()	7									-	1		
Ship Date: 10/8/14 FINAL BILL OF LADING Page: 1													
Name: Address: City/State/Zip	odmark Airport [Corpora Orive AZ 8	tion 86401	FC	DB: 🔲	Bill of	Lading Nu	mber: 04-06	55850-001-0	01-15-00			
Customer: Name; Address: City/State/Zip:	PARKHURST IRENE 572 S 350 E Location#:								CARRIER NAME: Redman Van And Storage Trailer number: 1009 Seal number(s):				
Phone 1: 801-546-3715 Phone 2: 801-546-3715 FOB:									: ımber:	MEWF			
Name: American Woodmark Corp. c/o Williams & Associates Address: 405 East 78th Street City/State/Zip: Bloomington, MN 55420								Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid X Collect 3rd Party					
SPECIAL INSTRUCTIONS:									Agent:				
Master BOL: 04-065850-000-00-00 CUSTOMER ORDER INFORM									meridian salt lake city ut				
CUST ORDE	Cabinets	Cabinets Parts		/EIGHT gt Cubes	PALLE (CIRCLE	T/SLIP	ADDITIONAL SHIPPER INFO						
KP 71366750 GRAND TOTAL			0	16	95		Υ	N	PO#	83555854			
GRANDI	and a comment	0	16	95	31 CARRIER INF	ORMATIC	N						
HANDLING UNIT	UNIT			in I	I.M. (X)	Commodities rea	COMM(juiring special and packaged	DDITY DESCRIPTION or additional care or attention in handling or stowing as to ensure safe transportation with ordinary care			LTL ONLY		
QTY TYPE 0 Cartons		QTY TYPE O Cabinets			-		See Se	tion Z(e) of NMFC Item 360			NMFC #	CLASS	
8 Cartons	16	Parts	s 95	<u>'</u>	+	VVOC	oden Kito	n Kitchen Cabinets, s/u no glass					
8	46		-	F									
	16		95					RAND T					
NOTE Liability	dividually det	ermined rate	es or contracts	that have he	an	nipment ma).	
the rates, classifications and rules that have been established by the carrier and are									oject to section 7 of the agreement between Shipper and Carrier if the pment is to be delivered to the consignee without recourse on the consignor consignor shall sign the following statement; The carrier shall not make ivery to this shipment without payment of freight and all other lawful charges.				
Consignee S	ignature	S.	F				-	Signature			Shipper		
SHIPPER SIGNA		Trailer I	oade	ed: Freigh	t Counte	q.	Carrier	RIER SIGNAT	t of packages and	d required			
This is to certify that the classified, described, pac are in proper condition for applicable regulations of	[7]	hipper	⊠ ву	Shipper Driver/palle	piacards. Carner certifies emergency response in was made available and/or carrier has the DOT er response quidebook or equivalent documentation				se information IT emergency tion				
Comments :	No	MCT	SIO				ő		RUNDA	TE: 10/07/14			
										NO C	drivers vic Tar	SIG	
											vic Tax	MIN	