

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.

Pro #

Shipper: Ship Date 10/14/2025

Elisabeth Mygatt 14 Indian Creek Rd AUGUSTA, GA 30909-3749 Elisabeth Myggatt (804) 310-0286 Reference Number:

Carrier:	Old Dominion Freight Line, Inc.
Pro#:	
Load#:	530987634
PO#:	PO# 1841-9267-9452-1614

Consignee: Due Date 10/16/2025

SD3 311 International Trade Pkwy port wentworth, GA 31407 - (912) 875-2828 Reference Number:

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

Type/ Reference #	SKU/ UPC	Description	QTY/ UOM	Pallets	Weight	Category/ Temp	NMFC/ Class
		Furniture	1 Boxes		70	Dry	79300-5 125
Dimensions: L 93.0in x W 34.0in x H 6.0in							
		furniture	1 Boxes		70	Dry	79300-5 125
Dimensions: L 84.0in x W 25.0in x H 6.0in							
		furniture	1 Boxes		60	Dry	79300-5 125
Dimensions: L 86.0in x W 10.0in x H 5.0in							
			3	200			

Shipper Special Instructions:

Lift Gate: This location needs a Lift Gate, Residential: This location is a Residence

Consignee Special Instructions:

Comments:

Please contact C.H. Robinson at 866-400-9216 or email 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.