

Date: 1/03/24

BILL OF LADING

Page: 1

SHIP FROM

Name: MPP TEXAS MAIN WHSE
 Address: 1505 INDUSTRIAL DRIVE
 City/Zip: HENDERSON, TX 75653
 SID#:

FOB ☐

Bill Of Lading No: 00465870017853202



1785320

SHIP TO

Name: MOORE CONROE WAREHOUSE
 Address: 3706 N FRAZIER ST
 City/Zip: CONROE, TX 77303-1453
 CID#:

FOB ☐SHIP VIA
LTLCARRIER NAME
GILTNER

Trailer number:

Seal number(s):

SCAC: GLTR

Pro number: T02



GLTRT02

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
 Address:
 City/Zip:

SPECIAL INSTRUCTIONS:

QUOTE A2986E
 Order No. 001389504

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: X

Collect:

3rd Party:
☐
 (check box)

Master Bill Of Lading with attached underlying Bills of Lading

CUSTOMER ORDER NUMBER

CUSTOMER ORDER INFORMATION

702-P109859503

****-TARE WEIGHT-****

#PKGS

WEIGHT

PALLET/SLIP
(Circle one)ADDITIONAL SHIPPER INFO
5 digit (Dest. ID) 4 digit (Po Type) 5 digit (Dept. ID)

16

1641.00
.00

Y

GRAND TOTAL

16

1641.00

CARRIER INFORMATION

COMMODITY DESCRIPTION

Commodities requiring special attention must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 380

LTL ONLY

NMFC#

CLASS

16 BOX

1641.00

BATHTUBS SHOWERS SHOWER STAL
 ****-TARE WEIGHT-****

158260S2

300

Seal - 8458805

16

1641.00

GRAND TOTAL

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, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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

T2 1 of 3

Date: 1/03/24

BILL OF LADING

Page: 1

SHIP FROM
Name: MPP TEXAS MAIN WHSE
Address: 1505 INDUSTRIAL DRIVE
City/Zip: HENDERSON, TX 75653
SID#:

FOB ☐

Bill Of Lading No: 00465870017852960



1785296

SHIP TO

Name: LESCON PLUMBING INC
Address: 2010 N HOUSTON AVE
City/Zip: HUMBLE, TX 77338

CID#:

FOB ☐SHIP VIA
LTLCARRIER NAME
GILTNER

Trailer number:

Seal number(s):

SCAC: GLTR

Pro number: T02

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:

City/Zip:



GLTR T02

SPECIAL INSTRUCTIONS:

QUOTE A2986E
Order No. 001389211

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: X

Collect:

3rd Party:☐
(check box)Master Bill Of Lading with attached
underlying Bills of Lading

CUSTOMER ORDER NUMBER

CUSTOMER ORDER INFORMATION

54.2337426

****-TARE WEIGHT-****

#PKGS

10

WEIGHT

1078.00
.00PALLET/SLIP
(Circle one)

ADDITIONAL SHIPPER INFO

5 digit (Dest. ID) 4 digit (Po Type) 5 digit (Dest. ID)

GRAND TOTAL

10

1078.00

HANDLING UNIT
QTY TYPEPACKAGE
QTY TYPE

WEIGHT

H.M
(X)

CARRIER INFORMATION

COMMODITY DESCRIPTION

Commodities requiring special attention must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360

NMFC#

LTL ONLY
CLASS

10 BOX

1078.00

BATHTUBS SHOWERS SHOWER STAL
****-TARE WEIGHT-****

158260S2

300 ✓

Seal 8458872

10

1078.00

GRAND TOTAL

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, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

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

Swearer 1-3-2024

T02 283

Valink Cash110

Date: 1/03/24

BILL OF LADING

Page: 1

SHIP FROM
Name: MPP TEXAS MAIN WHSE
Address: 1505 INDUSTRIAL DRIVE
City/Zip: HENDERSON, TX 75653
SID#: ☐ FOB

Bill Of Lading No: 00465870017852823



SHIP TO

Name: WINSUPPLY TOMBALL 460
Address: 10327 LAKE ROAD
City/Zip: HOUSTON, TX 77070

SHIP VIA CARRIER NAME
LTL GILTNER

Trailer number:
Seal number(s):

CID#: ☐ FOB

SCAC: GLTR
Pro number: T02

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:
City/Zip:



SPECIAL INSTRUCTIONS:

QUOTE A2986E
Order No. 001389246

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐

☐ Master Bill Of Lading with attached underlying Bills of Lading (check box)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	#PKGS	WEIGHT	PALLET/SLIP (Circle one)	ADDITIONAL SHIPPER INFO 5 digit (Dest. ID) 4 digit (Po Type) 5 digit (Dest. ID)
00460-039286 *****TARE WEIGHT*****	10	1135.00 .00		
GRAND TOTAL	10	1135.00		

CARRIER INFORMATION

HANDLING UNIT QTY TYPE	PACKAGE QTY TYPE	WEIGHT	H.M (X)	COMMODITY DESCRIPTION <small>Commodities requiring special attention must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360.</small>	LTN ONLY NMFC# CLASS
	10 BOX	1135.00		BATHTUBS SHOWERS SHOWER STAL *****TARE WEIGHT*****	158260S2 300
	10	1135.00		GRAND TOTAL	

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, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Swaner 1-3-2024

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 records. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

SUBJECT TO COUNT
AND INSPECTION

+ Sam Jones

T02 - 303