

SHIP FROM Name: Tech to School Address: 1530 Montague Expressway, City/State/Zip: San Jose, CA 95131 Contact: BETHANY NASONT - 8772558450 Ship Date: 10/27/2020 08:00-16:00	Bill of Lading Number: 20665973 For any questions about this freight please direct questions to freightops@lojstic.com or 800-783-5753
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SHIP TO	CARRIER NAME: UPS - Direct Point - Trailer number: Seal number(s):
Name: Scranton High Address: 63 Munchak Way, City/State/Zip: Scranton, PA 18503 Contact: Ronelle Barrett - 5703483481 ETA: 11/03/2020 08:00-15:00	SCAC: UPGF Pro number: 20665973

THIRD PARTY FREIGHT CHARGES BILL TO Name: GlobalTranz - Address: PO Box 6348, City/State/Zip: Scottsdale, AZ 85261	Freight charge terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: _____ 3rd party: <u> X </u> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bill of Lading (check box)
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SPECIAL INSTRUCTIONS:
DESTINATION ACCESSORIALS:
 Liftgate Delivery , Limited Access Delivery

CUSTOMER ORDER INFORMATION					
Customer Order Number	#PKGS	WEIGHT	CUBE	PALLET/SLIP <small>(CIRCLE ONE)</small>	ADDITIONAL SHIPPER INFO
	1	407 LBS			
Grand Total	1	407 LBS			

CARRIER INFORMATION					
HANDLING UNIT	PACKAGE	WEIGHT	H.M (X)	COMMODITY DESCRIPTION	LTL ONLY
				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	
QTY 1	TYPE Pallet	QTY 1	TYPE Pallet	407 LBS	iMacs [48x48x37]
					NMFC# 116030-6
					CLASS 100

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. _____ Shipper Signature
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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: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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. <i>Property described above is received in good order, except as noted.</i>
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