



SHIP FROM Name: BRADSHAW HOME INC. Address: 9415 KAISER WAY City/State/Zip: Fontana, CA 92335 FOB:		Master Bill Of Lading Number: 07675300046204453 	
SHIP TO Name: WAL-MART DC 6092A ASM Address: 3110 ILLINOIS HWY 89 City/State/Zip: SPRING VALLEY, IL 61362 FOB:		Carrier Name: GLBL - Fusion Transport Equipment: PTLZ222002C Seal number(s): 2G-012566 SCAC: GLBL Pro Number: 585284  585284	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input checked="" type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: Underlying BOLs: 07675300046187756, 07675300046187817, 07675300046187824			

BillTo Customers: 01B-039144,02B-5480
11/22/2024

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER		# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)		ADDITIONAL SHIPPER INFO
4508989971		45	224.78	Y	N	7514276-7654357
5735158445		15	105.66	Y	N	7511079-7654374
9781933426		20	222.40	Y	N	7511088-7654385
				Y	N	
				Y	N	
GRAND TOTAL		80	552.84			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. <small>See Section 2(e) of NMFC Item 360</small>	NMFC #	CLASS
SEE ATTACHED SUPPLEMENT PAGE								
4		80		552.84		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:

Collect: ☐Prepaid: ☐Customer check acceptable: ☐

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.

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, 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

Chep Pallets

48" Spaces

Freight Counted:

☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

60" Spaces

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.

Door #

For any issues, please contact BradshawOSD@bradshawhome.com



Trailer #

Master Bill of Lading Number : 07675300046204453

Bill of Lading Number : 07675300046204453

Page 2

HANDLING UNIT		PACKAGE		WEIGHT(LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.	NMFC #	CLASS
						See Section 2(e) of NMFC Item 360		
4	Pallets	16	Case	214.40		Other (brooms, brushes)	13120.01	400
		4	Case	56.80		TABLE/KITCHENWARE	13120.01	400
		45	Case	224.78		palstic-disposable	156600.04	175
		4	Case	30.72		STOPPERS,LIDS,CAPS,& OTHER CLOSURES,OF PLASTIC	156600.07	92.5
		7	Case	18.14		Kitchenware of stainless steel	156600.09	70
		4	Case	8.00		Other (brooms, brushes)	33010.03	250
4		80		552.84		GRAND TOTAL		

SHIP FROM		Bill Of Lading Number: 07675300046187756	
Name: BRADSHAW HOME INC. Address: 9415 KAISER WAY City/State/Zip: Fontana, CA 92335			
SID1296238	FOB:	Master Bill Of Lading Number: 07675300046204453	
SHIP TO		Carrier Name: GLBL - Fusion Transport	
Name: WAL-MART DC 6092A ASM Address: 3110 ILLINOIS HWY 89 City/State/Zip: SPRING VALLEY, IL 61362		Equipment: PTLZ222002C	
FOB:		Seal number(s): 2G-012566	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: GLBL	
		Pro Number: 585284	
			
		585284	
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
SPECIAL INSTRUCTIONS: POS REPLEN		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

BillTo Customers: 01B-039144

Must Arrive By 11/22/2024

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)	ADDITIONAL SHIPPER INFO
5735158445		15	105.66	Y N	7511079-7654374
				Y N	
				Y N	
				Y N	
				Y N	
GRAND TOTAL		15	105.66		



CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360	NMFC # CLASS
1	Pallets	4	Case	56.80		TABLE/KITCHENWARE	13120.01 400
		4	Case	30.72		STOPPERS,LIDS,CAPS,& OTHER CLOSURES,OF PLASTIC	156600.07 92.5
		7	Case	18.14		Kitchenware of stainless steel	156600.09 70
1		15		105.66		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: _____ Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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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.		The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	
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.		Signature _____ Shipper	
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Chep Pallets _____ 48" Spaces _____ 60" Spaces _____		Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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.	

For any issues, please contact BradshawOSD@bradshawhome.com

SHIP FROM Name: BRADSHAW HOME INC. Address: 9415 KAISER WAY City/State/Zip: Fontana, CA 92335 SID1296244 FOB:		Bill Of Lading Number: 07675300046187817  Master Bill Of Lading Number: 07675300046204453	
SHIP TO Name: WAL-MART DC 6092A ASM Address: 3110 ILLINOIS HWY 89 City/State/Zip: SPRING VALLEY, IL 61362 FOB:		Carrier Name: GLBL - Fusion Transport Equipment: PTLZ222002C Seal number(s): 2G-012566	
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: GLBL Pro Number: 585284  585284	
SPECIAL INSTRUCTIONS: POS REPLEN		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect _____ 3rd Party _____	
		<input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading	

BillTo Customers: 01B-039144

Must Arrive By 11/22/2024

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)		ADDITIONAL SHIPPER INFO
9781933426	20	222.40	Y	N	7511088-7654385
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	20	222.40			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
						Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.	NMFC #	CLASS
QTY	TYPE	QTY	TYPE			See Section 2(a) of NMFC Item 360		
2	Pallets	16	Case	214.40		Other (brooms, brushes)	13120.01	400
		4	Case	8.00		Other (brooms, brushes)	33010.03	250
2		20		222.40		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: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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.



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, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Chep Pallets _____ 48" Spaces _____	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces 60" Spaces _____	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.
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For any issues, please contact BradshawOSD@bradshawhome.com

SHIP FROM		Bill Of Lading Number: 07675300046187824
Name: BRADSHAW HOME INC. Address: 9415 KAISER WAY City/State/Zip: Fontana, CA 92335		
SID1296245	FOB:	
SHIP TO		Master Bill Of Lading Number: 07675300046204453
Name: WAL-MART DC 6092A ASM Address: 3110 ILLINOIS HWY 89 City/State/Zip: SPRING VALLEY, IL 61362		Carrier Name: GLBL - Fusion Transport
FOB:		Equipment: PTLZ222002C
		Seal number(s): 2G-012566
THIRD PARTY FREIGHT CHARGES BILL TO:		SCAC: GLBL
		Pro Number: 585284
		 585284
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>
SPECIAL INSTRUCTIONS: POS REPLEN		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)

BillTo Customers: 02B-5480
Must Arrive By 11/22/2024

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)		ADDITIONAL SHIPPER INFO
4508989971	45	224.78	Y	N	7514276-7654357
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	45	224.78			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
						Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. <i>See Section 2(e) of NMFC Item 360</i>	NMFC #	CLASS
1	Pallets	45	Case	224.78		palstic-disposable	156600.04	175
1		45		224.78		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: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper

Signature

SHIPPER SIGNATURE/DATE	Trailer Loaded:	Freight Counted:	CARRIER SIGNATURE/PICKUP 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.	<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper	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.
	<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said to contain	
	Chep Pallets _____	<input type="checkbox"/> By Driver/Pieces	
	48" Spaces _____	60" Spaces _____	

For any issues, please contact BradshawOSD@bradshawhome.com