

**Bill to:**

COYOTE LOGISTICS , LLC
191 E.DEERPATH ROAD,
Lake Forest,
IL,
60045

Invoice Date: 12/13/2023

Invoice #: 30468816

Terms: NET 30

Due Date: 01/13/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/12/2023		5 TRUE TEMPER DR Carlisle, PA 17013 - 50 COMMERCE WAY Barrington, NH 03825			
			1	\$1,600.00	\$1,600.00

TOTAL
\$1,600.00

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS)
and all payments hereunder are to be directed to the assignee at the address noted below.

Remittances to other than CFS do not constitute payment of this invoice. CFS must be given
notification of any claims, agreements or merchandise returns which would affect the payment
of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC

P.O.BOX 205154

DALLAS, TX 75320-5154

Tel: 844-899-8092

Date: 2023-12-12

BILL OF LADING

Page 1 OF 2

SHIP FROM

Name: DHL / SC JOHNSON - CARLISLE
Address: 5 TRUE TEMPER DRIVE
City/State/Zip: CARLISLE, PA 17015
SID#: Call (262) 504-2051 for OS&D.

FOB: ☐

Bill of Lading Number: 00465008598152063

SHIP TO

Name: ASSOCIATED BUYERS INC Location #: _____
Address: 50 COMMERCE WAY
City/State/Zip: BARRINGTON, NH 03825
CID#: _____

FOB: ☐

CARRIER NAME: COYOTE LOGISTICS

Trailer number: W94928

Seal number(s): 9626819

SCAC: CLLQ

Pro number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: SC JOHNSON
Address: ATTN:TRANS/FREIGHT PAYMNT
City/State/Zip: PO BOX 1316
RACINE, WI 53401

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

Prepaid ☒ Collect _____ 3rd Party ☒☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS: PROTECT FROM FREEZING. FOR 24 HOUR EMERGENCY RESPONSE CALL 866-231-5406
SHIPMENT#: 0019491448 REQ ARV DTE: 2023-12-13

SPECIAL INSTRUCTIONS: For chemical emergency due to exposure or accident, contact CHEMTREC day or night. Within
USA/Canada 1-800-424-9300. Outside USA/Canada +1 703-527-3887. Please report any Overage, Shortage,
or Damage issues to the SC Johnson OS&D Call Center at 800.579.3124. Email Exel-US-OSD@DHL.com

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL	3,978	24,729 LB	849 CF		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION 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. <i>See Section 2(e) of NMFC Item 360</i>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
SEE ATTACHED SUPPLEMENT PAGE								
21	PL	3,978	CA	23,710 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 the transportation Contract or rate agreement in effect between Shipper and Contract Carrier (the word Contract Carrier being understood through this bill of lading as meaning the motor carrier, forwarder, broker or other intermediary that has obligated itself to transport the freight from origin to destination), on the date of issue of this bill of lading, the property described below in apparent good condition, except as noted. This bill is a receipt for goods; it is not in itself a contract of carriage. It is mutually agreed between Shipper and Contract Carrier as well as any person or company otherwise authorized to be in possession of the property during transportation that the services to be performed will be subject to all of the terms and conditions contained in the Transportation Contract or rate agreement, and no other document. The Contract Carrier agrees to this for itself and its subcontractors, agents and assigns. The weights are certified by the Shipper to be true and accurate.

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

SHIPPER SIGNATURE / DATE

12-12-23

Trailer Loaded: Freight Counted:

☒ By Shipper☒ By Shipper☐ By Driver☐ By Driver/pallets said to contain☐ By Driver/Pieces

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

Received by
[Signature]

CARRIER SIGNATURE / PICKUP DATE

Q232730772580
12-12-23 FL

Seal Intact

Initials

Arrival at Customer Date _____ Time _____

Departure at Customer Date _____ Time _____

Consignee Signature _____

SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 00465008598152063

CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	CUBE	PALLET/SLIP		ADDITIONAL SHIPPER INFO	
PO231000437	0100458810	3,978	24,759 LB	849 CF	Y		This is a Planned Load, follow Staging Sequence LTL pallets are stackable LTL carriers schedule delivery	
PAGE SUBTOTAL		3,978	24,759 LB	849 CF				
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 350</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
11	PL	1,989	CA	11,855 LB		SOAP, NOI, LIQUID CALDREA CONSUMER GOODS		00944
10	PL	1,989	CA	11,855 LB				02388
21	PL	3,978	CA	23,710 LB		PAGE SUBTOTAL		

Date: 2023-12-12

BILL OF LADING

Page 1 OF 2

SHIP FROM

Name: DHL / SC JOHNSON - CARLISLE
Address: 5 TRUE TEMPER DRIVE
City/State/Zip: CARLISLE, PA 17015
Call (262) 504-2051 for OS&D.
SID#:

FOB: ☐

Bill of Lading Number: 00465008598152063

SHIP TO

Name: ASSOCIATED BUYERS INC Location #: _____
Address: 50 COMMERCE WAY
City/State/Zip: BARRINGTON, NH 03825
CID#:

FOB: ☐

CARRIER NAME: COYOTE LOGISTICS

Trailer number: W94928

Seal number(s): 9626819

SCAC: CLLQ

Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: SC JOHNSON
Address: ATTN:TRANS/FREIGHT PAYMNT
PO BOX 1316
City/State/Zip: RACINE, WI 53401

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

Prepaid ☒ Collect _____ 3rd Party ☒☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

SHIPMENT#: 0019491448 REQ ARV DTE: 2023-12-13

SPECIAL INSTRUCTIONS: For chemical emergency due to exposure or accident, contact CHEMTREC day or night. Within
USA/Canada 1-800-424-9300. Outside USA/Canada +1 703-527-3887. Please report any Overage, Shortage,
or Damage issues to the SC Johnson OS&D Call Center at 800.579.3124. Email Exel-US-OSD@DHL.com

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL	3,978	24,759 LB	843 CF		

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
SEE ATTACHED SUPPLEMENT PAGE								
21	PL	3,978	CA	23,710 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 the transportation Contract or rate agreement in effect between Shipper and Contract Carrier (the word Contract Carrier being understood through this bill of lading as meaning the motor carrier, forwarder, broker or other intermediary that has obligated itself to transport the freight from origin to destination), on the date of issue of this bill of lading, the property described below in apparent good condition, except as noted. This bill is a receipt for goods; it is not in itself a contract of carriage. It is mutually agreed between Shipper and Contract Carrier as well as any person or company otherwise authorized to be in possession of the property during transportation that the services to be performed will be subject to all of the terms and conditions contained in the Transportation Contract or rate agreement, and no other document. The Contract Carrier agrees to this for itself and its subcontractors, agents and assigns. The weights are certified by the Shipper to be true and accurate.

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

SHIPPER SIGNATURE / DATE

Trailer Loaded: Freight Counted:

☒ By Shipper☒ By Shipper☐ By Driver☐ By Driver/pallets said to contain☐ By Driver/Pieces

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.
Property described above is received in good order except as noted.

CARRIER SIGNATURE / PICKUP DATE / CDL#

Seal Intact

Initials

Arrival at Customer Date _____ Time _____

Departure at Customer Date _____ Time _____

Consignee Signature _____

SHIP DATE: 12/12/23
P/U TIME: 16:00
WHS#/DESC: 01 DHL / SC JOHNSON - CARLISLE
PRI# / NAME: 465 SC JOHNSON - WHS 85
CSG# : 87985
NAME : ASSOCIATED BUYERS IN
50 COMMERCE WAY
BARRINGTON

DHL CARLISLE
ORD# 0100458810 SO# 00
CTL# 788420 BOL# 859815206
PO# P0231000437
TRL# W94928
STAGE: Shipper Load an DOOR: DR023
MOL: 151 COYOTE LOGISTICS
CAR#

PAGE 1
PACKING SLIP

ACTUAL	SHIP QTY	PKG	CFGT	PRODUCT CODE/DESC	PICK#	WEIGHT	UM
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	970	CA	STD	MMCD Hand Soap Rose 12.5FO/6US.	704031	5781.20000	LB
				UPC# : 1080812411401			
				CPC# : 808124114012			
				CMP/MFG/LOT/SUP : A009			25
				CMP/MFG/LOT/SUP : A030			25
				CMP/MFG/LOT/SUP : A044			25
				CMP/MFG/LOT/SUP : A030			25
				CMP/MFG/LOT/SUP : A044			25

	970	CA	STD	MMCD Hand Soap Daisy 12.5FO/6UN US	704031	5781.20000	LB
				UPC# : 1080812411432			
				CPC# : 808124114326			
				CMP/MFG/LOT/SUP : A046			25
				CMP/MFG/LOT/SUP : A312			1502

	1019	CA	STD	MMCD Hand Soap Lilac 12.5F1oz/6 US	704031	6073.24000	LB
				UPC# : 1080812470057			
				CPC# : 808124700574			
				CMP/MFG/LOT/SUP : A053			1502
				CMP/MFG/LOT/SUP : A081			1502
				CMP/MFG/LOT/SUP : A053			1502
				CMP/MFG/LOT/SUP : A291			1502
				CMP/MFG/LOT/SUP : A307			1502

	1019	CA	STD	MMCD Hand Soap Mint 12.5oz/6 US.	704031	6073.24000	LB
				UPC# : 1080812470348			
				CPC# : 808124703483			
				CMP/MFG/LOT/SUP : A065			25
				CMP/MFG/LOT/SUP : Z316			25
				CMP/MFG/LOT/SUP : A320			1502

ORD QTY: 3978.00000 ORD VOL: 835.38000 CF ORDER WGT: 23708.88000 LB

NOTES: This is a Planned Load, follow Staging Sequence
VERIFIED BY: _____ START: _____ FINISH: _____
ENTERED BY: _____ DRIVER NAME: _____
SEAL #: _____

PLTS RECEIVED: _____ PLTS REJECTED: _____ LICENSE & STATE: _____
DRIVER SIGNATURE: _____

Date: 2023-12-12

BILL OF LADING

Page 1 OF 2

SHIP FROM

Name: DHL / SC JOHNSON - CARLISLE
Address: 5 TRUE TEMPER DRIVE
City/State/Zip: CARLISLE, PA 17015
SID#: Call (262) 504-2051 for OS&D.

FOB: ☐

Bill of Lading Number: 00465008598152063

SHIP TO

Name: ASSOCIATED BUYERS INC Location #: _____
Address: 50 COMMERCE WAY
City/State/Zip: BARRINGTON, NH 03825
CID#: _____

FOB: ☐

CARRIER NAME: COYOTE LOGISTICS

Trailer number: W94928

Seal number(s): 9626819

SCAC: CLLQ

Pro number: _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: SC JOHNSON
Address: ATTN:TRANS/FREIGHT PAYMNT
City/State/Zip: PO BOX 1316
RACINE, WI 53401

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

Prepaid ☒ Collect _____ 3rd Party ☒☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS: PROTECT FROM FREEZING. FOR 24 HOUR EMERGENCY RESPONSE CALL 866-231-5406
SHIPMENT#: 0019491448 REQ ARV DTE: 2023-12-13

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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL	3,978	24,729 LB	849 CF		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION 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. <i>See Section 2(e) of NMFC Item 360</i>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
SEE ATTACHED SUPPLEMENT PAGE								
21	PL	3,978	CA	23,710 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:

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COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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SHIPPER SIGNATURE / DATE

12-12-23

Trailer Loaded: Freight Counted:

☒ By Shipper☒ By Shipper☐ By Driver☐ By Driver/pallets said to contain☐ By Driver/Pieces

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

Received by
Associates

CARRIER SIGNATURE / PICKUP DATE

Q232730772580
12-12-23 FL

Seal Intact

Initials

Arrival at Customer Date _____ Time _____

Departure at Customer Date _____ Time _____

Consignee Signature _____

SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 00465008598152063

CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	CUBE	PALLET/SLIP		ADDITIONAL SHIPPER INFO	
PO231000437 0100458810		3,978	24,759 LB	849 CF	Y		This is a Planned Load, follow Staging Sequence LTL pallets are stackable LTL carriers schedule delivery	
PAGE SUBTOTAL		3,978	24,759 LB	849 CF				
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 350</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
11	PL	1,989	CA	11,855 LB		SOAP, NOI, LIQUID CALDREA CONSUMER GOODS		00944
10	PL	1,989	CA	11,855 LB				02388
21	PL	3,978	CA	23,710 LB		PAGE SUBTOTAL		

Date: 2023-12-12

BILL OF LADING

Page 1 OF 2

SHIP FROM

Name: DHL / SC JOHNSON - CARLISLE
Address: 5 TRUE TEMPER DRIVE
City/State/Zip: CARLISLE, PA 17015
Call (262) 504-2051 for OS&D.
SID#:

FOB: ☐

Bill of Lading Number: 00465008598152063

SHIP TO

Name: ASSOCIATED BUYERS INC Location #: _____
Address: 50 COMMERCE WAY
City/State/Zip: BARRINGTON, NH 03825
CID#:

FOB: ☐

CARRIER NAME: COYOTE LOGISTICS

Trailer number: W94928

Seal number(s): 9626819

SCAC: CLLQ

Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: SC JOHNSON
Address: ATTN:TRANS/FREIGHT PAYMNT
PO BOX 1316
City/State/Zip: RACINE, WI 53401

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CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL	3,978	24,759 LB	843 CF		

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
SEE ATTACHED SUPPLEMENT PAGE								
21	PL	3,978	CA	23,710 LB	GRAND TOTAL			

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"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."

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Trailer Loaded: Freight Counted:

☒ By Shipper☒ By Shipper☐ By Driver☐ By Driver/pallets said to contain☐ By Driver/Pieces

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CARRIER SIGNATURE / PICKUP DATE / CDL#

Seal Intact

Initials

Arrival at Customer Date _____ Time _____

Departure at Customer Date _____ Time _____

Consignee Signature _____

SHIP DATE: 12/12/23
P/U TIME: 16:00
WHS#/DESC: 01 DHL / SC JOHNSON - CARLISLE
PRI#/NAME: 465 SC JOHNSON - WHS 85
CSG#: 87985
NAME: ASSOCIATED BUYERS IN
50 COMMERCE WAY
BARRINGTON

DHL CARLISLE
ORD# 0100458810 SO# 00
CTL# 788420 BOL# 859815206
PO# P0231000437
TRL# W94928
STAGE: Shipper Load an DOOR: DR023
MOL: 151 COYOTE LOGISTICS
CAR#

PAGE 1
PACKING SLIP

ACTUAL	SHIP QTY	PKG	CFGT	PRODUCT CODE/DESC	PICK#	WEIGHT	UM
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	970	CA	STD	MMCD Hand Soap Rose 12.5FO/6US.	704031	5781.20000	LB
				UPC#: 1080812411401			
				CPC#: 808124114012			

CMP/MFG/LOT/SUP: A009							25
CMP/MFG/LOT/SUP: A030							25
CMP/MFG/LOT/SUP: A044							25
CMP/MFG/LOT/SUP: A030							25
CMP/MFG/LOT/SUP: A044							25

	970	CA	STD	MMCD Hand Soap Daisy 12.5FO/6UN US	704031	5781.20000	LB
				UPC#: 1080812411432			
				CPC#: 808124114326			

CMP/MFG/LOT/SUP: A046							25
CMP/MFG/LOT/SUP: A312							25

	1019	CA	STD	MMCD Hand Soap Lilac 12.5F1oz/6 US	704031	6073.24000	LB
				UPC#: 1080812470057			
				CPC#: 808124700574			

CMP/MFG/LOT/SUP: A053							1502
CMP/MFG/LOT/SUP: A081							1502
CMP/MFG/LOT/SUP: A053							1502
CMP/MFG/LOT/SUP: A291							1502
CMP/MFG/LOT/SUP: A307							1502

	1019	CA	STD	MMCD Hand Soap Mint 12.5oz/6 US.	704031	6073.24000	LB
				UPC#: 1080812470348			
				CPC#: 808124703483			

CMP/MFG/LOT/SUP: A065							25
CMP/MFG/LOT/SUP: Z316							25
CMP/MFG/LOT/SUP: A320							1502

ORD QTY: 3978.00000 ORD VOL: 835.38000 CF ORDER WGT: 23708.88000 LB

NOTES: This is a Planned Load, follow Staging Sequence

VERIFIED BY: _____ START: _____ FINISH: _____

ENTERED BY: _____ DRIVER NAME: _____

SEAL #: _____

DRIVER SIGNATURE: _____

PLTS RECEIVED: _____ PLTS REJECTED: _____ LICENSE & STATE: _____

Date: 2023-12-12

BILL OF LADING

Page 1 OF 2

SHIP FROM

Name: DHL / SC JOHNSON - CARLISLE
Address: 5 TRUE TEMPER DRIVE
City/State/Zip: CARLISLE, PA 17015
Call (262) 504-2051 for OS&D.
SID#:

FOB: ☐

Bill of Lading Number: 00465008598152063

SHIP TO

Name: ASSOCIATED BUYERS INC Location #: _____
Address: 50 COMMERCE WAY
City/State/Zip: BARRINGTON, NH 03825
CID#:

FOB: ☐

CARRIER NAME: COYOTE LOGISTICS

Trailer number: W94928

Seal number(s): 9626819

SCAC: CLLQ

Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: SC JOHNSON
Address: ATTN:TRANS/FREIGHT PAYMNT
PO BOX 1316
City/State/Zip: RACINE, WI 53401

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

Prepaid ☒ Collect _____ 3rd Party ☒☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS: PROTECT FROM FREEZING. FOR 24 HOUR EMERGENCY RESPONSE CALL 866-231-5406
SHIPMENT#: 0019491448 REQ ARV DTE: 2023-12-13

SPECIAL INSTRUCTIONS: For chemical emergency due to exposure or accident, contact CHEMTREC day or night. Within
USA/Canada 1-800-424-9300. Outside USA/Canada +1 703-527-3887. Please report any Overage, Shortage,
or Damage issues to the SC Johnson OS&D Call Center at 800.579.3124. Email Exel-US-OSD@DHL.com

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
SEE ATTACHED SUPPLEMENT PAGE					
GRAND TOTAL	3,978	24,786 LB	849 CF		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION 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. <i>See Section 2(e) of NMFC Item 360</i>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
SEE ATTACHED SUPPLEMENT PAGE								
21	PL	3,978	CA	23,710 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 the transportation Contract or rate agreement in effect between Shipper and Contract Carrier (the word Contract Carrier being understood through this bill of lading as meaning the motor carrier, forwarder, broker or other intermediary that has obligated itself to transport the freight from origin to destination), on the date of issue of this bill of lading, the property described below in apparent good condition, except as noted. This bill is a receipt for goods; it is not in itself a contract of carriage. It is mutually agreed between Shipper and Contract Carrier as well as any person or company otherwise authorized to be in possession of the property during transportation that the services to be performed will be subject to all of the terms and conditions contained in the Transportation Contract or rate agreement, and no other document. The Contract Carrier agrees to this for itself and its subcontractors, agents and assigns. The weights are certified by the Shipper to be true and accurate.

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

SHIPPER SIGNATURE / DATE

Trailer Loaded:

Freight Counted:

☒ By Shipper ☒ By Shipper
☐ By Driver ☐ By Driver/pallets said to contain
☐ By Driver/Pieces

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

CARRIER SIGNATURE / PICKUP DATE

Seal Intact _____
Initials

Arrival at Customer Date _____ Time _____

Departure at Customer Date _____ Time _____

Consignee Signature Anne Stevens 12-13-23

SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 00465008598152063

CUSTOMER ORDER NUMBER		CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
# PKGS	WEIGHT	CUBE	PALLET/SLIP				
PO231000437 0100458810	3,978	24,759 LB	849 CF	Y			This is a Planned Load, follow Staging Sequence LTL pallets are stackable LTL carriers schedule delivery
PAGE SUBTOTAL		3,978	24,759 LB	849 CF			

CARRIER INFORMATION						COMMODITY DESCRIPTION		LTL ONLY	
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	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		NMFC#	CLASS
QTY	TYPE	QTY	TYPE						
11	PL	1,989	CA	11,855 LB		SOAP, NOI, LIQUID CALDREA CONSUMER GOODS			00944 02388
10	PL	1,989	CA	11,855 LB					
21	PL	3,978	CA	23,710 LB		PAGE SUBTOTAL			