

SHIP FROM
 Name: E & E COMPANY LTD
 Address: 311 International Trade Pkwy
 City/State/Zip: Port Wentworth, GA 31407
 SID#: _____
 PHONE: _____
 VENDOR: _____ FOB:

Bill of Lading Number: 06757161362804682

 (402)06757161362804682

SHIP TO
 Name: _____ Location #: _____
 Address: _____
 City/State/Zip: _____
 CID#: _____
 Dept: _____ FOB:

CARRIER NAME:
 Responsible Acct.No: _____
 Trailer number: _____
 Seal number(s): _____
SCAC: UPSG
Pro Number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: Lisa Ray
 Address: 108 Walnut St
 City/State/Zip: Canton, GA 30115

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Prepaid: **Collect:** **3rd Party:** X
 Master Bill of Lading: with attached underlying Bills of Lading
 (check box)

SPECIAL INSTRUCTIONS:
 Customer PO/Ref No: 999-9081-7585-6948-9126-7650-6332

Appointment Time	Actual Driver Arrival Time	Driver Departure Time
AM	AM	AM
PM	PM	PM

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
10	ctns			52.85		Chandeliers, Pendants	109087	200
9	ctns			109.58		Comforters, Bedspreads	49017	200
8	ctns			93.59		Flushmounts, Table Lamps, Floor Lamps, Sconces, Bath, Outdoor, Shades	109085	200
5	ctns			52.26		Framed Goods	76580 Sub 5	125
22	ctns			924.67		Furniture Sub 3 - 2 but less than 4 per cubic foot	79300 Sub 3	250
21	ctns			874.76		Furniture Sub 4 - 4 but less than 6 per cubic foot	79300 Sub 4	175
11	ctns			528.79		Furniture Sub 5 - 6 but less than 8 per cubic foot	79300 Sub 5	125
2	ctns			8.10		Pet Accessories or Furniture	2071	300
1	ctns			7.05		Sheet Set & Pillowcase	49260 Sub 3	250
9	ctns			58.02		Throws,Blankets	49260	175
1	ctns			22.03		Vases & Bowls	74390	150

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.

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