



2 Braxton Way • Ste 400 • Glen Mills, PA 19342
 General Inquiries 1-800-447-4568
 Home Delivery Inquiries 1-866-421-0982
 pilotdelivers.com



SHIPMENT #
378853483

NON-NEGOTIABLE WAYBILL

SEE CONDITIONS OF CONTRACT ON REVERSE

DATE	ORIGIN	DESTINATION	EIN NO.	DOMESTIC SERVICES		
3/12/2024	SAV	HSV		<input type="checkbox"/> First Flight Service	<input type="checkbox"/> Platinum Guarantee	<input checked="" type="checkbox"/> Home Delivery - Standard
PILOT ACCOUNT NO.				<input type="checkbox"/> Next Day AM	<input type="checkbox"/> Saturday Delivery	<input type="checkbox"/> Home Delivery - Basic
1163608196				<input type="checkbox"/> Next Day PM	<input type="checkbox"/> Sunday / Holiday Delivery	<input type="checkbox"/> Exclusive Use Vehicle
E & E COMPANY LTD				<input type="checkbox"/> Two Day	<input type="checkbox"/> Home Delivery - Premier	<input type="checkbox"/> Special Services
311 INTERNATIONAL TRADE PKWY				<input type="checkbox"/> Three Day	<input type="checkbox"/> Home Delivery - Deluxe	<input type="checkbox"/> Trade Show
PORT WENTWORTH GA US ZIP CODE REQUIRED 31407				<input checked="" type="checkbox"/> Economy	<input type="checkbox"/> Other:	
855-842-4358 KIM WANG				No level indicated will be considered a Next Day PM service		
PILOT ACCOUNT NO.				INTERNATIONAL SERVICES		
LEIGH ANN LACKEY				SHIP VIA	SERVICE	CUSTOMS VALUE
52 LEDGE VIEW DRIVE				<input type="checkbox"/> Air Direct	<input type="checkbox"/> (Air)port to (Air)port	\$
HUNTSVILLE AL US ZIP CODE REQUIRED 35802				<input type="checkbox"/> Air Consolidation	<input type="checkbox"/> (Air)port to Door	
2565092188 N/A				<input type="checkbox"/> Ocean	<input type="checkbox"/> Door to (Air)port	
PILOT ACCOUNT NO. (IF OTHER THAN SHIPPER OR CONSIGNEE)				No level indicated will be considered an Air Consolidation service Supply Export POA or SLI if the shipment value is \$2500 or more		
RUE GILT GROUPE (RGG)				FREIGHT CHARGES		
20 CHANNEL CENTER 2ND FL				<input type="checkbox"/> Prepaid	<input checked="" type="checkbox"/> Third Party	C.O.D. AMOUNT
BOSTON MA US ZIP CODE REQUIRED 02210				<input type="checkbox"/> Collect	<input type="checkbox"/> C.O.D.	\$
				The shipper will be charged if a payment type is not selected		
				CARRIER LIMITED LIABILITY		
				Unless a value is entered here, Declared Value is agreed and understood to be \$0.50/lb. for domestic shipments (including Puerto Rico) or \$9.07/lb. for international air or transborder shipments, but not less than \$50.00 per shipment or actual value of such piece(s), whichever is less. If additional insurance is purchased, enter the insurance value. See reverse for ocean shipment liability.		
				DECLARED VALUE		
				\$ NVD		
				INSURANCE VALUE		
				\$ NVD		
				Goods are: <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> New & Used		
				No status will be considered new goods		
				PICKUP APPOINTMENT	Date:	Time:
				SPECIAL INSTRUCTIONS		
				<input type="checkbox"/> Hazardous materials per attached shipper's declaration		
				SCHEDULE # (INTL)		

PIECES	DESCRIPTION	DIMENSIONS (INCHES)			DIM WT	ACTUAL WT
		L	W	H		
1	ELLEN COCKTAIL OTTOMAN	48	40	14		71
TOTAL					TOTAL	TOTAL
1						71

Atlantic Freight
 Reed Nydegger
 MAR 12 2024

I certify that the cargo does not contain any unauthorized explosives, incendiaries, or hazardous materials. I am aware that cargo items tendered for transportation are subject to T.S.A. security controls by the carriers and, when appropriate, other government regulations. I agree to permit screening of cargo items by authorized T.S.A. personnel. I am aware that this endorsement and original signature along with copies of all relevant shipping documents showing the cargo's consignee, consignor, description, and other relevant data will be retained on file per T.S.A. regulations.

SIGNATURE OF SHIPPER OR AGENT: *[Signature]* 3/12/24
 COMPANY NAME: _____
 DATE: _____

SHIPPER'S C.O.D. AMOUNT: _____ F.C.O.D. AMOUNT: _____ TOTAL COLLECT CHARGES: _____ CHECK # _____


RECEIVED BY PILOT OR ITS AGENT: _____ DATE: _____ TIME: _____

GRAY AREAS FOR PILOT USE ONLY

Thank You For Using Pilot!

SHIPMENT # **378853483**



SHIP FROM		Bill of Lading Number: 06757168001122312	
Name: E & E COMPANY LTD Address: 311 International Trade Pkwy City/State/Zip: Port Wentworth, GA 31407 PHONE: 912-875-2828 VENDOR:		 (402)06757168001122312	
SHIP TO		CARRIER NAME: PILOT AIR FREIGHT CORP	
Name: Leigh Ann Lackey Address: 52 Ledge View Drive City/State/Zip: Huntsville, AL 35802 PHONE: 2565092188 CID#: _____ Dept: _____		Responsible Acct.No: Trailer number: Seal number(s):	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: PAAF	
Name: Rue Gilt Groupe Address: 20 Channel Center City/State/Zip: Boston, MA 02210		Pro Number: 378853483	
SPECIAL INSTRUCTIONS: Packing List is Attached		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: <input checked="" type="checkbox"/> 3rd Party: _____	
		<input type="checkbox"/> Master Bill of Lading: with attached (check box) underlying Bills of Lading	
		Appointment Time	Actual Driver Arrival Time
		AM	AM
		PM	PM
		Driver Departure Time	AM
			PM

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
20782863	1	20.68	Y N	1163608196	
Grand Total	1	20.68			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing 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
1	Pallet			50.00		Pallet		
		1	ctns	20.68		Furniture (Seating, Storage, Outdoor)	79300	150
1		1		70.68		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"/>
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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).

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. <p style="text-align: right;">Shipper Signature</p>
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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: Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <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.
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Order Date : 03/04/2024

Order No. : 20782863

Tel : 855-842-4358 Fax : 510-490-2804

WHOLESALE PLATFORM FOR HOUSEHOLD

Shipping From :

Rue Gilt Groupe
311 International Trade Pkwy
Port Wentworth, GA 31407

Shipping To :

Leigh Ann Lackey
52 Ledge View Drive
Huntsville AL 35802

Shipping Method :

LTL

Billing Address :

Ref. No. :

1163608196

Item No.	UPC	Description	Ref. No.	Qty Ord	Qty Sent
MT101-0014	086569229083	Ellen Cocktail Ottoman		1	1

To initiate a return, you must have a Return Authorization Number. For Return Policy information and the Return Authorization Number, please contact the company your item was purchased through.