



Phone : 800-713-2111
Email : service.rll@unishippers.com

BOL NO: RLL16920090
Carrier: (UPGF) TFORCE FREIGHT
Ship Date: 2025-05-29

Page 1 of 1 BILL OF LADING

Ship From

TRUE CITRUS
11501 POCOMOKE COURT, SUITE D
MIDDLE RIVER, MD 21220 United States
SHIPPING, P: 8668853666

PRO NO:

Origin Terminal

250 BELLE HILL RD
ELKTON, MD 21921 United States
410-398-5089

Destination Terminal

4600 WALGREEN RD
JACKSONVILLE, FL 32209 United States
904-765-4251

Reference Numbers

Ship To

LOGY GLOBAL JAX
11070 CABOT COMMERCE CIR
SUITE 100, DOOR 31 THRU 36
JACKSONVILLE, FL 32226 United States
RECEIVING, P: 9048648775

Broker Address

Freight Charges Bill To

Carrier Payment Processing
PO Box 192629 Dallas, TX 75219 US
, P: 2147202400
Customer Number: UL2245146

Special Instructions: Do Not Stack Some Items - See Descriptions

Pickup Instructions:
BF-110588
Delivery Instructions: LGLG1018613

Freight Terms

Prepaid:
Collect:
3rd Party: X

Qty	Type	HM	Item Description	Weight (lbs)	NMFC	Class
1	Pallet		FRUIT PUNCH, Dimensions: 48 x 40 x 56 in ** DO NOT STACK **	400	073260-05	125
1	Pallet		FRUIT PUNCH, Dimensions: 48 x 40 x 56 in ** DO NOT STACK **	400	073260-05	125
2			Gross Weight	800		

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.	Trailer Loaded: ____ by Shipper ____ by Driver	Freight Counted: ____ by Shipper ____ by Driver	The carrier shall not make delivery of this shipment without payment of and all other lawful charges. Shipper: _____
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Shipper Signature/Date:

Carrier Signature/Pickup Date:

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

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

Shipper: _____

Carrier: _____