

SHIP FROM

Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 PHONE:
 VENDOR:

Bill of Lading Number: 06757168001702422



SHIP TO

Name: Diane Cohen
 Address: 457 Dutch Meadows Ln
 2203,
 City/State/Zip: SCHENECTADY, NY 12302
 CID#: FOB:
 Dept:

CARRIER NAME: ARCBEST SOLUTIONS

Responsible Acct.No:
 Trailer number: 500721
 Seal number(s):

SCAC: ABFS
 Pro Number: 087930839

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:

(check box) Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 Load #: 550621689

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
CS0000104109	1	95.00	Y	N	
Grand Total	1	95.00			

CARRIER INFORMATION

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
1	ctns			95.00		Furniture Sub 4 - 4 but less than 6 per cubic foot	79300-4	175
1				95.00		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: 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

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:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said 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.

Shipment Manifest (800170242)

BOL #:	06757168001702422	Customer:	CUSTSERV	Ship To:	Diane Cohen
Carrier:	ARCBEST SOLUTIONS	Ship Date:	04/17/2026	Load Number:	550621689
Trailer Number:	500721	Pro Number:	087930839	Seal Number:	
Total Cartons/Units:	1/1	Total Cube:	13.44	Total Weight(LB):	95.00
Ship From:	E & E COMPANY LTD 311 International Trade Pkwy Port Wentworth, GA 31407	Ship To:	Diane Cohen 457 Dutch Meadows Ln SCHENECTADY, NY 12302		

<u>Customer</u> <u>PO No.</u>	<u>E&E</u> <u>SO No.</u>	<u>Mark for</u> <u>Store</u>	<u>Item No.</u>	<u>Item Info.</u>	<u>Qty To</u> <u>Ship</u>	<u>Case</u> <u>Pack Qty</u>	<u>Total</u> <u>Cartons</u>	<u>Carton</u> <u>Weight</u> <u>(LB)</u>	<u>Total</u> <u>Weight</u> <u>(LB)</u>	<u>Carton</u> <u>Cube</u>	<u>Total</u> <u>Cube</u>
CS000010410 9	76588573		II103-0610	022164614619 64690098 Dakota Power Recliner with Swi	1	1	1	95.00	95.00	13.44	13.44