



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

BOL NO: RLL19694210  
Carrier: (UPGF) TFORCE FREIGHT  
Ship Date: 2025-08-13

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  
JAX, 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-111599 PO 250716-1356-28391  
Delivery Instructions: LGLG1019446

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 48 in ** DO NOT STACK ** | 420          | 073260-05 | 125   |
| 1   |        |    | Gross Weight  | 420          |           |       |

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:<br><br>____ by Shipper<br>____ by Driver | Freight Counted:<br><br>____ by Shipper<br>____ by Driver | The carrier shall not make delivery of this shipment without payment of and all other lawful charges.<br><br>Shipper: _____ |
|--|--|---|---|

|  |  |
|--|--|
| Shipper Signature/Date:<br><br>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.<br><br>Shipper: _____ | Carrier Signature/Pickup Date:<br><br>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.<br><br>Carrier: _____ |
|--|--|