Date:	00/0	00/0000	00:00:	00		В	ILL C)F L	ADI	NG			Paç	e 1 of 2				
Name: Address City/Sta SID#:		Rasht 1113(CYPRE) HOLDEN	R ST.		A 90	630 FOB: 🔰	K	Bill of	Lading		ber: 002225 00222530100	5301004708 470873	73				
City/Sta	Address: SHIPPING DOOR 8 City/State/Zip: NEWPORT NEWS				85 VA 23603 👝				CARRI Trailer Seal N									
CID#: FOB:										SCAC: FDEG Pro number: 001R0047087 (9012K) FDEG001R0047087 Freight Charge Terms: (freight charges are prepaid								
									unless marked otherwise)									
SPECIAL INSTRUCTIONS:									Prepai									
									(check box) Master Bill of Ladir underlying Bills of I				ng with attached Lading					
CUSTOMER ORDER NUMBER					CUSTOMER # PKGS WI			HT SHT		et/slip	ON	ADDITIONAL SHIPPER INFO						
									(0.100		DE	PT	9	units				
SEE ATTACHED																		
SUPPI	LEMENT	PAGE																
GRANE	TOTAL					8		60	_									
	DLING	PAC	KAGE			С	ARRIER				ESCI	RIPTION	LT	LONLY				
QTY	TYPE	QTY	QTY TYPE		/EIGHT	Н.М (Х	so n	nmodities rec marked and p	s requiring special or additional care or attent nd packaged as to ensure safe transportation See Section 2(e) of NMFC I			with ordinary care.	NMFC #	CLASS				
8	ctns	8	ctns		60		М	ISC			90units		49880-06	100				
8		8			60		(GRAND	тот	AL								
Where the property a "The agre	s follows: ed or declared v p	ent on value, ship alue of the prope D E T	erty is specifically s	stated by the	ecifically in writing the shipper to be not	exceedin	ng			C	e Term Custom	s: Collect: er check acceptable:	Prepaid:					
	-					· ·						C. 14706(c)(1)		at and all other				
if applicable	, otherwise to the and to all applica	e rates, classifica	ations and rules the	at have bee	been agreed upon n established by th able, all terms and	e carrier	and are availa	able to the	shipper,	I he carrier lawful char	jes.	make delivery of this shipm	ent without payment of freig	Shipper				
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.								By Sh By Dr	n t Count nipper river / palle river/Pieces	t ed:		Carrier acknowledges rece certifies emergency respo DOT emergency response	ATURE / PICKUP DATE lipt of packages and required placards. Carrier nse information was made available and/or carrier has guidebook or equivalent documentation in the vehicle. we is received in good order, except as					

Date: 00/00/0000 00:00:00

SUPPLEMENT TO THE BILL OF LADING Page 2 of

Bill of Lading Number: 00222530100470873

2

CUSTOMER ORDER NUMBER 0075826526 0075826586 0075826610 0075826693 0075826868	# PKGS 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	WEIGHT 3 6 13 22	PALLET/SLIP (circle one) N N N N	DEPT DEPT DEPT	ADDITIONAL SHIPPER INFO 9 units 9 units
0075826586 0075826610 0075826693	1 1 1 1	6 13 22	N	DEPT	
0075826610 0075826693	1 1 1 1	13 22	N		9 units
0075826693	1	22		DEPT	
	1		N		18 units
0075826868			IN	DEPT	21 units
	1	4	N	DEPT	6 units
0075826873	-	1	N	DEPT	6 units
0075826902	1	7	N	DEPT	12 units
0075826907	1	4	N	DEPT	9 units
-					
-					
				+	
				+	
PAGE SUBTOTAL	8	60			