

Date: 07/03/24 8.40 AM		BILL OF LADING		Page 1 of 1				
SHIP FROM			Bill of Lading Number: 89575579					
Name: MIT			Master Bill of Lading Number: 98989956					
Address: 13th Street			Customer PO#: 6566454580					
City/State/Zip: Temple, 899 76504			Reference #: 27734424					
SID#: 99989555 FOB: <input type="checkbox"/>			Delivery #: 89575579					
			Shipment #: 98989956					
SHIP TO			CARRIER DETAILS					
Name: COCA-COLA STORES INC.			Carrier Name: LOGISTICS SERVICES LLC					
Location #:			Address: 333 2ND E STE#660					
Address: 9605 Hickory			City/State/Zip: SKOPJE FL 89568					
City/State/Zip: TEXAS, TX 76502			SCAC: GVG Pro number:					
CID#: FOB: <input type="checkbox"/>			Trailer number: 89d89562					
Customer Phone:			Seal Number 9856484					
Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>								
POD INSTRUCTIONS: Carrier FAX TO: 8972-8544-599 Or Email To : Orders@amira.com								
Customer Order Information								
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
8952	45895	6666	56	IHNEJ24NHNU2	895752588	05L.DM.GREATVALUE.24P.N.8 4.CH	235426463572	85007 lbs
Totals								
8952	45895	6666	56					85007 lbs
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (Receiving Stamp:			
CARRIER								
CARRIER SIGNATURE/PICKUP DATE				If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		FACILITY CHECKOUT		
Property described above is received in good Order, except as noted.						Appt Time: 7/3/24 9:05 PM		
Print Name:				Consignor Signature		Check In Time: 7/3/24 5:30 AM		
				Date		Check Out Time: 7/3/24 8:40 AM		
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.				COD Amount: \$		LTL ONLY		Delivery Time: 7/3/24 9:05 PM
						NMFC # CLASS		Driver Name: TRTRT
				0				Driver Initials: _____
								NBL Initials: _____
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.								
CARRIER INSTRUCTIONS								
Driver:Should you encounter any delays preventing the on time delivery of this shipment. Please dial 8972-8544-599 for assistance.								