

Shipper EN-R-G Foods Inc.
Address: 2620 S. Copper Frontage Rd, #2
 Steamboat Springs, CO 80487
Country: USA
Contact Name: Shipping
Phone No: (970) 367-4290
Contact Email:
Fax No:

Carrier: FedEx Freight
Economy

Shipment Date: 02/22/2021

PO # :

Est. Transit Days: 3 day(s)

Shipper Ref #:

Carrier PRO #:

Customer BOL NO: SBL106246

Origin Terminal:

Destination Terminal:

P:(800) 270-8329

P:(310) 323-5230

Consignee Sonica International Inc
Address: 315 E Redondo Beach Blvd.
 Gardena, CA 90248
Country: USA
Contact Name: Stephen Ho
Phone No: (424) 331-5340
Contact Email:
Fax No:

Third Party Billing Information :

All charges prepaid to :

GlobalTranz

PO Box 6348

Scottsdale AZ 85261

Direct billing inquiries to : (866) 275-1407

GTZ BOL NO : 21348053

Comments/Special Instructions:

Pickup Remarks: ORDER# 210202-0323-5091 / #S478705 &
 210107-1344-5091 / \$S476052

| Package Name | Units | Pieces | HM | Description | Weight | Class | Length | Width | Height | NMFC# |
|----------------|----------|----------|----|----------------|-----------------|-------|--------|-------|--------|-------|
| Pallets(40x48) | 1 | 0 | | nutrition bars | 1145 lbs | 70 | 48 In | 40 In | 41 In | 72045 |
| Pallets(40x48) | 1 | 0 | | nutrition bars | 308 lbs | 92 | 48 In | 40 In | 29 In | 72045 |
| Pallets(40x48) | 1 | 0 | | nutrition bars | 1235 lbs | 70 | 48 In | 40 In | 57 In | 72045 |
| Total: | 3 | 0 | | | 2688 lbs | | | | | |

Any problems with delivery, please contact our Cincinnati office, at cincy@globaltranz.com or (513) 745-0138.

The authorized signatories signing this document on behalf of its company consents and bind its company to the terms and conditions found on www.carrierrate.com.

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: _____ **Date:** _____ **Trailer#:** _____

Driver's Signature: _____ **Date:** _____ **Trailer#:** _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Consignee Signature: _____ **Print Name:** _____

Company Name: _____ **Date:** _____

Permanent post-office address of the Shipper:

* Mark with "X" to designate material as defined in Title 49 CFR