


Date: 3/19/2026 11:42:29 AM

Bill Of Lading

Page 1 of 1

SHIP FROM		Bill of Lading Number: 06757168001682281		
Name: E & E COMPANY LTD		 (402)06757168001682281		
Address: 311 International Trade Pkwy				
City/State/Zip: Port Wentworth, GA 31407				
PHONE: VENDOR:				
SHIP TO		CARRIER NAME: ARCBEST SOLUTIONS		
Name: Wendy DenoFascetti		Responsible Acct.No:		
Address: 12692 Lore Rd		Trailer number: 573404		
City/State/Zip: Ellsworth, MI 49729		Seal number(s):		
CID#: FOB: <input type="checkbox"/>		SCAC: ABFS		
Dept:		Pro Number:		
THIRD PARTY FREIGHT CHARGES BILL TO:				
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Address:				
City/State/Zip:		Prepaid: <input checked="" type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input type="checkbox"/>		
SPECIAL INSTRUCTIONS: Load #: 547554348		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)		
		Appointment Time	Actual Driver Arrival Time	Driver Departure Time
		AM	AM	AM
		PM	PM	PM

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
CS0000103561	1	88.00	Y N	
Grand Total	1	88.00		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	PACKAGE	
QTY	TYPE	QTY	TYPE			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. <small>See Section 2(a) of NMFC Item 360</small>	NMFC #	CLASS
1	ctns			88.00		Furniture Sub 7 - 10 but less than 12 per cubic foot	79300-7	92.5
1				88.00		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. <div style="text-align: right;">Shipper Signature</div>
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SHIPPER SIGNATURE / DATE This is to certify that the above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <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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Shipment Manifest (800168228)

BOL #:	06757168001682281	Customer:	CUSTSERV	Ship To:	Wendy DenoFascetti
Carrier:	ARCBEST SOLUTIONS	Ship Date:	03/19/2026	Load Number:	547554348
Trailer Number:	573404	Pro Number:		Seal Number:	
Total Cartons/Units:	1/1	Total Cube:	6.58	Total Weight(LB):	88.00
Ship From:	E & E COMPANY LTD 311 International Trade Pkwy Port Wentworth, GA 31407	Ship To:	Wendy Denofascetti 12692 Lore Rd Ellsworth, MI 49729		

<u>Customer PO No.</u>	<u>E&E SO No.</u>	<u>Mark for Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To Ship</u>	<u>Case Pack Qty</u>	<u>Total Cartons</u>	<u>Carton Weight (LB)</u>	<u>Total Weight (LB)</u>	<u>Carton Cube</u>	<u>Total Cube</u>
CS000010356 1	76403567		MPS115- 0059U1B	675716828622 MPS115-0059U1B K Beckett Footboard Slat	1	1	1	88.00	88.00	6.58	6.58

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 #



087999737

Shipper: Ship Date 3/19/2026

Ship8 - SD3
 311 International Trade Pkwy
 Port Wentworth, GA 31407
 Darrell Duckery 912.373.7778.3834
 Reference Number:

Carrier:	ABF Freight System Inc
Pro#:	087999737
Load#:	547554348
PO#:	CS0000103561

Consignee: Due Date 3/26/2026

Wendy DenoFascetti
 12692 Lore Rd
 Ellsworth, MI 49729
 Wendy DenoFascetti (858) 774-3366
 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
		K Beckett Footboard Slat	1		88	Dry	79300-08
Dimensions: L 84.0in x W 25.0in x H 6.0in							85
			1		88		

Shipper Special Instructions:

Consignee Special Instructions:

Address type: Residential, Lift Gate: Yes, Delivery Appointment: Yes, Lift Gate: This location needs a Lift Gate, Residential: This location is a Residence, Appointment Notification: Destination requires an appointment or notification

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 [Signature] Date: 3/19/26 Trailer# _____
 Consignee Signature X _____ Date: _____ Seal# _____
 Driver Signature X [Signature] Date: 3-20-26 Seal# _____

Permanent post-office address of shipper.