

Date: 01/15/2025		BILL OF LADING	
SHIP FROM		Bill of Lading Number : <u>232167692</u>	
Name: Veratex, Inc Address: 120 21st ST NW GPS ADDRESS 2 1930 1ST AVE NW City/State/Zip: HICKORY, NC 28601 Ph: 828-322-1145 Contact: Claude		Carrier Name: <u>AVERITT EXPRESS</u> SCAC: AVRT Pro number:	
SHIP TO		Freight Charge Terms: (freight charges are prepaid by Worldwide Express unless indicated otherwise)	
Name: Restorative Medical, Inc. Location# Address: 332 East Broadway City/State/Zip: BRANDENBURG, KY 40108 Ph: 610-524-1131 Contact: receiving			
FREIGHT CHARGES BILL TO		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bill Of Lading	
Name: Worldwide Express Address: 2323 Victory Avenue Ste 1600 City/State/Zip: Dallas, TX 75219		WWE Number: W311788893	
SPECIAL INSTRUCTIONS: For assistance, please Email detroitfreight@wwex.com Handling Instructions: case 11800493 Pickup Instructions: Delivery Instructions:			
REFERENCE NUMBER INFORMATION			
REFERENCE	# PKGS	REFERENCE	# PKGS
ZZ:PO# 5061			
PO:.			
			Total # of Pkgs 0
CARRIER INFORMATION			
HANDLING UNITS		PIECES	
QTY	TYPE	QTY	TYPE
1	PLT	7	ROL
1		7	
WEIGHT LBS		H.M. X	
427		427	
COMMODITY DESCRIPTION Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged to ensure safe transportation with ordinary care. See section 2(e) of NMFC Item 360			
rolls, 48(L) x 61(W) x 44(H) DO NOT STACK			
Grand Total			
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of 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: 3 rd Party WWE Remit Address:	
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B)		Acceptable Forms of Payment: Bank Certified Check <input type="checkbox"/> Company Check <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/>	
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and Worldwide Express Operations, LLC, a registered motor carrier broker, pursuant to 49 USC 14101(b) and all applicable state and federal regulations.		CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and /or carrier has DOT emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.	
SHIPPER'S 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.		Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallet said to contain <input type="checkbox"/> By Driver/Pieces
_____ (Signature) _____ (Date)		_____ (Signature) _____ (Date)	