Ship Date: 1/20/15 FINAL BILL OF LADING Page: 1														
SHIP FROM											DING Page: 1			
Name: American Woodmark Corporation Address: 4475 Mohave Airport Drive City/State/Zip: Kingman AZ 86401 FOB:  SHIP TO										Bill of Lading Number: 04-091730-001-01-05-00				
Customer: Name: Address: City/State/Zip Phone 1:	WADE JOHN D						Trail Seal	CARRIER NAME: Redman Van And Storage P56251 Seal number(s):  SCAC: MEWF						
Name: American Woodmark Corp. c/o Williams & Associates Address: 405 East 78th Street City/State/Zip: Bloomington, MN 55420										Pro number:  Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  Prepaid X Collect 3rd Party				
SPECIAL INST Master BOL :	00000	000 00					Agen	t:	t:					
3 . 33 17 30 - 000 - 00 - 00										meridian salt lake city ut				
CUSTOMER ORDER INFORMATION  CUST ORDER NUMBER  WEIGHT PALLET/SLIP													超相	
KP 73391160			Cabinets 21			Vgt <b>377</b>	Cubes	(CIRC	E ONE)		ADDITIONAL SHIPPER INFO			
GRAND TOTAL			21	39			242	Υ	N		PO # 15505886			
COLUMN TO THE	A CONTRACTOR		1077 247			OBMAT	ATION							
HANDLING UNIT  QTY TYPE 21 Cartons  14 Cartons	PIECES  QTY TYPE  21 Cabinets  39 Parts		WEIGHT		H.M. (X)	Com	CARRIER INFORMATION  COMMODITY DESCRIPTION  Commodities requiring special or additional care or attention in handling or stowing must be marked and packaged as to ensure safe transportation with ordinary care.  See Section 2(e) of NMFC Item 360  NMFC # CLASS  Wooden Kitchen Cabinets, s/u no glass						3	
35	60		1377			GRAND TOTAL								
RECEIVED, subject to ind	ividually dete	n for loss	or dam	age in	this s	hipm	nent may	be app	icable.	See 4	9 U.S.C. 14706(c)(1)	(A) and (B).		
Please Open and Inspect All Products Within 7 Days										o section 7 of the agreement between Shipper and Carrier if the is to be delivered to the consignee without recourse on the consignor gnor shall sign the following statement; The carrier shall not make on this shipment without payment of freight and all-other lawful charges.  Shipper				
	Consignee Signature / Date  IIPPER SIGNATURE / DATE									nature		5	LICA.	
his is to certify that the ab assified, described, pack e in proper condition for t oplicable regulations of th	roperly and	Trailer Loaded: Freight Coun    X   By Shipper   X   By Shipper     By Driver   By Driver/Pice				hipper river/palle	s said to co	CARRIER SIGNATURE / PICKUP DAT 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.  Property described above is received in good order, except as noted.						

RUN DATE: 01/20/15 7:10:25PM