

**Bill to:**

MAGELLAN TRANSPORT LOGISTICS  
2511 St Johns Bluff Road, Suite 107,  
Jacksonville,  
FL,  
32246

Invoice Date: 08/10/2024

Invoice #: 1440344

Terms: NET 30

Due Date: 09/10/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/08/2024		180 Kingsford Ln, Parsons, WV 26287, USA - 1245 US-202, Winthrop, ME 04364, USA			
			1	\$2,600.00	\$2,600.00

TOTAL
\$2,600.00

**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**



# MAGELLAN Transport Logistics

## Bill To Information

Please send invoices and backup  
information to:  
Email: [accounting@magellanlogistics.com](mailto:accounting@magellanlogistics.com)  
Fax: 866-728-9147

**Sent By:** Kyle Tucker

**Email** [ktucker@magellanlogistics.com](mailto:ktucker@magellanlogistics.com)

**Phone** (904) 580-3400

**Fax**

**Office** TX

## Rate/Route Confirmation for Zigi Freight, Inc. \$2,600.00

Shipment Details					
Shipment #	1440344			Carrier Miles	749.60
		Pallet Count	47	Temperature	-
Cust Ref/PO #		Eq Type	53' Van		
Todays Date	8/8/2024 13:21	Eq ID			
Description of Merch:	retail goods 2192.00 Cases @ 44022.00 Pounds				

Carrier Details			
Carrier	Zigi Freight, Inc.	Driver Name	Dayton   (727) 810-2369
MC	944686	Dispatch Phone	(630) 566-0616
DOT #	2828543	Fax	
SCAC		Carrier Ref	Sterling

Stop Details					
Stop Type	Pcs/Type/Wt	Address	Appt Date	Appt Time	PU/Deliv #
1 Pickup	2192 Cases 44022 lbs	KINGSFORD CO - PARSONS - PDC 180 KINGSFORD LN RR 219 PARSONS, WV, 26287	8/8/24	13:00 - 17:00	Driver MUST call Magellan for Dispatch
2 Delivery	Cases 0 Pallets 38463 lbs	DELHAIZE AMERICA DC01 S PTLD, ME 54 HEMCO RD SOUTH PORTLAND, ME, 04106	8/9/24	19:30	012531642
3 Delivery	Cases 0 Pallets 5559 lbs	DELHAIZE AMERICA 1245 US ROUTE 202 WINTHROP, ME, 04364	8/9/24	21:00	012531631

Shipment Line Items				
Pcs/Type	Pallets	Weight	STCC	Description
2192 Cases	47	44022 lbs		retail goods

Carrier Rate Agreement						
Item #	Charge Description	Unit Price	Unit Type	Unit Quantity	Rate	Note
1	Linehaul	\$2,300.00	Flat Rate	1	\$2,300.00	
2	GPS Load Tracking	\$300.00	Flat Rate	1	\$300.00	
Total:					\$2,600.00	

## Shipment Notes

Customer Note	<ul style="list-style-type: none"><li>- Shipper may load to legal weight</li><li>- The customer has the right to track this shipment via GPS transmitter or other similar technologies</li><li>- **If load is delivering to Costco, Target, Walmart, or Sam's Club, Amazon trailers will be rejected.</li><li>- Missed delivery appts are subject to a \$250 late fee. Missed delivery appts with Amazon, Costco, Walmart, Sam's Club, Kroger, Target, Dollar General are subject to \$500 late fee.</li><li>- Detention will be paid at \$25/hour after two free hours. Approved layovers are \$200/day.</li><li>- Tracking is mandatory throughout the entire shipment. Failure to maintain tracking may result in \$300 deduction from load</li></ul>
---------------	--

**Pick - KINGSFORD CO - PARSO** - DO NOT USE BACK ROADS/COUNTY ROADS IN AND OUT OF PARSONS YOU MUST USE 219 AND 72 SOUTH - THIS IS THE ONLY LEGAL WAY

## Terms of Agreement

1. Carrier shall be prohibited from using other motor carriers, brokers, or "substituted services" which includes but not limited to double brokering, rail, and partial unless approved by Magellan. Magellan will not compensate Carrier for shipments on which Carrier has utilized other motor carriers, brokers, or any substituted services for Shipper's Goods. Any broken/damaged seal, transload, or use of substitute service without prior approval from Magellan or Law Enforcement will result in 100% forfeiture of payment and a \$2,500 fine to the Carrier
2. GPS tracking is required via FourKites or Macropoint. Failure to accept and comply throughout shipment to delivery could result in a deduction of \$300. Load must track the entirety of the shipment with GPS. Drivers are required to keep the tracking app open at all times. Closing the application, low battery mode, and airplane mode all stop tracking. Must ensure mobile data and GPS/Location Services are switched on and set to Always Allow.
3. Carrier Agrees with the Above Rate Confirmation for Said Movement and Any Further Changes Must be Called and Documented With a New Rate Confirmation to Acknowledge Acceptance of Charges.
4. All drivers must call Magellan to Receive Pick Up #
5. Pick-up dates and hours will not require carrier to violate HOS regulations. Routing instructions, if any, are for informational purposes only.
6. Payment by Magellan Will Be Made Within 30 Days of Receipt of: Invoice with Magellan Load # and/or Customer Reference number on it,

Bill of Lading, Proof of Delivery, and Any Pre-Approved Accessorial Charges.

7. Missed pick-ups/deliveries are subject to late fees

8. All Lumper receipt's must be turned in within 2 business days of the shipment being delivered or risk possibility of not being reimbursed. POD must be turned in within 5 days of shipment delivery or a late fee of \$150 will be charged.

9. POD must be notated with in and out times notated to be eligible for detention

10. Damages or missing freight must be reported – any failure to do so can result in a deduction

11. All Drivers Must Check Call For Following Events: Arrival at Shipper, Loaded at Shipper, Daily Location Update by 9am, Arrival at Destination, Unloaded at Destination

**Zigi Freight, Inc.**

**6850 W 63RD STREET, CHICAGO, IL** (If this is not your information, notify dispatch immediately)

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Magellan Transport Logistics, Inc.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Zigi Freight, Inc.


**\*\*\*\*GET PAID NOW\*\*\*DON'T WAIT 30 DAYS\*\*\*\***

**MAGELLAN TRANSPORT LOGISTICS AND MAGELLAN TRANSPORT INC. WILL ISSUE QUICK PAY VIA COMCHECK IF FOLLOWING CRITERIA ARE MET: QUICK PAY IS REQUESTED UPON BOOKING; CARRIER HAS COMPLETED AND RETURNED RAPID PAY FORM; UPON DELIVERY, POD AND INVOICE SENT TO MAGELLAN; CARRIER HAS SUCCESSFULLY DELIVERED AND BEEN PAID ON 1 PREVIOUS LOAD; AND APPROVAL HAS BEEN RECEIVED FROM VERIFIED EMAIL. NO APPROVAL FROM VERIFIED EMAIL – NO COD COST IS 5% (MINIMUM \$20) OF INVOICE, EXCLUDING ACCESSORIALS; WE WILL ISSUE A COMCHECK AS SOON AS PAPERWORK IS VERIFIED; CALL BOOKING DISPATCHER TO SET UP PAYMENT UPON DELIVERY. APPROVAL WILL STILL BE DETERMINED ON A CASE-BY-CASE BASIS AT THE SOLE DISCRETION OF MAGELLAN.**

Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

<b>SHIP FROM</b>		<b>Bill of Lading Number:</b> 00446000963169347	
Name: THE CLOROX SALES CO Address: 180 KINGSFORD LN City/State/Zip: PARSONS, WV, 26287 SID #: 96316934		CARRIER NAME: MAGELLAN TRANSPORT LOGIS Trailer number: H03248 Seal number(s): 5801435	
<b>SHIP TO</b>		<b>SCAC: MGXB</b> Pro number: 1440344	
Location #: Name: HANNAFORD - SOUTH PORTLAND DC01 Address: 54 HEMCO RD City/State/Zip: SOUTH PORTLAND, ME, 04106 CID #: FOB: <input type="checkbox"/>			
<b>BILL TO:</b>		Freight Charge Terms: (Freight charges are prepaid unless marked otherwise)	
Name: Clorox Freight Payables Address 1: C/O TRANSPPLACE Address 2: PO BOX 425 City/State/Zip: LOWELL, AR 72745		Prepaid: <input checked="" type="checkbox"/> Collect: <input type="checkbox"/> 3rd. Party: <input type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	

## SPECIAL INSTRUCTIONS:

MABD: 08/09/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Stop 0001: 00446008880783875

Delivery Appointment: 08/09/2024; 19:30

CARRIER MUST CONFIRM APPOINTMENT WITH CU STOMER. \*MUST SHIP ON PALLETS!\* CFA IMMED  
207-883-2911 CHEP#105905 DEL ON TIME CUSTOMER WILL ACCEPT CHEP PALLETS

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLLP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091876	1,960	35,864	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>GRAND TOTAL</b>		1960	35864	

## 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
40	CH	1,960	CS	35,864 2,600		Charcoal Briquettes (Density > 1 Pallets)	42445SUB2 150390SUB4	70 70
40		1960		38464		<b>GRAND TOTAL</b>		

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(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 order and condition, except as noted. This bill is a receipt for goods; it is not itself a contract or 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.

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

Shipper Signature

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle

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

Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

## SHIP FROM

Name: THE CLOROX SALES CO  
Address: 180 KINGSFORD LN  
City/State/Zip: PARSONS, WV, 26287  
SID #: 96316934

FOB: ☒

Bill of Lading Number:  
00446000963169347

## SHIP TO

Location #:  
Name: HANNAFORD - SOUTH PORTLAND DC01  
Address: 54 HEMCO RD  
City/State/Zip: SOUTH PORTLAND, ME, 04106  
CID #:

FOB: ☐

CARRIER NAME: MAGELLAN TRANSPORT LOGIS

Trailer number: H03248

Seal number(s): 5801435

SCAC: MGXB  
Pro number: 1440344



## BILL TO:

Name: Clorox Freight Payables  
Address 1: C/O TRANSPLACE  
Address 2: PO BOX 425  
City/State/Zip: LOWELL, AR 72745

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

Prepaid: ☒ Collect: ☐ 3rd. Party: ☐

☐ Master Bill of Lading: with  
attached underlying Bills of  
Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/09/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time  
of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Stop 0001: 00446008880783875

Delivery Appointment: 08/09/2024; 19:30

CARRIER MUST CONFIRM APPOINTMENT WITH CU STOMER. \*MUST SHIP ON PALLETS!\* CFA IMMED  
207-883-2911 CHEP#105905 DEL ON TIME CUSTOMER WILL ACCEPT CHEP PALLETS

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091876	1,960	35,864	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
GRAND TOTAL	1960	35864		

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY TYPE	QTY TYPE				NMFC # CLASS
40 CH	1,960 CS	35,864 2,600		Charcoal Briquettes (Density > 1 Pallets)	42445SUB2 70 150390SUB4 70
40	1960	38464		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(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 order and condition, except as noted. This bill is a receipt for goods, it is not itself a contract or 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.

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

Shipper Signature \_\_\_\_\_

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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

Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

## SHIP FROM

Name: THE CLOROX SALES CO  
Address: 180 KINGSFORD LN  
City/State/Zip: PARSONS, WV, 26287  
SID #: 888078387

FOB: ☒

## SHIP TO

Location #:  
Name: HANNAFORD - WINTHROP DC03  
Address: 1245 US ROUTE 202  
City/State/Zip: WINTHROP, ME, 04364  
CID #:

FOB: ☐

Bill of Lading Number:  
00446008880783875

CARRIER NAME: MAGELLAN TRANSPORT LOGIS  
Trailer number: H03248  
Seal number(s): 5801435

SCAC: MGXB  
Pro number: 1440344



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

Prepaid: ☒ Collect: ☐ 3rd. Party: ☐

☒ Master Bill of Lading: with attached underlying Bills of Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/09/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending email to DET@Clorox.com

Underlying Bill of Lading number(s):

Stop 0001: 00446000963169347

Delivery Appointment: 08/09/2024; 19:30

Stop 0002: 00446000963169330

Delivery Appointment: 08/09/2024; 21:00

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091876 12091956	1,960 231	35,864 5,105	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
GRAND TOTAL	2191	40969		

## 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 See Section 2(e) of NMFC Item 360	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
47	CH	1,960 231	CS CS	35,864 5,105 3,055		Charcoal Briquettes (Density > 1 Charcoal lighter fluid (Pet Pallets	42445SUB2 155250 02 150390SUB4	70 65 70
47		2191		44024		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(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 order and condition, except as noted. This bill is a receipt for goods, it is not itself a contract or 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.

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

Shipper Signature

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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



Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

## SHIP FROM

Name: THE CLOROX SALES CO  
Address: 180 KINGSFORD LN  
City/State/Zip: PARSONS, WV, 26287  
SID #: 888078387

FOB: ☒

## SHIP TO

Location #:

Name: HANNAFORD - WINTHROP DC03  
Address: 1245 US ROUTE 202  
City/State/Zip: WINTHROP, ME, 04364  
CID #:

FOB: ☐

## BILL TO:

Name: Clorox Freight Payables  
Address 1: C/O TRANSPLACE  
Address 2: PO BOX 425  
City/State/Zip: LOWELL, AR 72745

Bill of Lading Number:  
00446008880783875

CARRIER NAME: MAGELLAN TRANSPORT LOGIS  
Trailer number: H03248  
Seal number(s): 5801435

SCAC: MGXB  
Pro number: 1440344



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

Prepaid: ☒ Collect: ☐ 3rd. Party: ☐

☒ Master Bill of Lading: with attached underlying Bills of Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/09/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending email to DET@Clorox.com

Underlying Bill of Lading number(s):

Stop 0001: 00446000963169347

Delivery Appointment: 08/09/2024; 19:30

Stop 0002: 00446000963169330

Delivery Appointment: 08/09/2024; 21:00

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091876	1,960	35,864	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
12091956	231	5,105	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
GRAND TOTAL		2191	40969	

## 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
47	CH	1,960	CS	35,864		Charcoal Briquettes (Density > 1	42445SUB2	70
		231	CS	5,105		Charcoal lighter fluid (Pet	155250 02	65
				3,055		Pallets	150390SUB4	70
47		2191		44024		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(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 order and condition, except as noted. This bill is a receipt for goods; it is not itself a contract or 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.

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

Shipper Signature

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle

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

Date: 08/08/2024

**BILL OF LADING**

Page 1 of 1

<b>SHIP FROM</b>		<b>Bill of Lading Number:</b> 00446000963169330	
Name: THE CLOROX SALES CO Address: 180 KINGSFORD LN City/State/Zip: PARSONS, WV, 26287 SID #: 96316933		CARRIER NAME: MAGELLAN TRANSPORT LOGIS Trailer number: H03248 Seal number(s): 5801435	
<b>SHIP TO</b>		<b>SCAC: MGXB</b> <b>Pro number: 1440344</b>	
Location #: Name: HANNAFORD - WINTHROP DC03 Address: 1245 US ROUTE 202 City/State/Zip: WINTHROP, ME, 04364 CID #:			
<b>BILL TO:</b>		Freight Charge Terms: (Freight charges are prepaid unless marked otherwise)	
Name: Clorox Freight Payables Address 1: C/O TRANSPLACE Address 2: PO BOX 425 City/State/Zip: LOWELL, AR 72745		Prepaid: <input checked="" type="checkbox"/> Collect: <input type="checkbox"/> 3rd. Party: <input type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	

**SPECIAL INSTRUCTIONS:**

MABD: 08/13/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Stop 0002: 00446008880783875

Delivery Appointment: 08/09/2024; 21:00

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091956	231	5,105	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>GRAND TOTAL</b>	<b>231</b>	<b>5105</b>		

**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
7	CH	231	CS	5,105 455		Charcoal lighter fluid (Pet Pallets)	155250 02 150390SUB4	65 70
<b>7</b>		<b>231</b>		<b>5560</b>		<b>GRAND TOTAL</b>		

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(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 order and condition, except as noted. This bill is a receipt for goods, it is not itself a contract or 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.

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

Shipper Signature \_\_\_\_\_

**SHIPPER SIGNATURE/DATE**

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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



Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

## SHIP FROM

Name: THE CLOROX SALES CO  
Address: 180 KINGSFORD LN  
City/State/Zip: PARSONS, WV, 26287  
SID #: 96316933

FOB: ☒

## SHIP TO

Location #:

Name: HANNAFORD - WINTHROP DC03  
Address: 1245 US ROUTE 202  
City/State/Zip: WINTHROP, ME, 04364  
CID #:

FOB: ☐

## BILL TO:

Name: Clorox Freight Payables  
Address 1: C/O TRANSPLACE  
Address 2: PO BOX 425  
City/State/Zip: LOWELL, AR 72745

Bill of Lading Number:  
00446000963169330

CARRIER NAME: MAGELLAN TRANSPORT LOGIS  
Trailer number: H03248  
Seal number(s): 5801435

SCAC: MGXB  
Pro number: 1440344



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

Prepaid: ☒ Collect: ☐ 3rd. Party: ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/13/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Stop 0002: 00446008880783875

Delivery Appointment: 08/09/2024; 21:00

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	Destination	PO Type	Department #
12091956	231	5,105	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
GRAND TOTAL	231	5105				

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			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
7	CH	231	CS	5,105 455		Charcoal lighter fluid (Pet Pallets)	155250 02 150390SUB4	65 70
7		231		5560		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(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 order and condition, except as noted. This bill is a receipt for goods, it is not itself a contract or 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.

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

Shipper Signature

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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

# Capstone Logistics

30 TECHNOLOGY PKWY SOUTH SUITE 200  
PEACHTREE CORNERS, GA 30092  
770-414-1929  
FED ID# 45-3087555

20:11:25 August 09, 2024

Receipt #: 161bf46b-6af3-  
4ff5-9676-e91d41891bdc

Location: ADUSA DC1 SOUTH  
PORTLAND ME

Work Date: 2024-08-09

Bill Code: 120RCOD

Carrier: ROYAL 3

Dock: GROCERY 1

Door: 8

Purchase Orders Vendor  
H-12091876 KINGSFORD CO

Total Initial Pallets: 40.00

Total Finished Pallets: 70

Total Case Count: 1960

Trailer Number: 1

Tractor Number:

BOL:

Comments:

Canned Comments:

Unloaders: 2

Base Charge: 240.00

Convenience Fee: 10.00

Total Cost: 250.00

Payments: Amount

Relay- \$250.00  
6AXNK6

Total Payments \$250.00

# Capstone Logistics

30 TECHNOLOGY PKWY SOUTH SUITE 200  
PEACHTREE CORNERS, GA 30092  
770-414-1929  
FED ID# 45-3087555

00:24:54 August 10, 2024

Receipt #:	3aeb0b30-8c07- 4852-b193-aef973e8366e
Location:	ADUSA DC3 WINTHROP ME
Work Date:	2024-08-09
Bill Code:	121RCOD
Carrier:	ROYAL 3 INC
Dock:	GEN MERCH
Door:	4
Purchase Orders	Vendor
H-12091956	KINGSFORD CO
Total Initial Pallets:	7.00
Total Finished Pallets:	7
Total Case Count:	231
Trailer Number:	H03248
Tractor Number:	
BOL:	
Comments:	
Canned Comments:	
Unloaders:	6
Base Charge:	90.00
Convenience Fee:	10.00
Total Cost:	100.00
Payments:	Amount
Relay- 34MYC6	\$100.00
Total Payments	\$100.00

Date: 08/08/2024		BILL OF LADING		Page 1 of 1	
<b>Name:</b> THE CLOROX SALES CO <b>Address:</b> 180 KINGSFORD LN <b>City/State/Zip:</b> PARSONS, WV, 26287 <b>SID #:</b> 96316934			<b>Bill of Lading Number:</b> 00446000963169347		
<b>Location #:</b> <b>Name:</b> HANNAFORD - SOUTH PORTLAND DC01 <b>Address:</b> 54 HEMCO RD <b>City/State/Zip:</b> SOUTH PORTLAND, ME, 04106 <b>CID #:</b>			<b>CARRIER NAME:</b> MAGELLAN TRANSPORT LOGIS <b>Trailer number:</b> H03248 <b>Seal number(s):</b> 5801435		
<b>Name:</b> Clorox Freight Payables <b>Address 1:</b> C/O TRANSPPLACE <b>Address 2:</b> PO BOX 425 <b>City/State/Zip:</b> LOWELL, AR 72745			<b>SCAC:</b> MGXB <b>Pro number:</b> 1440344 <div style="border: 1px solid black; width: 100px; height: 15px; margin-top: 5px;"></div>		
<b>SPECIAL INSTRUCTIONS:</b> MABD: 08/09/2024 RAD: 08/09/2024 Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com Master Bill of Lading number: Stop 0001: 00446008880783875 Delivery Appointment: 08/09/2024; 19:30 CARRIER MUST CONFIRM APPOINTMENT WITH CU STOMER. *MUST SHIP ON PALLETS! 207-883-2911 CHEP#105905 DEL ON TIME CUSTOMER WILL ACCEPT CHEP PALLETS			<b>Freight Charge Terms:</b> (Freight charges are prepaid unless marked otherwise) <b>Prepaid:</b> <input checked="" type="checkbox"/> <b>Collect:</b> <input type="checkbox"/> <b>3rd. Party:</b> <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading		
REC'D BY <u>KM</u> DATE REC'D <u>8-9-24</u> TOTAL QTY REC'D <u>1960</u> OVER <input type="checkbox"/> SHORT <input type="checkbox"/> REFUSED <input type="checkbox"/> CHILD POB <input type="checkbox"/> CPA IMMED					
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALL/SLIP	
12091876		1,960	35,864	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
GRAND TOTAL		1960	35864		
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)
QTY	TYPE	QTY	TYPE		
40	CH	1,960	CS	35,864 2,600	
GRAND TOTAL		40	1960	38464	
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 (See Section 2(e) of NMFC Item 346)					
Charcoal Briquettes (Density > 1 Pallets)				LTL ONLY	
				NMFC #	CLASS
				42445SUB2	70
				150390SUB4	70
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 _____				<b>COD Amount:</b> \$ _____ <b>Fee Terms:</b> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> <b>Customer check acceptable:</b> <input type="checkbox"/>	
NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(1) (A) and (B)					
<b>RECEIVED:</b> 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 Bill of Lading, the property described below at apparent good order and condition, except as noted. This bill is a receipt for 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 certified by the Shipper to be true and accurate. The weights are _____					
<b>SHIPPER SIGNATURE/DATE</b> This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT		<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain <input type="checkbox"/> By Driver/Pieces	
<b>CARRIER SIGNATURE/PICKUP DATE</b> 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.					

Date: 08/08/2024

## BILL OF LADING

Page 1 of 1

**SHIP FROM**  
**Name:** THE CLOROX SALES CO  
**Address:** 180 KINGSFORD LN  
**City/State/Zip:** PARSONS, WV, 26287  
**SID #:** 96316933

FOB: ☒

**SHIP TO**  
**Location #:**  
**Name:** HANNAFORD - WINTHROP DC03  
**Address:** 1245 US ROUTE 202  
**City/State/Zip:** WINTHROP, ME, 04364  
**CID #:**

FOB: ☐

**SHIP TO:**  
**Name:** Clorox Freight Payables  
**Address 1:** C/O TRANSPPLACE  
**Address 2:** PO BOX 425  
**City/State/Zip:** LOWELL, AR 72745

**Bill of Lading Number:**  
 00446000963169330

**CARRIER NAME:** MAGELLAN TRANSPORT LOGIS  
**Trailer number:** H03248  
**Seal number(s):** 5801435

**SCAC:** MGXB  
**Pro number:** 1440344

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

**Prepaid:** ☒ **Collect:** ☐ **3rd. Party:** ☐

☐ **Master Bill of Lading:** with attached underlying Bills of Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/13/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Stop 0002: 00446008880783875

Delivery Appointment: 08/09/2024, 21:00

ADUSA DC#	03
RECVD BY	K. Lenny
DATE RECVD	8-9-24
TOTAL QTY RECVD	231
OVER	SHORT
REFUSED	CHILD POW

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091956	231	5,105	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>GRAND TOTAL</b>	<b>231</b>	<b>5105</b>		

## 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 See Section 2(e) of NMFC Item 360	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	CH	231	CS	5,105 455		Charcoal lighter fluid (Pet Pallets)	15525Q 02 150390SUB4	65 70
7		231		5560		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(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 order and condition, except as noted. This bill is a receipt for goods, it is not itself a contract or 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.

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

Shipper Signature

## SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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



Date: 08/08/2024

Page 1 of 1

## BILL OF LADING

Name: THE CLOROX SALES CO  
Address: 180 WINDSOR LN  
City/State/Zip: FARGO, ND, 58103  
C/O: 00110911

Bill of Lading Number:  
00446000963169347

CARRIER NAME: MAGELLAN TRANSPORT LOGIS  
Trailer Number: 803248  
Seal Number(s): 5801475

Name: HANNAFORD - SOUTH PORTLAND OC01  
Address: 54 HEMCO RD  
City/State/Zip: SOUTH PORTLAND, ME, 04106  
C/O: 1

SCAC: MGXB  
Pro number: 1440344

NAME: Clorox Freight Payables  
Address 1: C/O TRANSPLACE  
Address 2: PO BOX 425  
City/State/Zip: LOWELL, AR 72745

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

Prepaid: ☒ Collect: ☐ 3rd. Party: ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading

## SPECIAL INSTRUCTIONS:

MABD: 08/09/2024

RAD: 08/09/2024

Carrier must report any over, short, damaged or refused product at time of delivery by sending an email to DET@Clorox.com

Master Bill of Lading number:

Ship ID: 0044600880783875

Delivery Appointment: 08/09/2024: 19:30

CARRIER MUST CONFIRM APPOINTMENT WITH CUSTOMER. \*MUST SHIP ON PALLETS! \*MUST SHIP ON PALLETS! \*MUST SHIP ON PALLETS!

RECEIVED BY: KMDATE RECEIVED: 8-9-24TOTAL QTY RECEIVED: 1960OVER: ☐ SHORT: ☐REFUSED: ☐ CHL/POL: ☐ CPA IMMED: ☐

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALL/SPLIP	ADDITIONAL SHIPPER INFO Destination PO Type Department #
12091876	1,960	35,864	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

GRAND TOTAL 1960 35864

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY TYPE	QTY TYPE				NMFC # CLASS
40 CH	1,960 CS	35,864 2,600		Charcoal Briquettes (Density > 1 Pallets)	42445SUB2 70 150390SUB2 70
40	1960	38464		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

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(b)(2) (A) and (B). The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

RECEIVED: Subject to the Transportation Contract or rate agreement in effect between Shipper and Contract Carrier (the "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 order and condition, except as noted. This bill is a receipt for the property and is not itself a contract or 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 service to be performed will be subject to all of the terms and conditions contained in the Transportation Contract or rate agreement, and no other documents. The Contract Carrier agrees to this for itself and its subcontractors, agents and assigns. The weight is certified by the shipper to be true and accurate.

Shipper Signature

SHIPPER SIGNATURE/DATE  
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the DOT.

Trailer Loaded:  
☐ By Shipper  
☐ By Driver

Freight Counted:  
☐ By Shipper  
☐ By Driver/Pallets  
☐ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE  
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available under carrier's DOT emergency response guidebook or equivalent documentation in the vehicle.  
Property described above is received in good order, except as noted.