

SHIP FROM		Bill of Lading Number: 21941093	
Name: Tech to School Address: 1530 Montague Expressway, City/State/Zip: San Jose, CA 95131 Contact: BETHANY RUIZ - 8772558450 Ship Date: 05/14/2021 08:00-16:00		For any questions about this freight please direct questions to freightops@lojistic.com or 435-500-6000	
SHIP TO		CARRIER NAME: UPS Freight - Standard - Trailer number: Seal number(s):	
Name: Wood Memorial High School Address: 943 S. Franklin Street, City/State/Zip: Oakland City, IN 47660 Contact: Gary Horrall - 8125821648 ETA: 05/21/2021 08:00-15:00		SCAC: UPGF Pro number: 21941093	
THIRD PARTY FREIGHT CHARGES BILL TO		Freight charge terms: (freight charges are prepaid unless marked otherwise)	
Name: GlobalTranz - Address: PO Box 6348, City/State/Zip: Scottsdale, AZ 85261		Prepaid: _____ Collect: _____ 3rd party: <u> X </u>	
SPECIAL INSTRUCTIONS: DESTINATION ACCESSORIALS: Liftgate Delivery , Limited Access Delivery		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bill of Lading (check box)	

CUSTOMER ORDER INFORMATION

Customer Order Number	#PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
	1	430 LBS			MTS73682
Grand Total	1	430 LBS			

CARRIER INFORMATION

HANDLING UNIT	PACKAGE		WEIGHT	H.M (X)	COMMODITY DESCRIPTION Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360	LTL ONLY	
	QTY	TYPE				NMFC#	CLASS
1	Pallet		430 LBS		Desktops [48x48x48]	116030-5	125

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 _____."

COD amount: \$ _____
Fee terms: Collect **Prepaid**
Customer check acceptable:

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C 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.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE / 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 regulation of the U.S. DOT.

Trailer loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 By Driver/pieces

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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

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