

Date: 01/03/2003		BILL OF LADING		Page 1				
SHIP FROM			Bill of Lading # 07353440033177993 <div style="border: 1px solid black; height: 40px; margin: 10px 0;"></div> BAR CODE SPACE					
Name: VAN MAR INC VAN MAR INC. Address: 120 TICES LANE City/State/Zip E BRUNSWICK, NJ 08816 SID#: 33177 FOB: <input type="checkbox"/>								
SHIP TO			Carrier Name: NART Trailer Number Seal Number: SCAC: NART Pro number:					
Name: TARGET DC #0560 - STUARTS DRAFT Address: C/O NART 2701 16TH STREET BLDG. B City/State/Zip NORTH BERGEN, NJ 07047 CID#: FOB: <input checked="" type="checkbox"/>								
THIRD PARTY FREIGHT CHARGES BILL TO			<div style="border: 1px solid black; height: 40px; margin: 10px 0;"></div> BAR CODE SPACE					
Name: Address: City/State/Zip								
SPECIAL INSTRUCTIONS			Freight Charge Terms (<i>freight charges are prepaid unless marked otherwise</i>) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading					
DELIVER TO: TARGET DC0560 FLOW 423 MOUNT VERNON ROAD STUARTS DRAFT, VA 24477 MASTER BILL OF LADING#32305								
CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO			
022-1723859-0560		4	12	N				
022-3291392-0560		10	43	N				
022-3823702-0560		44	63	Y				
022-5091992-0560		10	35	N				
GRAND TOTAL		68	153					
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			NMFC #	CLASS	
1	BNDL	4	CTNS	12		LADIES INTIMATE APPAREL	49880	100
1	BNDL	10	CTNS	43		LADIES INTIMATE APPAREL	49880	100
1	PLTS	44	CTNS	63		LADIES INTIMATE APPAREL	49880	100
1	BNDL	10	CTNS	35		LADIES INTIMATE APPAREL	49880	100
4		68		153		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 _____ Per _____						COD Amount: ! Fee Terms: Collec <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer Check Acceptat <input type="checkbox"/>		
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 1 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 all the terms and conditions of the NMFC Uniform Straight Bill of Lading.						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
SHIPPER SIGNATURE / DATE						CARRIER SIGNATURE / PICKUP 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.						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. <i>Property described above is received in good order, except as noted.</i>		
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input checked="" type="checkbox"/> By Driver/Pieces								