

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

This form contains only the information necessary for the motor carrier to deliver, rate, and invoice the shipment described below.

**Shipper: Ship Date** 6/19/2025

Ship8 - SD3  
 311 International Trade Pkwy  
 port wentworth, GA 31407  
 Honorina Leaupepe (912) 875-2828  
 Reference Number: 20864212 OX

Carrier:	Southeastern Freight Lines, Inc.
Pro#:	
Load#:	519029197
PO#:	20864212

**Consignee: Due Date** 6/20/2025

Builder's Design FL Warehouse  
 11100 Boggy Creek Rd Unit 127  
 Receiving Dock Doors 21-23  
 Orlando, FL 32824  
 Builder's Design (301) 590-1108  
 Reference Number: 19831-0019

**All Freight charges PPD/3rd party bill to:**  
 OA Logistics c/o CHRLTL  
 14701 Charlson Road  
 Suite 2100  
 Eden Prairie, MN 55347

Type/ Reference #	SKU/ UPC	Description	QTY/ UOM	Pallets	Weight	Category/ Temp	NMFC/ Class
	UPC: 022164143584	Madison Park Solana Coastal Rice Paper Framed Shadow Box 3 Piece Set	1 Cartons		14	Dry	76580-5 100
	UPC: 022164143577	Madison Park Sabal Palm Rice Paper Framed Shadow Box 3 Piece Set	1 Cartons		16	Dry	76580-5 125
	UPC: 086569424808	Madison Park Signature Helena Round Dining Table	1 Cartons		97	Dry	79300-5 100
	UPC: 022164332711	INK+IVY Paths Collide Framed Carved Resin Dimensional Wall Decor	3 Cartons		79	Dry	76580-5 125
	UPC: 086569411914	Madison Park Pearce Bar Stool with Swivel Seat	2 Cartons		60	Dry	79300-4 175
	UPC: 086569031129	INK+IVY Kelly Accent Chair	2 Cartons		57	Dry	79300-3 175
			<b>10</b>		<b>323</b>		

**Shipper Special Instructions:**

N/A

**Consignee Special Instructions:**

N/A

**Comments:**

Please contact C.H. Robinson at 866-400-9216 or email LTLKC1@chrobinson.com & JLAHome@chrobinson.com for any in-transit questions or authorizations regarding this shipment. Thank you!

The Shipper certifies that the above named materials are properly classified, described, marked, labeled and packaged, and are in proper condition for transportation, according to the applicable regulations of the Department Of Transportation.

Shipper Signature X \_\_\_\_\_ Date: \_\_\_\_\_ Trailer# \_\_\_\_\_  
 Consignee Signature X \_\_\_\_\_ Date: \_\_\_\_\_ Seal# \_\_\_\_\_  
 Driver Signature X \_\_\_\_\_ Date: \_\_\_\_\_ Seal# \_\_\_\_\_

Permanent post-office address of shipper.