

BILL OF LADING

BILL OF LADING #

190271

SHIP TO: FRANKLIN PRODUCTS INC.
150 HOLLAR ST.
HAW RIVER NC

27258

SHIP FROM:
VERATEX, INC.
40 INDUSTRIAL PKWY
SOMERVILLE, NJ 08876

FOR THE ACCOUNT OF:
VERATEX, INC.

DESCRIPTION: SYNTHETIC KNITTED PIECE GOODS

# OF PIECES	WORK ORDER#	CUSTOMER ORDER# COLOR	CARTON #	STYLE	WEIGHT
4	581768 ROLL(S)	20280 WHITE		4018/5-72	
TOTALS	4				159

of Pallets _____

of Stakkers

CARRIER: R. E. L.

DATE: 01/08/26
196904

ADDITIONAL INFORMATION:

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C - 14706©(1)(A) and (B).

RECEIVED, subject to individually determine 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.

CARRIER SIGNATURE/RECKLUP DATE

Carrier acknowledges receipt of packages and required placards

Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. *[Signature]* *[Signature]*

Subject to Section 7 of conditions of applicable bill of lading, if the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Michele Senator

good order except as noted.

Stevens 1/13 1skw

BILL OF LADING

BOL Number: 65729871

SHIP FROM

Name: Dodenhoff Industrial Textiles
 Address: 40 Industrial Pkwy,
 City/State/Zip: SOMERVILLE, NJ, 08876
 Claude P: 9087223549 Ext.
 Stop Notes:

SHIP TO

Name: Franklin Products
 Address: 150 Hollar St
 City/State/Zip: HAW RIVER, NC, 27258
 Kevin Hicks P: 319-409-1516 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
 Collect
 3rd Party

Carrier Acct #:
 Quote ID:

Special Instructions:

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: 1 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 storing must be so marked and packaged as to ensure safe transportation with ordinary care			
1	Pallets	0		159 lb			74x 44 x 16 Synthetic Piece Goods, IOP	049260-04	175	
1		0		159 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:

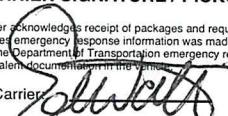
Freight Counted:

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: 11/3

1500