

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

This form contains only the information necessary for the motor carrier to deliver, rate, and invoice the shipment described below.

Shipper: Ship Date 11/8/2023

Rebtex 40 Industrial Pkwy Somerville Somerville, NJ 08876 Simora Rebtex (908) 722-3549 Reference Number: 70270

Carrier:	Central Transport LLC
Pro#:	
Load#:	454293259
BOL#:	1612554566
MBOL#:	C8754975

Consignee: Due Date 11/10/2023

Cherryville Public Warehouse 600 W Academy St CHERRYVILLE, NC 28021 Scott Cherryville (704) 435-5465 Reference Number:
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All Freight charges PPD/3rd party bill to:

CHRLTL
14800 Charlson Road
Suite 2100
Eden Prairie, MN 55347

Type/ Reference #	SKU/ UPC	Description	QTY/ UOM	Pallets	Weight	Category/ Temp	NMFC/ Class
		fabric	1 Pallet	1.00	310	Dry	125
Dimensions: L 54.0in x W 54.0in x H 24.0in							
			1	1	310		

Shipper Special Instructions:**Consignee Special Instructions:****Comments:**

For issues: 866-851-5477 | kccrlogistics@chrobinson.com

Notice: Freight moving under this Bill of Lading is subject to classifications and tariffs established by the carrier and are available to shipper upon request. This notice supersedes and negates any claimed oral or written contract, promise, representation, or understanding between parties, except to the extent of any written contract signed by both parties to the contract.

Any unauthorized alteration or use of this bill of lading or the tendering of this shipment to any carrier other than that designated by company, may VOID company's obligations to make any payments relating to this shipment and VOID all rate quotes. All shippers, consignors, consignees, freight forwarders or freight brokers are jointly and severally liable for the freight charges relating to this shipment. CUSTOMER AGREES TO THE ORGANIZATION'S TERMS AND CONDITIONS, WHICH CAN BE FOUND <https://freightquote.com/book/#/terms-and-conditions>

The Shipper certifies that the above named materials are properly classified, described, marked, labeled and packaged, and are in proper condition for transportation, according to the applicable regulations of the Department Of Transportation.

Shipper Signature X _____ Date: _____ Trailer# _____
Consignee Signature X _____ Date: _____ Seal# _____
Driver Signature X _____ Date: _____ Seal# _____

Permanent post-office address of shipper.