

KDL

Dispatch Ph:

Bill of Lading**Non-Negotiable****PICKUP CONFIRMATION**

#: WBU40457004

RECEIVED, subject to the "COMMON CARRIER RATE AGREEMENT" or the CONTRACT between the Shipper and Carrier in effect on the date of shipment, the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown below. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state regulatory agency, except as specifically agreed to in writing by the shipper and the carrier.

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|---|--|
| ORIGIN: Shawmut A/C Veratex 1808 CADIZ ST BURLINGTON, NC 27217 Hours: 8:30 AM-3:00 PM Contact: Carolyn Phone: 2158152167 Fax: Apt #: | DEST: Hi-Tech Narrow Fabrics 90 Dayton Ave Bldg 3 PASSAIC, NJ 07055 Hours: 8AM TO 4 PM Contact: Richard D Dubin Phone: 2158152167 Fax: Apt #: |
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|--|--|
| SEND INVOICE TO Keystone Dedicated Logistics P.O. BOX 752 Carnegie, PA 15106 | Ship Date: 05-22-2023 BOL #: QFR8038383 - CAPTURE REQUIRED ON BILLING LOAD #: Q600040179 PO #: RICH SO #: Carolyn Shipper's #: Carrier's #: |
|--|--|

SPECIAL INSTRUCTIONS: Go to Trucking entrance

| Handling Units | Pieces | HM | Description | NMFC# | Class | Weight | Freight Charges |
|----------------|--------|----|--|--------------------------|-------|------------|-----------------|
| 1 Pallet | 5 | | polyester fabric | 49260-08 | 85 | 843 Lb | Third Party |
| | | | | 72.00" X 44.00" X 32.00" | | | |
| Totals: | | | 5 Pieces in/on 1 Handling Units | | | 843 | |

ANY ACCESSORIALS REQUIRED OTHER THAN LISTED IN SPECIAL INSTRUCTIONS MUST BE APPROVED BY QUICK FREIGHT RATES. SERVICES NOT APPROVED WILL NOT BE PAID!

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



TForce Freight

741 276 292 GBO

Subject to Section 7 of the agreement between Shipper and Carrier, if the shipment is to be delivered to the consignee without recourse on the consignor, the originator shall sign the following statement:
The carrier shall not make delivery of this shipment without payment of freight and all lawful charges.

Shawmut A/C Veratex

C.O.D. AMOUNT \$ _____
Remit C.O.D. amount to:
CARRIERS C.O.D. FEE PAID BY:
____ Shipper ____ Consignee

FORM OF PAYMENT

____ Company Check
____ Money Order
____ Cashiers Check
____ Other _____

Carrier's liability is for actual loss unless otherwise agreed in Appendix B to Common Carrier Rate Agreement, contract, or stated below. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per pound.

____ Shipper
per _____

per _____
(Shipper or Shipper's Agent Signature)

Time & Date tendered _____ AM/PM

PERMANENT ADDRESS:

Accepted in good order and condition, unless otherwise stated herein,

PIECES _____

Exceptions:

Driver Load: Yes _____ No _____

Placard Provided: Yes _____ No _____

UPS FREIGHT - OVE002 - UPGF**800-333-7400**

per _____
(Driver's Signature)

Time & Date tendered _____ AM/PM

Shipper Certification

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 Department of Transportation

per _____ Date _____

Carrier Certification

Carrier acknowledges receipt of packages and required placards, Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guide book or equivalent document in the vehicle.

per _____ Package Nos _____
Date _____

156 TFI
5/23/23