

Ship Date: 10/28/14

FINAL BILL OF LADING

Page: 1

SHIP FROM

Name: American Woodmark Corporation
Address: 4475 Mohave Airport Drive
City/State/Zip: Kingman AZ 86401

FOB: ☐

Bill of Lading Number: 04-071602-001-01-22-00



SHIP TO

Customer:
Name: CHACON DIANE
Address: 1164 S 1075 E
City/State/Zip: CLEARFIELD UT 84015
Phone 1: 801-589-1943 Phone 2: 801-589-1943

Location#:

FOB: ☐

CARRIER NAME: Redman Van And Storage

Trailer number: T1128

Seal number(s): B8195846

SCAC: MEWF

Pro number:

FREIGHT CHARGES BILL TO:

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 ☒ Collect ☐ 3rd Party ☐

SPECIAL INSTRUCTIONS:

Master BOL : 04-071602-000-00-00-00

Agent:

meridian salt lake city ut

CUSTOMER ORDER INFORMATION

CUST ORDER NUMBER	Cabinets		Parts		WEIGHT		PALLET/SLIP		ADDITIONAL SHIPPER INFO
					Wgt	Cubes	(CIRCLE ONE)		
KP 71776160	15		22		984	173	Y	N	PO # 83556193
GRAND TOTAL	15		22		984	173			

CARRIER INFORMATION

HANDLING UNIT		PIECES		WEIGHT	H.M. (X)	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.	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
15	Cartons	15	Cabinets	984		Wooden Kitchen Cabinets, s/u no glass		
7	Cartons	22	Parts					
22		37		984		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

Subject to section 7 of the agreement between Shipper and Carrier if the shipment is to be delivered to the consignee without recourse on the consignor the consignor shall sign the following statement: The carrier shall not make delivery to this shipment without payment of freight and all other lawful charges.

Consignee Signature / Date

Signature

Shipper

SHIPPER SIGNATURE / DATE

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:

Freight Counted:

☒ By Shipper☒ By Shipper☐ By Driver☐ 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 except as noted.

Comments :

RUN DATE: 10/28/14 7:20:48PM

10/29/8