

BILL OF LADING

SHIP FROM SAMSUNG ELECTRONICS AMERICA c/o Ontario W/H 5750 EAST FRANCIS STREET Ontario CA 91761 US Tel.		Bill of Lading: 17490718 FP  Partial Truck Load 52									
SHIP TO INGRAM MICRO (HAZLETON) 101 COMMERCE DRIVE HAZLE TOWNSHIP PA 18202-0000 US Tel. 714-566-1000		CARRIER : FLOCK FREIGHT INC. Trailer number: 834- Seal number(s): 4151649 581297 BK/Appt.: USHZ007834									
FREIGHT CHARGES BILL TO Customer Requested Delivery Date *Must be delivered on <u>10-7-24</u>		Pro number: 17490718 SCAC: FLOK Freight Charge Terms: (Freight Prepaid & Allowed) Prepaid (X) Collect () 3rdParty () <input type="checkbox"/> (Check box) Master B/L or Lading with attached Undersigned B/L or Lading									
FOR GENERAL ISSUES, EMAIL: SEA400@SEA.SAMSUNG.COM / FOR OSAR, CONTACT: (909)218-1041, (909)218-5029 / EMAIL: ROSA.CHAVIRA@FRONTIER-LOGISTICS.COM, ISAAC.LEE@FRONTIER-LOGISTICS.COM		RECEIVING STAMP AREA									
SPECIAL INSTRUCTIONS: Total pallet Qty(9); P4575C(4), P4840G(1), P6641C(4) Appt. Date / Time: 10/07/2024 / 07:00:00		<p style="text-align: right;">10/07/24</p> <p>DC# 89 Date: _____ PO#: _____ TRLR# <u>09</u> S.1 TOT CS REC <u>100</u> S.1 TOT PLTS <u>9</u> D.O Total Cases Rejected: <u>0</u> Reason: <u>Driver Pmt</u> RECD BY: _____ Packing Slip Enclosed: Yes - N Time In: _____ Time Out: _____ Driver Signature: _____</p>									
<p><u>Freight Inspected, good condition</u></p> <p><u>1 NO Pallets</u></p> <p><u>179.99</u></p> <p><u>9</u></p> <p><u>(2) Products</u> <u>DAMAGED</u></p> <p><u>1 Short</u></p> <p><u>2 Refused Damage</u></p>											
CUSTOMER ORDER INFORMATION											
CUSTOMER		HANDLING	#PKGS	WEIGHT	ADDITIONAL SHIPPER INFO						
ORDER NUMBER		QTY	TYPE (PCS)	(LB)	DO#	ITEM#	LINEAR	CUST.MODEL(MODEL)	DEPT.		
See Attached Bill of Lading Supplement											
GRAND TOTAL		123		123	5,000.072		24.249				
CARRIER INFORMATION											
HANDLING		PACKAGE	WEIGHT	COMMODITY DESCRIPTION Commodities requiring special or additional care or attention in handling or stowing must be so marked and package as to ensure safe transportation with ordinary care See Section 2(e) of NMFC Item 300					LTL ONLY		
QTY	TYPE	QTY	TYPE	(LB)	NMFC#	CLASS	FAK				
See Attached Bill of Lading Supplement		123		5,000.072							
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 _____.											
NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).											
NOTICE: Shipped 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.	
										NOTE: This package serves as product display or sales purposes. Any damage to this package, including cosmetic damage, will result in a claim from Samsung Electronics Inc.	
SHIPPER SIGNATURE / DATE		Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Carrier <input type="checkbox"/> By Driver <input checked="" type="checkbox"/> By Driver/Pieces				CTN.Count:	CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier provides emergency response information was made available and/or carrier has the U.S. DOT emergency response guidelines or equivalent documentation in the vehicle. Property described above is received in good order, except as				
Shipper Signature Date 10/02/2024		Receiver Signature Date				123/9	Carrier Signature Date 10/02/2024				
- ORIGINAL COPY -										Liability: Volume: 749.926 FT3	