

Date: 23 Jun 2017	7	BILL OF LADING						Load #: SO3525	(Page 1)	
	SHIP FF			The second	100	A Company	REFERENCES			
Name: Address:	CMI MANN WAREHOUSE 8000 MARKET STREET ROAD SUITE 130									
City/State/Zip: HOUSTON, TX 77029			SO3525							
Contact Name:				SO3525(Customer Load Number),101860999901(Billing Ref						
Contact Email: Phone:	712 675 1701	742 675 4704			Num),838766S(Customer Acct Number),SN3409(Shipment ID),					
Shipper Ref:	/13-6/5-1/01	13-675-1701								
	SHIP TO			Accessorials:						
Name: Address:	CTI ANDERE & NOGERA									
Address.	14411 EXPORT RD SUITE A PARQUE INDUSTRIAL ITC									
City/State/Zip:	LAREDO, TX 78045			CARRIER	NAME:					
Contact Name:				Trailer Nun						
Contact Email: Phone				Seal Numb	er(s):					
Consignee Ref:							·····			
BILL FREIGHT CHARGES TO:				Pickup 06/23/2017 07:00 AM - 06/23/2017 04:00 PM						
Name: Address:	GALHER EXPRESS SA DE CV 8801 SAN MATEO DR			Delivery	Delivery 06/26/2017 07:00 AM - 06/26/2017 03:00 PM					
City/State/Zip:	te/Zip: LAREDO, TX 78045					_				
Billing Ref: 101860999901 Special Instructions:			Freight Charge Terms: (freight charges are prepaid unless marked otherwise)							
				Prepaid X	Colle	ct	3rd Party			
	Master Bill of Lading: with attached (check box) Underlying Bills of Lading MER ORDER INFORMATION									
ITEM ID	# PKGS	WEIGHT	DIMEN	SIONS	CLAS		The state of the s	SCRIPTION	The same	
	10.0	17700.0			0.0		MISC	SCRIPTION		
GRAND TOTAL	10.0	17700.0		The same of the same		The said				

NOTE Liability Limitation for loss or damage is this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).								
RECEIVED, subject to individually determined rate been agreed upon in writing between the carrier at otherwise to the rates, classifications and rules that by the carrier and are available to the shipper, on thereby certifies that he/she is familiar with all the the NMFC Uniform Straight Bill of Lading, including the and the said terms and conditions are hereby agree accepted for him/herself and his/her assigns.	es or contracts that have nd shipper, if applicable, it have been established request. The shipper erms and conditions of the ose on the back thereof,	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Consignee 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	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 described above is received in good order, except as noted.					