



PICKUP DATE: 7/10/2018		BILL OF LADING	
SHIP FROM		BOL# : ORD20170710085	
Name:	MORRISON EXPRESS	CARRIER NAME: AREAWIDE	
Address:	371 Meyer Road		
City/State/Zip:	Bensenville, IL 60106		
SHIP TO		Trailer #:	
Name:	ST CLARE CATHOLIC SCH	Seal	
Address:	214 W 3RD ST	number(s):	
City/State/Zip:	O FALLON, IL, 62269	SCAC:	
THIRD PARTY FREIGHT CHARGES BILLTO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Name:	MORRISON EXPRESS	Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
Address:	2000 S. HUGHES WAY.		
City/State/Zip:	EL SEGUNDO, CA. 90245		
SPECIAL INSTRUCTIONS:			
PLEASE EMAIL POD TO ORD_POD@MORRISONEXPRESS.COM AND			
TEXT/CALL 224-500-8420 AT DOCK			
LIFTGATE, PALLET JACK			
APPT/C # MISHA 254-968-2476			
DELIVER ONLY ON – 7/11/2018 @ 08:00AM~11:00AM			

CUSTOMER ORDER INFORMATION					
HAWB#	DN	PLTS	CTNS	WEIGHT KG	PO NUMBER
CN101745127	8554216401	10	150	2500	1801700219
CN101745127	8554216402	10	150	2500	1801700219
CN101745127	8554216403	10	150	2500	1801700219
CN101745127	8554216404	10	150	2500	1801700219
CN101745127	8554216405	10	150	2500	1801700219
CN101745127	8554216406	10	150	2500	1801700219
CN101745127	8554216407	10	150	2500	1801700219
CN101745127	8554216408	10	150	2500	1801700219
CN101745127	8554216409	10	150	2500	1801700219
CN101745127	8554216410	10	150	2500	1801700219
CN101745127	8554216411	10	150	2500	1801700219
CN101745127	8554216412	10	150	2500	1801700219
CN101745127	8554216413	10	150	2500	1801700219
CN101745127	8554216414	10	150	2500	1801700219
CN101745127	8554216415	10	150	2500	1801700219
GRAND TOTAL					Please see more items next page

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 checked="" type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
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 U.S. DOT.		Signature _____ Shipper	
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.	

Received in Good Order Name: Angus Hsiao Signature: ngsl Date/Time: 08/08 15:36

HAWB#	DN	PLTS	CTNS	WEIGHT KG	PO NUMBER
CN101745127	8554216416	10	150	2500	1801700219
CN101745127	8554216417	10	150	2500	1801700219
CN101745127	8554216418	10	150	2500	1801700219
CN101745127	8554216419	10	150	2500	1801700219
CN101745127	8554216420	10	150	2500	1801700219
GRAND TOTAL		200	3000	50000	