

Date: 12/20/2012

BILL OF LADING

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SHIP FROM

Name: TERESA'S TST COMPANY
Address: 975 EVERGREEN CIRCLEFOB:
OUR DOCK
281-6811959
281-6812663

City/State/Zip: THE WOODLANDS TX 77380

SHIP TO

Name: BOWLIN BANGLES WAREHOUSE
Address: 15 JAYHAWK DR.

Location#: _____

816-7343333
816-7342222

City/State/Zip: LIBERTY MO 64068 USA

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:City/State/Zip:
SPECIAL INSTRUCTIONS:

Bill of Lading Number: 010001755

CARRIER NAME: ABF (COL)

Trailer Number:

Seal Number(s):

☐ Hazardous Material ☒ Protect from Freezing

SCAC: ABFC

Pro Number:

Freight Charge Terms (Freight charges are prepaid unless marked otherwise)

Prepaid _____ Collect X 3rd Party _____☐
(check box)Supplemental Form Required
When Box Checked

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	CUSTOMER PO #	ADDITIONAL SHIPPER INFO
0037273 - 0003043 - 0000	BOLnonHM-short	BOL by packaging

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (RQ)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) or NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
10	EDICT	10	EDICT	600.0000		NMFC PLAIN	NXXXXX1	999-9
10		10		600.0000		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 _____.

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer Check Acceptable: ☐**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.

Signature Shipper

SHIPPER SIGNATURE AND / 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.

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.