

## LOAD CONFIRMATION - VAN

All pages of this truckload rate agreement made and entered into on this day, between Broker ULTRA LOGISTICS INC and the Carrier is subject to the terms and conditions of Broker-Carrier Agreement previously signed between the Broker and Carrier or reinstates the terms and conditions of a prior agreement between the parties that may have expired.

### **IMPORTANT INFORMATION ABOUT THE LOAD YOU BOOKED WITH ULTRA LOGISTICS**

1. Pickup must be made on agreed date & time shown in the "order" section. If you can't provide the agreed service contact Ultra by phone immediately to reschedule or cancel.
2. Delivery date & time, shown in the "order" section must be maintained, within legal hours of service, once the load is in your possession.
3. The equipment used must meet all of the USDOT Regulations. Carrier/driver states they have a satisfactory safety rating from all Federal, State and Local Regulator Agencies.
4. An Ultra Logistics Rep. must be contacted by phone and notified in advance of any delays that affect making an on time delivery.
5. Missed or unreported deliveries are subject to a 15% reduction, no less than \$150, to the agreed upon rate shown in the "order" section.
6. Late fees incurred due to driver inefficiency can be deducted from the rate shown in the "order" section.
7. CO-Brokering or Intermodal transport is not allowed and will forfeit payment.
8. Any OS&D (overage, shortage or damage) must be reported to Ultra Logistics at the time of occurrence.
9. Loads signed SL&C must be sealed, noted by the shipper & delivered with the (unbroken) "Seal Intact".
10. Original PODS must be sent in with your Invoice and any accessorial receipts and any detention/Layover approval forms.
11. Carrier agrees to load tracking if required via FOUR KITES, MACRO POINT or other. Failure to maintain during transit results in a \$150 fine and forfeits your ability to request detention.
12. Counting Freight Policy: Ultra must be notified prior to loading if a load count is required. Once signed for by the driver your company is liable for any shortages.

### **ACCESSORIAL INFORMATION AND REQUEST REQUIREMENTS**

**Detention** – Begins 4 hours from the scheduled appointment time at \$35/HR (max 9 hrs)

**TO QUALIFY FOR DETENTION ALL OF THE FOLLOWING REQUIREMENTS MUST BE MET:**

- THE CARRIER/DRIVER MUST NOTIFY ULTRA LOGISTICS BY PHONE:
  - UPON ARRIVAL TO THE FACILITY
  - AT THE START OF BEING DETAINED (AFTER GRACE PERIOD)
  - AT THE END OF THE DETENTION TIME (TO PROVIDE ACCURATE IN & OUT TIMES)
  - BOL MUST BE SUBMITTED LESS THAN 24 HRS FROM FINAL OUT TIME
- Carrier must have been dispatched by Ultra Logistics
- Carrier must be on time for the appointment on the load confirmation
- The power unit and driver have stayed with the load while detained
- The carrier must provide a BOL/POD with clearly signed or stamped IN & OUT times provided by the facility

*ULTRA VERIFIES ALL TIMES WITH THE FACILITY PRIOR TO APPROVAL \**

*DISCREPANCIES WITH (IN & OUT) TIMES RESULT IN THE DENIAL OF THE REQUEST*

*Exception 1: Detention will not be paid at first come first serve (FCFS) facilities*

*Exception 2: A Maximum of \$100 will be paid when the carrier is a Work In*

*\*Submitting a request does not guarantee approval. All Requests are subject to verification prior to a decision being reached*

**Layover** - \$150 per day when the following requirements are met:

- The carrier must have been dispatched by Ultra Logistics
- The carrier must not be the cause of the Layover
- The carrier must provide a BOL/POD w/ clear stamped IN & OUT times

**TONU** - \$150 is paid for a Truck Order Not Used:

- A TONU is only paid when the driver had been dispatched by Ultra Logistics

*Exception 1: If the carrier was not dispatched by Ultra Logistics (Regardless of any information provided prior to being officially dispatched.)*

*Exception 2: If the carrier equipment is rejected by the shipper.*

**Unloading/Lumper fees** - must be pre-approved by Ultra Logistics:

**\* A \$15 admin fee will be deducted from your invoice for each lumper comcheck issued**

- Lumper Receipts must be submitted within 24 hours of the delivery for reimbursement
- Submit a clear copy or picture to dispatch@ultralogistics.com
- Failure to provide a receipt within 24 hours will result in non reimbursement or reduction in carrier pay

YOUR DRIVER MUST BE DISPATCHED BY ULTRA CALL 888-220-4640 (press 1 for dispatch)

DRIVER MUST CALL IN by 11am DAILY (Including Saturday & Sunday)

Our Dispatch Department is available 24 hrs a day 7 days a week

By signing this agreement you are acknowledging that any & all drivers assigned to this load have the hours available to legally make on time delivery as specified herein

Ultra Logistics  
17-17 Route 208 North  
Fair Lawn, NJ 07410  
(888) 220-4640 (888) 795-6642



Page 1

0720851

**Carrier:** ROYAL 3 INC  
CHICAGO IL 60638  
**Date:** 08/27/2024

**Contact:** Jason  
**Phone:** (630) 485-7370 x110  
**Fax:**

**Order** **Order:** 0720851  
**Temp:**

**Commodity:** Costumes  
**Weight:** 13630.0  
**Trailer:** Van (DAT)

**PU 1** **Address:**  
SUMNER WA 98390

**Date:** 08/30/2024 1330

**Appt Type / Requires:** SET/ Driver NO TOUCH

**SO 2** **Address:**  
GROVE CITY OH 43123

**Date:** 09/04/2024 0500

**Appt Type / Requires:** SET/ Driver NO TOUCH

<b>Payment</b>	<b>Carrier Freight Pay:</b>	\$3,842.00
	<b>Total Carrier Pay:</b>	\$3,842.00



**Attention:** Daniel Cohen  
(888) 220-4640

**Carrier Instructions and Requirements: This form must be completed and returned before driver can be Dispatched.**

FUN WORLD EASTER UNL - WEDIBY: \*\*\*\*IMPORTANT: Our Customer requires Ultra logistics to provide accurate IN and Out within 30 minutes of your arrival and departure at all stops! \*\*\*\*A Driver's failure to contact Ultra logistics by phone within 15 minutes of arriving and departing each stop (pickup & delivery) may result in a \$150 deduction from your payment or disqualify any detention payments.

FUN WORLD EASTER UNL - WEDIBY: BE ADVISED! This Customer will not allow a trailer with a competitor name on the side. For example Amazon trailers will not be allowed into the facility. Any costs caused by a failure to comply with this rule are the carriers responsibility.

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Please Sign: *Jason corkovic*

Driver Name:AMARI

Driver Cell: (954) 673-2928

Driver Email: any@royal3inc.com

Tractor #: 748

Trailer #: W94934

(X) Accept

( ) Decline

Attention: Daniel Cohen  
(888) 220-4640





## INVOICE

**BILL TO:**  
ULTRA LOGISTICS INC  
17-17 ROUTE 208  
FAIR LAWN, NJ 07410

**INVOICE DATE:** 09/10/2024  
**INVOICE #:** 0720851  
**TERMS:** NET 30  
**DUE DATE:** 10/10/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/30/2024		Sumner, WA 98390 - Grove City, OH 43123			
		Freight Income	1	\$3,842.00	\$3,842.00

<b>TOTAL</b>
\$3,842.00

**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**

# Trailer Control Record

DC#: 6024

TCR: 597d7558-a1a8-49dd-b4e0-b6d8ee4e2fad

Trailer Number	Carrier	Delivery Number	Appointment Time	Arrival Date
94934	ULTL	28306463	09/04/2024 05:00	09/04/2024 04:40:22

## Arrival Information

Inbound Seal #: 62040164

Sealed at Gate: N

Intact: Y

AP Associate: m0t0dgd

Current Seal #: 62040164

Load ID#: 35351874

Comments:

## Delivery

Cases: GEN 2203

Total: 2203

## Receiving Dock

Door #: 142

Assigned by: IOIOfp6

Closed by: IOIOfp6

Unloader: IOIOfp6

Unload Start Time: 09/04/2024 05:26:43

Unload End Time: 09/04/2024 07:37:57

Driver Arrival at Window: 09/04/2024 04:58

Paperwork Available at Window: 09/04/2024 08:10

## Receiving Office

Drop: N

Driver Unload:

Commodity: DIST

Tractor #: 834

## Return/Transfer

Trailer Empty: N

Return Contents:

Description:

Reason:

## Seal Information

Seal Number: 62040164

Sealed By: m0t0dgd

## Receiving Office

Trailer Resealed By: m0t0dgd

## Outbound Information

AP Associate:

D/T:

Outbound Seal #:

## Door Change Log

Timestamp

Event

User

09/04/2024 04:59:48

Move completed to door 6024 - 142

dpawki

Date: 8/30/2024

## BILL OF LADING

Page 1

## SHIP FROM

Name: EASTER UNLIMITED, INC.  
Address: 1701 140TH AVE EAST  
City/State/Zip: SUMNER, WA, 98390  
SID#:

FOB: ☐

## SHIP TO

Name: WAL-MART DC 6024G-GENERAL  
Address: 3880 SOUTHWEST BLVD  
City/State/Zip: GROVE CITY, OH, 43123  
CID#: 35351874

Location: \_\_\_\_\_

FOB: ☐

## THIRD PARTY FREIGHT CHARGES BILL TO

Name:  
Address:

City/State/Zip:

SPECIAL INSTRUCTIONS: Call for Delivery Appointment: (614) 871-2333

Bill of Lading Number: FW0469438 C



0469438 C

Carrier name: ULTRA LOGISTICS

LOAD NUMBER: 35351874

Trailer Number: 62040164

Seal Number(s): 62040164

SCAC: ULTL

Pro Number:

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

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
6180045943	32	58 LBS	9	Y N	
6180045944	373	1594 LBS	279	Y N	
6180045947	1798	10759 LBS	1703	Y N	
				Y N	
				Y N	
				Y N	
GRAND TOTAL	2203	12412 LBS	1992		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
	PLTS	388	CTNS	1780 LBS		Toys 4 but < 6 PCF	084260 04	150.0
	PLTS	140	CTNS	678 LBS		Toys 6 but < 8 PCF	084260 05	125.0
	PLTS	32	CTNS	58 LBS		Toilet Preparations	059420 02	85.0
	PLTS	1643	CTNS	9895 LBS		Clothing, NOI	049880 06	100.0
	PLTS			1260 LBS		SKIDS @ 45 LBS		
28		2203		13673 LBS		GRAND TOTAL		

Where this 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 not be exceeding \_\_\_\_\_ per \_\_\_\_\_

COD: \_\_\_\_\_

## NOTE Liability limitation for loss or damage in this shipment may be applicable

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and the 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.

Equip ID 94934

Status AP

Equip Arrival 09/04/24 04:40

Temp1

Carrier ULTL

Temp2

Seal 62040164

Temp3

Reseal

Fuel Lvl

Door/Zone Sub1 142

Dept DIST

Del Date 09/04/24 05:00

Type 53

SHIPPER SIGNATURE/DATE

This is to certify that the above enumerated 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:

Freight Counted:

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

Driver Signature

TIME IN:



Delivery# 28206462

pg 6024



Date: 8/30/2024

## BILL OF LADING

Page 1

## SHIP FROM

Name: EASTER UNLIMITED, INC.  
Address: 1701 140TH AVE EAST  
City/State/Zip: SUMNER, WA, 98390  
SID#: \_\_\_\_\_

FOB: ☐

Bill of Lading Number: FW0968831



0968831

## SHIP TO

Name: WAL-MART DC 6024G-GENERAL  
Address: 3880 SOUTHWEST BLVD  
City/State/Zip: GROVE CITY, OH, 43123  
CID#: 35351874

Location: \_\_\_\_\_

FOB: ☐

Carrier name: ULTRA LOGISTICS

LOAD NUMBER: 35351874

Trailer Number: DC 6024

Seal Number(s): POF 4186045947

SCAC: ULTRA

Pro Number: \_\_\_\_\_

DATE: 9/4/24  
FREIGHT BILL RECEIVED IN FULL  
TRLR# 04934  
TOT CS REC 1312  
TOT PLTS 0  
TOTAL CASES REJECTED R  
REASON

## THIRD PARTY FREIGHT CHARGES BILL TO

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

SPECIAL INSTRUCTIONS: Call for Delivery Appointment: (614) 871-2333

Freight Charge Terms: (Freight terms to be specified on bill of lading)  
REC'D BY: [Signature]  
Prepaid: \_\_\_\_\_  
DRY WEIGHT UNLOAD: 34 Pcs N

☒ (check box)Master Bill of Lading with attached  
underlying Bills of Lading

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
6180045947	1798	10772 LBS	1703	Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
GRAND TOTAL	1798	10772 LBS	1703			

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
	PLTS	388	CTNS	1782 LBS		Toys 4 but < 6 PCF	084260 04	150.0
	PLTS	140	CTNS	679 LBS		Toys 6 but < 8 PCF	084260 05	125.0
	PLTS	1270	CTNS	8310 LBS		Clothing, NOI	049880 06	100.0
	PLTS			1035 LBS		SKIDS @ 45 LBS		
23		1798		11807 LBS		GRAND TOTAL		

Where this 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 not be 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 the 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, 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 had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

TIME IN:

TIME OUT:

Date: 8/30/2024

## BILL OF LADING

Page 1

## SHIP FROM

Name: EASTER UNLIMITED, INC.  
 Address: 1701 140TH AVE EAST  
 City/State/Zip: SUMNER, WA, 98390  
 SID#:

FOB: ☐

## SHIP TO

Name: WAL-MART DC 6024G-GENERAL  
 Address: 3880 SOUTHWEST BLVD  
 City/State/Zip: GROVE CITY, OH, 43123  
 CID#: 35351874

Location: \_\_\_\_\_

FOB: ☐

## THIRD PARTY FREIGHT CHARGES BILL TO

Name:  
 Address:

City/State/Zip: \_\_\_\_\_

SPECIAL INSTRUCTIONS: Call for Delivery Appointment: (614) 871-2333

Bill of Lading Number: FW0968827



0968827

Carrier name: ULTRA LOGISTICS

LOAD NUMBER: 05051874

Trailer Number: DC 6024

Seal Number(s): 4180045943

SCAC: ULTL

Pro Number: \_\_\_\_\_

FREIGHT BILL RECEIVED IN FULL ☐

TRLR# 94934 O

TOT CS REC 332

TOT PLTS D

TOTAL CASES REJECTED R

REASON

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

REC'D BY: [Signature]

Prepaid: DRV HELPED UNACAD: Y 3rd Party

☒ (check box)

Master Bill of Lading with attached underlying Bills of Lading

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
6180045943	32	13627 LBS	9	Y N	
				Y N	
				Y N	
				Y N	
				Y N	
				Y N	
GRAND TOTAL	32	13627 LBS	9		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
	PLTS	32	CTNS	13627 LBS		Toilet Preparations	059420 02	85.0
	PLTS			45 LBS		SKIDS @ 45 LBS		
1		32		13673 LBS		GRAND TOTAL		

Where this 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 not be 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 the 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, 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 had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

TIME IN:

TIME OUT:



Date: 8/30/2024

## BILL OF LADING

Page 1

## SHIP FROM

Name: EASTER UNLIMITED, INC.  
Address: 1701 140TH AVE EAST  
City/State/Zip: SUMNER, WA, 98390  
SID#: \_\_\_\_\_

FOB: ☐

## SHIP TO

Name: WAL-MART DC 6024G-GENERAL  
Address: 3880 SOUTHWEST BLVD  
City/State/Zip: GROVE CITY, OH, 43123  
CID#: 35351874

Location: \_\_\_\_\_

FOB: ☐

## THIRD PARTY FREIGHT CHARGES BILL TO

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

SPECIAL INSTRUCTIONS: Call for Delivery Appointment: (614) 871-2333

Bill of Lading Number: FW0968828



0968828

Carrier name: ULTRA LOGISTICS

LOAD NUMBER: 35351874

Trailer Number: \_\_\_\_\_

Seal Number(s): \_\_\_\_\_

SCAC: ULTL

Pro Number: \_\_\_\_\_

FREIGHT BILL RECEIVED IN FULL ☐

TRLR# 94931 0

TOT CS REC 33 \$320

TOT PLTS 0

TOTAL CASES REJECTED R

Freight Charge Terms: (Freight terms apply unless marked otherwise)

Prepaid: \_\_\_\_\_

☒ (check box)

REASON: \_\_\_\_\_

REC'D: \_\_\_\_\_

DRV HELPED UNLOAD: Y N

Master Bill of Lading, with attached underlying Bills of Lading

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
6180045944	373	1596 LBS	279	Y N	
				Y N	
				Y N	
				Y N	
				Y N	
				Y N	
				Y N	
GRAND TOTAL	373	1596 LBS	279		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
	PLTS	373	CTNS	1596 LBS		Clothing, NOI	049880 06	100.0
	PLTS			180 LBS		SKIDS @ 45 LBS		
4		373		1776 LBS				
GRAND TOTAL								

Where this 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 not be 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 the 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, 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 had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

TIME IN:

TIME OUT: