

GTZ BOL NO : 19877233

**Shipper** Hall's Warehouse  
**Address** 100 Saw Mill Pond Road  
Edison, NJ 08817  
**Country** USA  
**Contact Name** Michele Salvatore  
**Phone Number** (732) 339-0020  
**Fax Number**

**Carrier** :ULTIMATE FREIGHT CARGO LLC  
**Shipment Date**:06/30/20  
**Carrier Pro#** :  
**Ref #** :104102 Abazeer (Saudi), 103920 Al Riham (Kuwait)  
**Carrier Quote #** :  
**P/O #** :  
**Customer BOL NO**:



**Consignee** American Food Export Services  
**Address** 1100 Milik Street Suite A  
Carteret, NJ 07008  
**Country** USA  
**Contact Name** Mike Benitiz  
**Phone Number** (908) 754-1300  
**Fax Number**

**Third Party Billing Information:**  
All charges are prepaid to:  
**GlobalTranz**  
**PO Box 6348**  
**Scottsdale AZ 85261**  
**Direct billing inquiries to : (866) 275-1407**  
**GTZ BOL NO : 19877233**

**Comments/Special Instructions:****Pickup Remarks :****Delivery Remarks :**

Pallets	Pieces	IsHazmat	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
14	14		organic sugar	18402		48	40	60		false

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](http://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.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

**Consignor's Signature:** \_\_\_\_\_**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

