

DELIVERY RECEIPT

052-9287433

TERMS PREPAID

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TRAILER 541774

AE 0001



0529287433

AVERITT
 THE POWER OF ONE

 1415 Neal Street • P.O. Box 3145 • Cookeville, TN 38502-3145
 1-800-AVERITT • Averitt.com

Consignee

1131994

 MCKESSON MEDICAL SURGICAL
 20710 HEMPSTEAD RD

HOUSTON, TX 77065

Contact:

Phone..:

Business hours 8.00 - 16.00

Receiving hours 5.00 - 10.00

Shipper

0999028

BECTON DICKINSON

BD DISTRIBUTION CENTER

130 FOUR OAKS PKWY

FOUR OAKS, NC 27524

Appointment Information

Appt. 11/29/23, 08:00

Contact: PER EMAIL CONF

Phone: 281-477-2170

ORIGIN	DEST.	DATE	P.O.#	SHIPPER REF #	O SCAC	ORIG. CARRIER FB#	DATE	TH	D SCAC	DEST. CARRIER FB#
RAL	HOU	11/21/23	See below	7115879357						

UNITS	HM	DESCRIPTION OF ARTICLES	CLASS	WEIGHT IN LBS	RATE	CHARGES
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RATE INFORMATION

APPOINTMENT NUMBER: 62010-4292951

DRVR SIGNED FOR: SLC

MEDICAL SUPPLIES

NMFC ITEM 056828-09

RATED AS CLASS 85

FUEL SURCHARGE

ARRIVAL NOTIFY

Purchase Order number...

32852063

32841814

32786695

32877919

33255614

32912457

33262367

TOTAL HANDLING UNITS: 2

TOTAL PIECES: 49

563

563

DELIVERY EXCEPTION COMMENTS:

Delivered 2 skids with clear plastic wrap intact in good condition

AE Pro#: 052-9287433

ADDITIONAL SERVICES PERFORMED

<input type="checkbox"/> INSIDE DELIVERY	<input type="checkbox"/> LIFT GATE
<input type="checkbox"/> RESIDENTIAL DELIVERY	<input type="checkbox"/> CONSTRUCTION SITE
<input type="checkbox"/> NON COMMERCIAL DELIVERY	<input type="checkbox"/> SORT AND SEGREGATE
<input type="checkbox"/> DRIVER NOT PRESENT	<input type="checkbox"/> SECURITY INSPECTION
<input type="checkbox"/> CUSTOMER NOT PRESENT	<input type="checkbox"/> SATURDAY DELIVERY

 ADDITIONAL CHARGES MAY APPLY
 ABOVE SHIPMENT RECEIVED IN GOOD ORDER EXCEPT WHERE NOTED
 Receiver Roberto mendoza

THIS IS NOT AN INVOICE

 For Customer Service Assistance Call 1-800-283-7488
 Liability of Averitt Express is limited to its governing tariffs

TOTAL FREIGHT CHARGES

COLLECT C.O.D. FEE

TOTAL COLLECT DUE

DRC: CASH ☐CHECK ☐

CHECK: AMOUNT:

C.O.D. AMOUNT (IN ADDITION TO TOTAL SHOWN ABOVE)

COD: CASH ☐ CHECK ☐ CHECK TO SHIPPER ☐

CHECK: AMOUNT:

Date: 11/29/23 Seal No.: _____

Skids Del: 2 PCS Del: 0

STRETCH WRAP INTACT ☒ Yes ☐ No ☐ N/ACOLOR: ☐ Blue ☒ Clear ☐ Black ☐ Other

Time in: 07:11 Time Out: 07:45

Delay Time (hh:mm) _____

Driver: FLORES,LUIS