

**ADI Data International Inc**255 Old New Brunswick Rd STE 350S
Piscataway NJ 08854
Phone: 732-981-0444

Date: 9/27/2011

Bill of Lading

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SHIP FROMName: *Absolute Furniture Industries*
Address: *1375 Morris Ave*
City/State/Zip: *King of Prussia, PA 19066*
SID# **AFI** FOBBill of Lading Number: *012458571000154469*

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SHIP TOName: *A-1 Furniture Store* Location:
Address: *100 Main Street*
EDINA, MN 55439
City/State/Zip:
CID# **BUS001** FOBCarrier Name: **ABF FREIGHT SYSTEM, INC**

Trailer Number:

Seal Number(s):

SCAC: **ABFS**

PRO NUMBER:

THIRD PARTY FREIGHT CHARGES BILL TOName:
Address:
City/State/Zip**Freight Charge Terms:** Prepaid Collect Third Party Master Bill of Lading: with attached underlying Bills of Lading**SPECIAL INSTRUCTIONS:****CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (Circle One)	ADDITIONAL SHIPPER INFORMATION
807612	42	412 lbs	(Y) N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTALS	42	412 lbs		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
5	Pallet	50	Box	500 lbs		Table & Chair		55
5		50		500 lbs		GRAND TOTALS (Weight in lbs)		

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**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.