

Date: 06/13/2024

BILL OF LADING**SHIP FROM**

Name: Cherryville Public Warehouse, Inc.
 Address: 600 WEST ACADEMY STREET
 City/State/Zip: CHERRYVILLE NC 28021
 SID#: A/C VERATEX, INC

FOB: ☐Bill of Lading Number: 61324-500

BAR CODE SPACE

SHIP TO

Name: JOG-A-LITE INC. Location #: _____
 Address: DIV.CUSTOM SAFETY USA. 18 HIGH STREET
 City/State/Zip: SILVER LAKE, NH 03875
 CID#: _____

FOB: ☐CARRIER NAME: TFORCE ACCT:19980911

Trailer number: _____

Seal

SCA

Pro

LIMITATIONS OF LIABILITY APPLY. SUBJECT TO LIMITS OF LIABILITY OF THE CARRIER'S RULES TARIFF. CUSTOMER SERVICE 1-800-333-7400



TForce Freight 936 489 864 GAF

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: _____
 Address: _____

City/State/Zip: _____

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

Prepaid _____ Collect ☒ 3rd Party _____
☐
 (check box)

Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
ORDER#20316	1	300	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	YARDS
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
GRAND TOTAL	1	300		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	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) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
1	Pallets	1	Rolls	90		ROLL OF CLOTH		
						ACCOUNT#19980911		
1		1		90		GRAND TOTAL		

RECEIVING
STAMP SPACE

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 / 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.

TIFINOR 200K (1) PUT
 6-13-20

SHIPPING MEMORANDUM

VERATEX, INC

SHIPPED TO: **JOG-A-LITE**

DIV. CUSTOM SAFETY USA,
18 HIGH STREET
SILVER LAKE
NH
USA
03875

MEMO #: 242116

SHIPPED DATE: 06/13/2024

SHIPPED VIA

TFORCE

PO #: 20316

MISCELLANEOUS:

#	Case #	Gross Weight	Description	Yards	Units	Receipt #	Lot #
1	8840106	300.00	V200-F60 ORANGE	300.00	1	107290	20022
		300.00		300.00	1		