

BILL OF LADING



Reference							PRO			
BOL: 60105733348 Carrier: WARD Trucking, WARD Pickup Date: 8/23/2023 8:00 AM - 5:00 PM Delivery Window: 8:00 AM - 4:30 PM Carrier Pickup: 9990823373 Carrier Quote Number: XMLWS0185727050							AFFIX PRO STICKER HERE			
							Origin Terminal			
							Raleigh, NC Phone: +1 (919) 596-7800			
							Destination Terminal			
SOUTH PLAINFIELD, NJ Phone:										
Shipper							Consignee			
A/C Veratex Inc/Shawmut 1808 Cadiz St Burlington, NC 27217 P: +1 (336) 221-2605							Cutting Edge TexStyles 706-708 South 21st ST Irvington, NJ 07111 Regina Serrano P: +1 (978) 423-8876 Alt:			
3rd Party Bill To							Freight Terms			
Priority1 Inc. ATTN: Accounts Payable P.O. Box 398 North Little Rock, AR 72115 P: +1 (501) 371-9814							<input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party			
Special Instructions: Delivery assessorial must be authorized by the third party billing agent before delivery is completed Delivery instructions: Closed on Fridays.							Accessorial:			
Units	Type	Pieces	Weight	Dimensions	HM	Item Description		NMFC	Class	
1	Pallet	1	407 lbs	65" x 44" x 36" (in)		Cloth, Fabric or Piece Goods, natural or synthetic fiber,		49265	125	
1		1	407 lbs					Grand Totals		
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 ____."										
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. Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).					Trailer Loaded Shipper <input type="checkbox"/> Driver <input type="checkbox"/>		Freight Counted Shipper <input type="checkbox"/> Driver <input type="checkbox"/>		The Carrier shall not make delivery of this shipment without payment of and all other lawful charges. Shipper: _____	
Shipper Signature / Date						Carrier Signature / Pickup Date				
Shipper: _____ This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.						Carrier: _____ 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 vehicle. Property described above is received in good order, except as noted.				