| e) | - | | | | | | | | | | | | | 1 | | | | |
|--|----------------------------|--|---------------------------------|---|------------------------------------|---------------|-------------|--|---|---|-------------|-------------------|--|--------------------------|-----------------------------|------|---|--|
| Ship | Date: | 10/28/ | | SHIP FRO | | ADING Page: 1 | | | | | | | | | | | | |
| Name Addre City/S | | Bill of Lading Number: 04-071602-001-01-14-00 | | | | | | | | | | | | | | | | |
| Custo Name Addre City/S Phone | : ss: tate/Zip: | ZEEMER MARGARET Location#: 1755 CAPITOL ST OGDEN | | | | | | | | CARRIER NAME: Redman Van And Storage Trailer number: T1128 Seal number(s): B8195846 SCAC: MEWF Pro number: | | | | | | | | |
| | | Ameri 405 Ea Bloom | can Woo ast 78th nington, | CHARGE odmark C Street MN 5542 | THE RESERVE OF THE PERSON NAMED IN | s & Asso | ociates | Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid X Collect 3rd Party Agent: | | | | | | | | | | |
| | BOL: | | | 2-000-00-0 | 00-00 | | | | | meridia | an salt I | ake ci | ity ut | | | | | |
| CUST ORDER NUMBER | | | | Cabinets Part | | 1 | WEIG | | | MATION T/SLIP E ONE) | ADDITIONAL | | | | SHIPPER INFO | | | |
| KP 71731380 | | | | 7 | 7 7 | | 31 | 99 | Υ | N | N PC | | 0153 | 4451 | | | | |
| GRAND TOTAL | | | | 7 | 7 7 | | 31 | 99 | | | | | | | | | | |
| HAND UN QTY | LING NIT TYPE | QTY | TYPE | WEIG | ЭНТ | H.M. (X) | Comr | CARRIER INFORMATION COMMODITY DESCRIPTION Commodities requiring special or additional care or attention in handlir must be marked and packaged as to ensure safe transportation with o <u>Seed Section 2(e) of NMFC Item 360</u> | | | | | | or stowing nary care. | LTL ONLY are. NMFC # CLASS | | | |
| 7 | Cartons | 7 | Cabinet: Parts | 531 | | | Wooden Kitc | | | chen Cabinets, s/u no glass | | | | | | | | |
| | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | * | | | |
| 9 | | 14 | | 53 | | | | | | | GRAND TOTAL | | | | | | | |
| 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. Please Open and Inspect All Products Within 7 Days | | | | | | | | | | | | | | | | | | |
| Cons | Consignee Signature / Date | | | | | | | | | | | Signature Shipper | | | | | | |
| This is to certify that the above named materials are properly classified, described, 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. Property described above is received in good order, executes noted. | | | | | |
| Comme | ents : | | | | | | | | | | RU | IN DA | TE: 1 | 0/28/14 | 7:19:26F | PMCI | 9 | |