

BILL OF LADING**BOL Number: 54410770****SHIP FROM**

Name: Shawmut Perry A/C Veratex Inc.
 Address: 1808 CADIZ ST.,
 City/State/Zip: BURLINGTON, NC, 27217
 Amy Watford P: 3362635729 Ext.
 Stop Notes:

SHIP TO

Name: Cutting Edge Texstyles
 Address: 706 S 21ST ST
 City/State/Zip: IRVINGTON, NJ, 07111
 Hala or Steve P: (973)982-6419 Ext.
 Stop Notes:

THIRD PARTY FREIGHT CHARGES BILL TO

Echo Global Logistics
 600 W. Chicago Avenue, Suite 725
 Chicago, IL 60654

Freight Charge Terms:

Prepaid Carrier Acct #:
 Collect Quote ID:
 3rd Party

Special Instructions:

DO NOT STACK Delivery closed on Friday's and Monday 7/3 and Tuesday 7/3 For ?s call Charlie @ 708 663 6441

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: 3 Pallet Type: Skid Spots: 0 Stackable: No
 Pallet Dimensions: L: W: H:

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	HM (X)	OD (X)	COMMODITY DESCRIPTION		LTL Only	
QTY	TYPE	QTY	TYPE				Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to			
3	Pallets	0		2005 lb			Cloth or Fabric, Cotton or Synthetic		049260-06	100
3		0		2005 lb			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. (Section 7)

Shipper Signature

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 Department of Transportation.

Shipper: _____ Date: _____

Trailer Loaded:

Freight Counted:

By Shipper
 By Driver

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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

Carrier: _____ Date: _____