 0715 -  
NOTES:      TRAILER 1700039  
             IS DOM'D TO 337  
             FOR CUSTOMER  
             T02 BEALLS 810

COMMENTS:      || SEAL: 07419684  
                     HOLES: No

TRAILER      337: SWAP-BEALLS  
POOL:      810

CURRENT ROUTE

LOCATION	TERMINAL	DROPLIST	ETA
Origin	337	000	
Next	337	337T02	
Final	337	337T02	

History

Admin

Flag\_HER/NRP

Update Comment

Last PSI

Check:

Last PSI

Checked

By:

Last

Chalk

Check:

Chalk

Date:

Last

Chalk

Checked

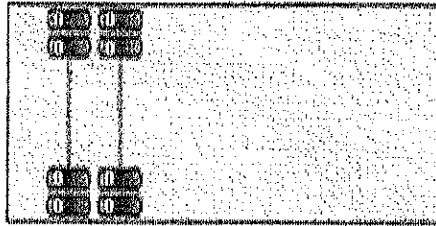
By:

02/04/2020

15:53

HILL,

ZACHERY



DECKING

DECK	HUS	WEIGHT	CUBE
Balloons	0	0	0.00
Deck	0	0	0.00
Floor	20	10265	61.45



[Click here to view Manifest](#)

PRO	FLAGS	DUE DATE	HUS	WEIGHT	CUBE	ORIG	DEST	SHIPPER	CONSIGNEE	PDC
148-5032107-7	HSS	02/07/2020	7	4,081	23.67	402	337	HILLSDALE FURNITURE LLC	BEALLS DC	BEALLS
148-7299360-6		02/11/2020	1	203	1.10	780	337	SOURCE LOGISTICS	BEALLS DC 050	BEALLS
777-6499592-2		02/12/2020	2	622	4.08	958	337	E-E COMPANY LTD	BEALLS DEPT STORE 050	BEALLS
148-5327380-4		02/11/2020	3	2,244	9.45	799	337	VF JEANSWEAR INCORPORATED	BEALLS DC 050	BEALLS
148-8203505-1	HSS	02/07/2020	7	3,115	23.15	021	337	NEW BALANCE ATHLETIC SHOE INC	BEALLS DISTRIBUTION CENTER	BEALLS
5			20	10,265	61.45					

*Z. Hill*  
*2/13/20*  
*2/13/20*

321

Date: 1/31/2020 2:55:40 PM **Bill Of Lading** Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 06757163000416144	
Name: E & E COMPANY LTD	Address: 221 Hanson Way	 (402)06757163000416144	
City/State/Zip: Woodland, CA 95776	SID#:		
PHONE:	VENDOR:		
FOB: <input type="checkbox"/>			
<b>SHIP TO</b>		CARRIER NAME: Central Transport	
Name: Bealls Department Stores-050	Location #: 050	Responsible Acct.No:	
Address: 1806 38th Avenue East	Bradenton, 050	Trailer number: TL1901368	
City/State/Zip: Bradenton, FL 34208	CID#:	Seal number(s):	
Dept:	FOB: <input type="checkbox"/>	SCAC: CTII	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>		Pro Number: 777 6499592 2	
Name:	Address:	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
City/State/Zip:	SPECIAL INSTRUCTIONS:	Prepaid: <input type="checkbox"/> Collect: X 3rd Party: <input type="checkbox"/>	
Load #: 8000410232	Packing List is Attached	Master Bill of Lading: with attached underlying Bills of Lading <input type="checkbox"/> (check box)	
		Appointment Time	 777-6499592-2 B/L
			AM PM
<b>CUSTOMER ORDER INFORMATION</b>			
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
0356714	26	541.40	Y N
<b>Grand Total</b>		26	541.40
		Dept. 075	
<b>CARRIER INFORMATION</b>			
<b>HANDLING UNIT</b>		<b>PACKAGE</b>	
QTY	TYPE	QTY	TYPE
2	Pallet	26	ctns
		WEIGHT	H.M. (X)
		80.90	
		541.40	
		621.40	
		COMMODITY DESCRIPTION	
		Pallet	
		Sleepwear, Underwear	
		<b>Grand Total</b>	
		NMFC #	
		49880	
		CLASS	
		100	

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 this 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.  
*[Signature]* 1/31/20


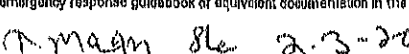
**Trailer Loaded: Freight Counted:**  
 By Shipper  By Shipper  
 By Driver  By Driver/pallets sold to contain  
 By Driver/Pieces

**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]* 2-3-20

TRH 1901368

Date: 1/31/2020 2:55:40 PM **Bill Of Lading** Page 1 of 1

<b>SHIP FROM</b>		Bill of Lading Number: 08757163000415144	
Name:	E & E COMPANY LTD	 (402)06757163000415144	
Address:	221 Hanson Way		
City/State/Zip:	Woodland, CA 95776		
SID#:			
PHONE:			
<b>SHIP TO</b>		CARRIER NAME: Central Transport	
Name:	Bealls Department Stores-050 Location #: 050	Responsible Acct.No:	
Address:	1806 38th Avenue East	Trailer number: TL1901368	
City/State/Zip:	Bradenton, FL 34208	Seal number(s):	
CID#:		SCAC: CTII	
Dept:		Pro Number: 777 6499592 2	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:		Prepaid: Collect: X 3rd Party:	
Address:		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
City/State/Zip:		Appointment Time  777-6499592-2 B/L	
SPECIAL INSTRUCTIONS:		Appointment Time  777-6499592-2 B/L AM PM	
Load #: 8000410232		Subject to: NMFC 100, CT 100, CT 101 Rules Terms: 49 USC 14700 and 49 CFR 370 Diverts signature only acknowledge receipt of freight	
Packing List is Attached			
<b>CUSTOMER ORDER INFORMATION</b>			
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP
0356714	26	541.40	Y N Dept. 075
Grand Total		26	541.40
<b>CARRIER INFORMATION</b>			
HANDLING UNIT		PACKAGE	
QTY	TYPE	QTY	TYPE
2	Pallet	26	ctns
WEIGHT		H.M. (X)	
80.90			
541.40		Sleepwear, Underwear	
621.40		Grand Total	
COMMODITY DESCRIPTION		PACKAGE	
Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 300		NMFC # CLASS	
Pallet		49880 100	

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.  1-31-20		Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets sold 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.  2-3-20 TRAIL 1901368	

**TRAILER INFO FOR: 1700039**

119420

**SUMMARY**

LOCATION: 337 Dom: 337

LTG LOCAL  
 STATUS: TO CTYS  
 BEALLS  
 810

TIME IN 4 HOURS AND 44 MINUTES  
 STATUS:

TIME AT 11 DAYS AND 7 HOURS  
 LOCATION:

FLAGS:

ORIGINAL CUT: 02/11/2020 08:00

PLANNED: NONE

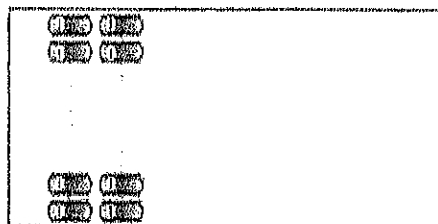
UNIT NOTES: 2019 0715 - TRAILER 1700039 IS DOM'D TO 337 FOR CUSTOMER T02 BEALLS 810

COMMENTS: || SEAL: 07419684 HOLES: No

TRAILER POOL: 337: SWAP-BEALLS 810

**CURRENT ROUTE**

LOCATION	TERMINAL	ORIGIN	ETA
Origin	337	000	
Next	337	337T02	
Final	337	337T02	



**DECKING**

DECK	MS	WEIGHT	CORE
Balloon	0	0	0.00
Deck	0	0	0.00
Floor	20	10265	61.45

**History**

- Admin
- Flag USER/MPR
- Update Comment

Last PSI: PSI  Registration  
 Check: HISTORY

Last PSI  
 Checked

By:

Last Chalk: 02/04/2020 18:53  
 Check:

Chalk  
 Date:

Last Chalk: HILL,  
 Checked: ZACHERY  
 By:

[Click here to view manifest](#)

PRO	FLAG	DUE DATE	MS	WEIGHT	CORE	ORIG	DEST	SHIPPER	CONSIGNEE	PLC
148-5032107-7	HSS	02/07/2020	7	4,081	23.67	402	337	HILLSDALE FURNITURE LLC	BEALLS DC	BEALLS
148-7299360-6		02/11/2020	1	203	1.10	760	337	SOURCE LOGISTICS	BEALLS DC 050	BEALLS
777-6499592-2		02/12/2020	2	622	4.08	95B	337	E-E COMPANY LTD	BEALLS DEPT STORE 050	BEALLS
148-5327380-4		02/11/2020	3	2,244	9.45	799	337	VF JEANSWEAR INCORPORATED	BEALLS DC 050	BEALLS
148-8203585-1	HSS	02/07/2020	7	3,115	23.15	021	337	NEW BALANCE ATHLETIC SHOE INC	BEALLS DISTRIBUTION CENTER	BEALLS
	S		20	10,265	61.45					

Z. Hill  
 2/13/20

BLD# B10 CCC 017B9A  
 Date/Time 2/13/20 0929  
 Carrier CTIE  
 LP Officer DC

TRAILER INFO FOR: 1700039

119420

SUMMARY

LOCATION: 337      DOM: 337

LTG LOCAL  
 STATUS: TO CTYS  
 BEALLS 810

TIME IN 4 HOURS AND 44 MINUTES

TIME AT 11 DAYS AND 7 HOURS

FLAGS:

ORIGINAL CUT: 02/11/2020 08:00

PLANNED: NONE

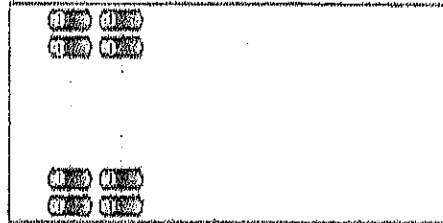
UNIT NOTES: 2019 0715 - TRAILER 1700039 IS DOM'D TO 337 FOR CUSTOMER TO2 BEALLS 810

COMMENTS: || SEAL: 07419684 HOLES: No

TRAILER POOL: 337: SWAP-BEALLS 810

CURRENT ROUTE

LOCATION	TERMINAL	ORIGIN	ETA
Origin	337	000	
Next	337	337T02	
Final	337	337T02	



DECKING

DECK	HUS	WEIGHT	CUBS
Balloon	0	0	0.00
Deck	0	0	0.00
Floor	20	10265	61.45

History

- Admin
- FINALTER/MRP
- Update Comment
- Registration

Last PSI Checkr: PSI History

Last PSI Checked

By:

Last Chalk: 02/04/2020

Checkr: 15:53

Chalk Date:

Last

Chalk: HILL,

Checked: ZACHERY

By:

[Click here to view Manifest](#)

PRO	PLATE	DUE DATE	HUS	WEIGHT	GRADE	ORIG	DEST	SUPPLIER	CONSIGNEE	PLC
148-8032107-7	HSS	02/07/2020	7	4,081	23.67	402	337	HILLSDALE FURNITURE LLC	BEALLS DC	BEALLS
148-7299360-6		02/11/2020	1	203	1.10	760	337	SOURCE LOGISTICS	BEALLS DC 050	BEALLS
777-6499592-2		02/12/2020	2	622	4.08	958	337	E-E COMPANY LTD	BEALLS DEPT STORE 050	BEALLS
148-9327380-4		02/11/2020	3	2,244	9.45	799	337	VF JEANSWEAR INCORPORATED	BEALLS DC 050	BEALLS
148-9203895-1	HSS	02/07/2020	7	3,115	23.15	021	337	NEW BALANCE ATHLETIC SHOE INC	BEALLS DISTRIBUTION CENTER	BEALLS
<b>5</b>			<b>20</b>	<b>10,265</b>	<b>61.45</b>					

Z. Hill  
 2/13/20

BLD# 810      CCC 017B9A  
 Date/Time 2/13/20 0929  
 Carrier CTEE  
 LP Officer DC



Pro Number  
**777-6499592-2**

Ship Date  
**2020-02-03**

Reference Number

Org DC  
**958 337**

Freight Terms  
**Freight Charges Are Collect**

P.O. Number  
**0356714**

SCAC:

Consignee:

BEALLS DEPT STORE 050  
1806 38TH AVE E  
BRADENTON, FL 34208


Shipper:

E-E COMPANY LTD  
221 HANSON WAY  
WOODLAND, CA 95776

Special Instructions

Date: 1/31/2020 2:55:40 PM **Bill Of Lading** Page 1 of 1


**SHIP FROM**  
Name: E & E COMPANY LTD  
Address: 221 Hanson Way  
City/State/Zip: Woodland, CA 95776  
SID#: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
VENDOR: \_\_\_\_\_ FOB:

Bill of Lading Number: 08787183000416144  
  
(402)08757163000416144

**SHIP TO**  
Name: Bealls Department Stores-050 Location #: 050  
Address: 1806 38th Avenue East  
Bradenton, 050  
City/State/Zip: Bradenton, FL 34208  
CID#: \_\_\_\_\_  
Dept: \_\_\_\_\_ FOB:

Trailer number: TL1801368  
Seal number(s): \_\_\_\_\_  
SCAC: CTII  
Pro Number: 777 6499592 2

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  
Prepaid: Collect:  3rd Party: \_\_\_\_\_  
 Master Bill of Lading: with attached underlying Bills of Lading  
Appointment Time: \_\_\_\_\_  
  
777-6499592-2 B/L AM PM

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	Y	N	ADDITIONAL SHIPPER INFO
0356714	26	541.40				Dept. 075
<b>Grand Total</b>	<b>26</b>	<b>541.40</b>				

**CARRIER INFORMATION**

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE
QTY	TYPE	QTY	TYPE		NMPC # CLASS
2	Pallet	80.00		Pallet	
		26	ctns	Sleepwear,Underwear	49880 100
2		621.40			
<b>Grand Total</b>					

Where the rate is dependent on value, a separate rate shall be stated specifically by unit of the goods or declared value of the property as follows:  
\*The agreed or declared value of the property is specifically stated on the invoice 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(a)(1)(A) and (B).**

RECEIVED: subject to and mutually determined rates of contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, class conditions and rules that have been established by the carrier and are available to the shipper, or agent, and to all applicable state and federal regulations.

The carrier shall not assume liability of this shipment without payment of freight and all other lawful charges.

**SHIPPER SIGNATURE / DATE**  
This is to certify that the above named merchandise is a complete shipment, packed, checked and loaded, and are in proper condition for transportation according to the applicable regulations of the DOT.  
*[Signature]* 1-31-20

Trailer Loaded:  By Shipper  By Driver  
Freight Counted:  By Shipper  By Driver  
 By Driver/pallets sold to consignee  By Driver/pieces

**CARRIER SIGNATURE / PICKUP DATE**  
Carrier: address, edges, receipt of packages and required packages. Car or carrier as emergency repair or in for repair may make breakable and/or carrier has the DOT emergency to produce a roadside or equivalent communication to the vehicle.  
*[Signature]* 2-3-20

TRAILER 1901368

Pro Number 777-6499592-2

Additional Delivery Services Requested

- Inside Delivery  Sort - Segregate  Driver Delay  
 Residential Delivery  Liftgate  Redelivery

By signing below, Consignee acknowledges that additional delivery service was performed and agrees to pay any and all additional delivery service fees at the rate(s) listed above.

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_

Date	# And Type of Container	# And Type of PCS	Exception Type
2/13/2020			
Log #			
Total			
Exceptions			

Firm BEALLS DEPT STORE 050

By *[Signature]*  
Shipment received in good order

HUs Received 2

Driver CT-937125 (1700039) Date 2/13/2020

Arrive Time 9:32 AM Depart Time 9:37 AM

All claims for loss or damage must be reported immediately. By ruling of the Interstate Commerce Commission extension of credit is limited to seven (7) days. A reduction, allowance may be made to this bill as permitted by 49 CFR 1051(2)(f).

Central Transport Delivery Receipt