

BILL OF LADING				BOL Number: 67833699																																			
SHIP FROM				Carrier: Ward Trucking, LLC																																			
Name: Rebtex Printworks (BBFS)				Pro #: _____																																			
Address: 40 INDUSTRIAL PKWY.,				BAR CODE SPACE																																			
City/State/Zip: BRANCHBURG, NJ, 08876				Pick up date: 6/11/2026																																			
Shipping P: (908) 722-3549 Ext.				Trailer #: _____ Seal #: _____																																			
SHIP TO				REFERENCE INFORMATION																																			
Name: Pearl Trim & Textile (for BBFS)																																							
Address: 721 West Grange Avenue																																							
City/State/Zip: PHILADELPHIA, PA, 19120																																							
Bias Binding & Fabric Solutio P: (978) 223-8956 Ext.																																							
Stop Notes: _____																																							
THIRD PARTY FREIGHT CHARGES BILL TO																																							
Echo Global Logistics 600 W. Chicago Avenue, Suite 725 Chicago, IL 60654																																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Freight Charge Terms:</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td>Prepaid</td> <td>☒</td> <td>Carrier Acct #:</td> <td colspan="2"></td> <td colspan="2"></td> <td></td> </tr> <tr> <td>Collect</td> <td>☐</td> <td>Quote ID:</td> <td colspan="2"></td> <td colspan="2"></td> <td></td> </tr> <tr> <td>3rd Party</td> <td>☐</td> <td colspan="6"></td> </tr> </table>								Freight Charge Terms:								Prepaid	☒	Carrier Acct #:						Collect	☐	Quote ID:						3rd Party	☐						
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Special Instructions:				Shipper Instructions		Consignee Instructions																																	
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading. LTL or Partial Only: # of Pallets: 2 Pallet Type: Skid Spots: 4 Stackable: No Pallet Dimensions: L: W: H:				Pickup #:		Delivery #:																																	
				Loc Type: Business		Loc Type: Business																																	
				Special Services:		Special Services:																																	
CARRIER INFORMATION																																							
HANDLING UNIT		PACKAGE		HM		OD																																	
QTY	TYPE	QTY	TYPE	WEIGHT	(X)	(X)																																	
1	Pallets	0	1 Reel S	937 lb																																			
1	Pallets	0	9 Reel S	774 lb																																			
2		0		1711 lb																																			
COMMODITY DESCRIPTION						LTL Only																																	
Commodities requiring special or additional care or attention, as outlined or otherwise noted, to be so marked and described as follows:						NMFC#																																	
						CLASS																																	
Fabric , Length: 64, Width: 44, Height: 59						49260-00	100																																
Fabric , Length: 64, Width: 44, Height: 47						49260-00	92.5																																
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 this property is specifically stated by the shipper to be not exceeding _____."																																							
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). The carrier shall not make delivery of this document without payment of freight and all other lawful charges. (Section 7) _____ Shipper Signature																																							
SHIPPER SIGNATURE / DATE				Trailer Loaded:		Freight Counted:																																	
I hereby certify that the above information is true and correct, and that the goods are properly packed, sealed, secured, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.				☐ By Shipper ☐ By Driver		☐ By Shipper ☐ By Driver/pallets said to contain ☐ By Driver/Pieces																																	
Shipper: _____ Date: _____				CARRIER SIGNATURE / PICKUP DATE		Carrier certifies emergency response information was made available under contract to the Department of Transportation emergency response guidelines or equivalent documentation in the vehicle. Carrier: _____ Date: _____																																	