

Date: 05/08/2024

# BILL OF LADING

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## SHIP FROM

Name: Cherryville Public Warehouse, Inc.  
Address: 600 WEST ACADEMY STREET  
City/State/Zip: CHERRYVILLE NC  
SID#: A/C DUNAWAY YARNS

FOB: ☐

Bill of Lading Number: 4824-500

BAR CODE SPACE

## SHIP TO

Name: International Foam Inc. Location #: \_\_\_\_\_  
Address: 10530 WESTLAKE DRIVE  
City/State/Zip: CHARLOTTE, NC 28273  
CID#: \_\_\_\_\_

FOB: ☐

CARRIER NAME: CPU

Trailer number: \_\_\_\_\_

Seal number(s): \_\_\_\_\_

SCAC: \_\_\_\_\_

Pro number: \_\_\_\_\_

BAR CODE SPACE

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name: VERATEX INC.  
Address: P.O. BOX 682

City/State/Zip: NEW YORK, NY 10108-0682

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ 3<sup>rd</sup> Party ☒

☐  
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
ORDER#20294	11	3194	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	YARDS
PO#116			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
			<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	
			<input type="checkbox"/> Y <input type="checkbox"/> N	
GRAND TOTAL	11	3194		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
2	Pallets	11	Rolls	524		ROLLS OF CLOTH		
2		11		524				
GRAND TOTAL								

RECEIVING  
STAMP SPACE

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.

Signature \_\_\_\_\_

Shipper

## 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 U.S. DOT.

## Trailer Loaded:

- ☐ By Shipper  
☐ By Driver

## Freight Counted:

- ☐ 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.



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SHIPPER B/L LABEL