

BILL OF LADING

Ship From

Saddle Creek 3PL(Omnichannel Logistics):  
2550 LOGISTICS DR  
Joliet, IL 60436  
P: 1 (815) 423-4062     Name: MaryAnne Greene

Ship To

Zeta Forwarding  
, 13612 NORTH UNITEC DRIVE  
Laredo, TX 78045  
P: 1 (956) 791-2204     Name: Adriana Robles

3rd Party Freight Charges Bill To

Coyote Logistics (prepaid/third party)  
960 North Point Pkwy  
Alpharetta, GA 30005

Shipment #: 230505-1845-7621  
PO#: 230505-1845-7621;  
410501101  
Pro #:

SPECIAL INSTRUCTIONS:

Freight Terms:

Prepaid: \_\_\_\_  
Collect: \_\_\_\_  
3rd Party:  X

Qty	Type	Weight	HM(X)	Commodity	LTL Class
17	PLT	4,300		Baby Snacks	60
				Dimensions: 0.00 x 0.00 x 0.00	
17	PLT	4,300		GRAND TOTALS	

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 \_\_\_\_\_."

Remit COD to:

Collect: \_\_\_\_\_ Prepaid: \_\_\_\_\_ Customer Check Acceptable: \_\_\_\_\_ COD Amount: \$ \_\_\_\_\_

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 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 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.	<b>Trailer Loaded:</b> ____ by Shipper ____ by Driver	<b>Freight Counted:</b> ____ by Shipper ____ by Driver	The carrier shall not make delivery of this shipment without payment of and all other lawful charges.  <b>Shipper:</b> _____
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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 Department of Transportation.

Shipper: \_\_\_\_\_

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 Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.

Carrier: \_\_\_\_\_