

Date: 9/19/03

BILL OF LADING

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SHIP FROM

Name: VAN MAR INC
Address 120 TICES LANE

City/State/ZIP: EAST BRUNSWICK ,NJ ,08816

SID#: VANMAR

FOB: ☐

Bill of Lading Number:

07353440000350750

40207353440000350750

(402) 07353440000350750

SHIP TO

Name: WAL-MART DC 6068G-GEN Location #: 6068

Address 2120 N SEMMONS FWY

City/State/ZIP: SANGER ,TX ,76266

CID#: WAL01

FOB: ☒

CARRIER NAME: 00

Trailer number:

Seal number(s):

SCAC:

Pro number:

9012K

(9012K)

THIRD PARTY FREIGHT CHARGES BILL TO :

Name:

Address

City/State/ZIP:

SPECIAL INSTRUCTIONS:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid Collect X 3rd Party☐
(check box)Master Bill of Lading: with attached
underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
0900768473	10	170	<input checked="" type="radio"/> <input type="radio"/>	WAL-MART DC 6068G-GENERAL, O , 00029, 09
			<input checked="" type="radio"/> <input type="radio"/>	
			<input checked="" type="radio"/> <input type="radio"/>	
			<input checked="" type="radio"/> <input type="radio"/>	
			<input checked="" type="radio"/> <input type="radio"/>	
GRAND TOTAL	10	170 lbs		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLAS
1	PLTS	10	CTNS	170 lbs		LADIES INT APPAREL		
				0				
				0				
1		10		170		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to state 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

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

NOTE Liability Limitaion 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 rules 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.

Property deescribed above is received in good order, except as noted.