

Load Confirmation

1195664

Carrier: Eye1 Global Services LLC
Mansfield TX 76063
Date: 01/04/2024

Contact: Rollin Stevenson
Phone: (214) 334-5376
Fax:

Order
Order: 1195664
Miles: 24.0
Temp:
BOL: NB31103995

Commodity: WATER
Weight: 45504.0
Trailer: Van (DAT)
Reference: 35273707

PU 1 **Name:** NIAGARA WATER - DAL
Address: 4851 MOUNTAIN CREEK PARKWAY
DALLAS TX 75236
Phone:
Date: 01/04/2024 1430
Contact:
Driver Load: No driver loading or unload

Reference number:	IA	2925481	Cases:	0
			Weight:	0.0
Reference number:	MB	NB31103995	Cases:	0
			Weight:	0.0
Reference number:	CN	0	Cases:	0
			Weight:	0.0
Reference number:	BM	0	Cases:	0
			Weight:	0.0
Reference number:	DJ	35273707	Cases:	0
			Weight:	0.0
Reference number:	PO	8231240007	Cases:	0
			Weight:	0.0
Reference number:	SO	17891581	Cases:	0
			Weight:	0.0

SO 2 **Name:** WAL-MART S,SAMS #6265,IRVING,TX,UDate: 01/04/2024 2000
Address: SAMS #6265 1213 MARKET PLACE BLVD
IRVING TX 75063
Phone:
Contact:
Driver Load: No driver loading or unload

Reference number:	BM	0	Cases:	0
			Weight:	0.0
Reference number:	DJ	35273707	Cases:	0
			Weight:	0.0

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	Mansfield TX 76063	Phone:	(214) 334-5376
Date:	01/04/2024	Fax:	

Reference number:	PO	8231240007	Cases:	0
			Weight:	0.0
Reference number:	SO	17891581	Cases:	0
			Weight:	0.0

Payment	Carrier Freight Pay:	\$300.00
	Total Carrier Pay:	\$300.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.
Special instructions:
Please contact: KAMILA OLENCHNO (210) 640-7364

STRAIGHT BILL OF LADING - SHORT FORM - Not negotiable

Niagara Bottling, LLC

Date: 01/04/24 02:26 PM CST		BILL OF LADING		Page 1 of 1				
SHIP FROM			SHIP TO					
Name: DAL Address: 4851 Mountain Creek Parkway City/State/Zip: Dallas, TX 75236 SID#: 55708289 FOB: <input type="checkbox"/>			Bill of Lading Number: 35273707 Master Bill of Lading Number: 55708289 Customer PO#: 8231240007 Reference #: Delivery #: 35273707 Shipment #: 55708289					
SHIP TO			CARRIER DETAILS					
Name: WAL-MART STORES INC - SAMS CLUB Location #: Address: SAMS #6265 1213 MARKET PLACE BLVD City/State/Zip: IRVING, TX 75063 CID#: FOB: <input type="checkbox"/> Customer Phone:			Carrier Name: TANAGER LOGISTICS LLC Address: 901 NE LOOP 410 City/State/Zip: SAN ANTONIO TX 78209 SCAC: TGRV Pro number: Trailer number: 65606 Seal Number: 18755276					
Freight Charge Terms: (freight charges are prepaid unless marked otherwise)			Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>					
POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To : Orders@niagarawater.com								
Customer Order Information								
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
960	38400	960	20	MMK05L40PDMPC NR02	645619149	05L.DM.MEMBERS MARK 20% RPET.40P.N.48.PC	078742028477	45504 lbs
Totals								
960	38400	960	20					45504 lbs
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456					Receiving Stamp:			
CARRIER								
CARRIER SIGNATURE/PICKUP DATE <i>rollin stevenson</i>				If the 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 Signature _____ Date _____		FACILITY CHECKOUT Appt Time: 01/04/24 02:30 PM CST Check In Time: 01/04/24 01:08 PM CST Check Out: 01/04/24 02:26 PM CST Delivery Time: 01/04/24 08:00 PM CST Driver Name: rollin Driver Initials: <i>rollin stevenson</i> NBL Initials: _____		
Property described above is received in good Order, except as noted. Print Name: rollin stevenson 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.				COD Amount: \$ _____ LTL ONLY NMFC # 0 CLASS				
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.								
CARRIER INSTRUCTIONS								
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.								

Date 1/4/24 P.O. # 8231240007
 18-6265 Total Rec'd 20 Pallets
 O S D
 Carrier TR # _____
 Received by (Printed) Rollin Stevenson
 Received by (Signature) _____