

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM		Bill of Lading Number:
Name:	MPIO	
Address:	18553 S DOMINGUEZ HILLS DRIVE	
City/State/Zip:	RANCHO DOMINGUEZ, CA 90220	
Contact Name/Number:	ERIC CHO 310-223-1700	FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME:
Name:	ADAMS BEVERAGES NC	XPO
Address:	805 N 23RD ST	Trailer number:
City/State/Zip:	WILMINGTON, NC 28405	Seal number(s):
Contact Name/Number:	Benton Teague (Minuteman)	SCAC:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616334 XPOLogistics

THIRD PARTY FREIGHT CHARGES BILL TO:	
Name:	ANHEUSER-BUSCH U.S. Bank c/o Syncada
Address:	Dept ABI PO BOX 3001 NAPERVILLE, IL 60566-7001
City/State/Zip:	NAPERVILLE, IL 60566-7001
SPECIAL INSTRUCTIONS: Anheuser-Busch Discount Applies	

Freight Charge Terms:	
Prepaid: <input type="checkbox"/>	Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>
<input type="checkbox"/> (check box)	Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082	31	1,010.00	<input checked="" type="checkbox"/>	
3-alpha numeric			<input type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	31	1,010 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz- mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
31	CARTON(S)	2	PALLET(S)	1,010.00	<input type="checkbox"/>	METAL MERCHANDISING POS		175
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
31		2		1,010 LBS		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: or declared value of the property is specifically stated by the shipper to be not exceeding: per _____	"The agreed	COD Amount: \$ _____ N/A
		FEE TERMS: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>

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.

Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT. ADEL Z. 5.27.21	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 Shipper	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. Dwayne Zsyp-52721
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PARTY TO NOTIFY	Receiving Information 70
5190:22 XPO Freight tlccg@xpo.com 800-755-2728 www.tl.xpo.com	

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

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SHIP FROM

Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700

Bill of Lading Number:

SHIP TO

Name: R H BARRINGER (Greensboro)
 Address: 1620 FAIRFAX RD
 City/State/Zip: GREENSBORO, NC 27407
 Contact Name/Number: Keith Womack (Family Fare)

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616360

XPOLogistics

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:

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

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number [required]	# PKGS	WEIGHT (LBS)	PALLET/SUP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082 3-alpha numeric	20	640.00	<input checked="" type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	20	640 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
20	CARTON(S)	1	PALLET(S)	640.00	<input type="checkbox"/>	METAL MERCHANDISING POS		125
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
20		1		640 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 _____ per _____

COD Amount: \$ N/A
 FEE TERMS: Collect: Prepaid:

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.

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 regulations of the U.S. DOT.

Abel 2 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Shipper

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.

Anheuser-Busch LLC Shipper Signature
 Cheryl L SWP-527-21

PARTY TO NOTIFY

5190:22
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM

Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700 FOB:

Bill of Lading Number:

SHIP TO

Name: ADAMS BEVERAGES (Short Stop)
 Address: 797 CATON ROAD
 City/State/Zip: LUMBERTON, NC 28360
 Contact Name/Number: Russ Conaway (Short Stop)

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract; if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616356

XPOLogistics

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:

Prepaid: Collect: 3rd Party:

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

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082 3-alpha numeric	19	610.00	<input checked="" type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	19	610 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
19	CARTON(S)	1	PALLET(S)	610.00	<input type="checkbox"/>	METAL MERCHANDISING POS		175
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
19		1		610 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 _____ per _____

COD Amount: \$ N/A
 FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.

April 2 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets
 said to contain
 By Shipper

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 destroyed when received in poor condition, arrived as noted.

Quayle 5/20/21

PARTY TO NOTIFY

5190:22
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM		Bill of Lading Number:
Name:	MPIO	
Address:	18553 S DOMINGUEZ HILLS DRIVE	
City/State/Zip:	RANCHO DOMINGUEZ, CA 90220	
Contact Name/Number:	ERIC CHO 310-223-1700	FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME:
Name:	R H BARRINGER DIST	XPO
Address:	420 CIVIC BLVD	Trailer number:
City/State/Zip:	RALEIGH, NC 27610	Seal number(s):
Contact Name/Number:	Keith Womack (Family Fare)	SCAC:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616323 XPOLogistics

THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:
Name:	ANHEUSER-BUSCH U.S. Bank c/o Syncada	Prepaid: <input type="checkbox"/> Collect: <input type="checkbox"/> 3rd Party: <input checked="" type="checkbox"/>
Address:	Dept ABI	<input type="checkbox"/> (check box) Master Bill of Lading:
City/State/Zip:	PO BOX 3001	with attached underlying Bills of Lading
SPECIAL INSTRUCTIONS:		
Anheuser-Busch Discount Applies		

CUSTOMER ORDER INFORMATION			
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)
Primary PO: CMD 4800460082	18	580.00	<input checked="" type="checkbox"/>
3-alpha numeric			<input type="checkbox"/>
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>
SAP Code:			<input type="checkbox"/>
SAP Owner: (Full Name)			<input type="checkbox"/>
GRAND TOTAL:	18	580 LBS	

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
18	CARTON(S)	1	PALLET(S)	580.00	<input type="checkbox"/>	METAL MERCHANDISING POS		175
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
18		1		580 LBS		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: \$ _____ **N/A**

FEE TERMS: Collect: Prepaid:

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.

THIS CARRIER SHALL NOT MAKE LIABILITY OF THIS SHIPMENT WITHOUT PAYMENT OF freight and all other lawful charges.

Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT. Abel Z. 5-27-21	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 Shipper	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. Quincy Lewis - 5-27-21
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PARTY TO NOTIFY	Receiving Information
5190:22 XPO Freight tlccg@xpo.com 800-755-2728 www.ttl.xpo.com	

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM
 Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616290

XPOLogistics



SHIP TO
 Name: ADAMS BEVERAGES (Pollocksville)
 Address: 160 HUGHES FARM ROAD
 City/State/Zip: POLLOCKSVILLE, NC 28573
 Contact Name/Number: Benton Teague (Handy Mart) FOB:

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:
 Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:

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

SPECIAL INSTRUCTIONS:

Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION

Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082	10	340.00	<input checked="" type="checkbox"/>	
3-alpha numeric			<input type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	10	340 LBS		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
10	CARTON(S)	1	PALLET(S)	340.00	<input type="checkbox"/>	METAL MERCHANDISING POS		250
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
10		1		340 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 per _____

COD Amount: \$ N/A
 FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.

Ab-q 2-5-27-21

Trailer Loaded:

By Shipper
 By Driver

Freight Counted:

By Shipper
 By Driver/pallets said to contain
 By Shipper

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.

Quayle / SWP - 5-27-21

PARTY TO NOTIFY

5190:22
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information

Anheuser-Busch

Date: 5/19/2021 **BILL OF LADING** Page 1 of 1


SHIP FROM
 Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700 FOB:

Bill of Lading Number:
 CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:

SHIP TO
 Name: CAROLINA EAGLE DIST INC
 Address: 1950 N GREENE ST
 City/State/Zip: GREENVILLE, NC 27834
 Contact Name/Number: Tim White (Handy Mart)

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616301 XPOLogistics



THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 (check box) Master Bill of Lading with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082	10	340.00	<input type="checkbox"/>	
3-alpha numeric			<input type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	10	340 LBS		

HANDLING UNIT		PACKAGE		WEIGHT	Haz- mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
10	CARTONS	1	PALLETS	340.00	<input type="checkbox"/>	METAL MERCHANDISING POS		250
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
10		1		340 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 _____ per _____

COD Amount: \$ N/A
 FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.
 AD-1 Z. 5.27.21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Shipper

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.
 Anheuser-Busch LLC Shipper Signature
 Anheuser-Busch LLC
 5/27/21

PARTY TO NOTIFY
 5190:22
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM

Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700

Bill of Lading Number:
 SAP CODE VALUE

SHIP TO

Name: R H BARRINGER (Hickory/ Basket)
 Address: 1613-B MAIN AVENUE DR NW
 City/State/Zip: HICKORY, NC 28601
 Contact Name/Number: Joe Clark (Market Basket)

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:
 Drn number:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616312 XPOLogistics

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:

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

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION			
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)
Primary PO: CMD 4800460082	8	280.00	<input checked="" type="checkbox"/>
3-alpha numeric			<input type="checkbox"/>
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>
SAP Code:			<input type="checkbox"/>
SAP Owner: (Full Name)			<input type="checkbox"/>
GRAND TOTAL:	8	280 LBS	

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
8	CARTON(S)	1	PALLET(S)	280.00	<input type="checkbox"/>	METAL MERCHANDISING POS		250
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
8		1		280 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 per _____

COD Amount: \$ N/A
FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.

Abel Z. 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Shipper

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.

Anheuser-Busch LLC Shipper Signature

Quay SWP. 5/27/21

PARTY TO NOTIFY

5190:22
 XPO Freight
 tlccg@xpo.com
 800-755-2728
 www.tl.xpo.com

Receiving Information

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM		Bill of Lading Number:
Name:	MPIO	
Address:	18553 S DOMINGUEZ HILLS DRIVE	
City/State/Zip:	RANCHO DOMINGUEZ, CA 90220	
Contact Name/Number:	ERIC CHO 310-223-1700	FOB: <input type="checkbox"/>

SHIP TO		CARRIER NAME: XPO
Name:	ADAMS BEVERAGES NC LLC	Trailer number:
Address:	805 N 23RD ST	Seal number(s):
City/State/Zip:	WILMINGTON, NC 28405	
Contact Name/Number:	Jeff Fox (GPM)	

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616404

XPOLogistics



THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms:
Name:	ANHEUSER-BUSCH U.S. Bank c/o Syncada	
Address:	DEPT ABI PO BOX 3001 NAPERVILLE, IL 60566-7001	

SPECIAL INSTRUCTIONS: *Anheuser-Busch Discount Applies*

Prepaid: Collect: 3rd Party:

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

CUSTOMER ORDER INFORMATION			
Anheuser-Busch PO Number <small>(required)</small>	# PKGS	WEIGHT (LBS)	PALLET/SLIP? <small>(check if YES)</small>
Primary PO: CMD 4800460082	6	220.00	<input checked="" type="checkbox"/>
<i>3-alpha numeric</i>			<input type="checkbox"/>
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>
SAP Code:			<input type="checkbox"/>
SAP Owner: (Full Name)			<input type="checkbox"/>
GRAND TOTAL:	6	220 LBS	

HANDLING UNIT				PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE	NMFC #	CLASS					
6	CARTON(S)	1	PALLET(S)	220.00	<input type="checkbox"/>	METAL MERCHANDISING POS		250		
6		1		220 LBS						
				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: \$ N/A

FEE TERMS: Collect: Prepaid:

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.

Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT. <i>A.Z 5-27-21</i>	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 Shipper	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>Quayn lswp 5-27-21</i>
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PARTY TO NOTIFY	Receiving Information
5190:22 XPO Freight tlccg@xpo.com 800-755-2728 www.tl.xpo.com	

Anheuser-Busch

Date: 5/19/2021 **BILL OF LADING** Page 1 of 1

SHIP FROM
 Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700 FOB:

Bill of Lading Number:
 when Loaded, Unload

SHIP TO
 Name: HOLSTON DISTRIBUTING CO
 Address: 310 LAFE COX DR
 City/State/Zip: JOHNSON CITY, TN 37604
 Contact Name/Number: Mike Hubbard (GPM)

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

XPOLogistics
 718-616393

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 (check box) Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082	6	220.00	<input checked="" type="checkbox"/>	
3-alpha numeric			<input type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	6	220 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
6	CARTONS	1	PALLET(S)	220.00	<input type="checkbox"/>	METAL MERCHANDISING POS		250
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
6		1		220 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 per _____

COD Amount: \$ N/A
 FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.
 Abel Z 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Shipper

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.
 Anheuser-Busch LLC Shipper Signature

PARTY TO NOTIFY
 5190:22
 XPO Freight
 tlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information

52721

Anheuser-Busch

Date: 5/19/2021 **BILL OF LADING** Page 1 of 1

SHIP FROM
 Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700 FOB:

Bill of Lading Number:
 CARRIER NAME: XPO
 Trailer number:
 Seal number(s):

SHIP TO
 Name: BETTER BRANDS INC
 Address: 908 JACKSON ST
 City/State/Zip: MYRTLE BEACH, SC 29577
 Contact Name/Number: Doug Knight (GPM)

Freight Charge Terms:
 Prepaid: Collect: 3rd Party:
 (check box) Master Bill of Lading:
 with attached underlying Bills of Lading

THIRD PARTY FREIGHT CHARGES BILL TO:
 Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001
 SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics Freight, Inc. rules tariff. (see www.xpo.com)

718-616382 XPO Logistics

CUSTOMER ORDER INFORMATION			
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)
Primary PO: CMD 4800460082	4	160.00	<input checked="" type="checkbox"/>
3-alpha numeric			<input type="checkbox"/>
Primary PO Error Check: **A-B PO Format Verified**			<input checked="" type="checkbox"/>
SAP Code:			<input type="checkbox"/>
SAP Owner: (Full Name)			<input type="checkbox"/>
GRAND TOTAL:	4	160 LBS	

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	CARTON(S)	1	PALLET(S)	160.00	<input type="checkbox"/>	METAL MERCHANDISING POS		300
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
4		1		160 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 per _____

COD Amount: \$ N/A
FEE TERMS: Collect: Prepaid:

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.
 Anheuser-Busch LLC Shipper Signature

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 regulations of the U.S. DOT.

Abel Z 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets said to contain
 By Shipper

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.

Quay bwp 52721

PARTY TO NOTIFY	Receiving Information
5190:22 XPO Freight tlccg@xpo.com 800-755-2728 www.tl.xpo.com	

Anheuser-Busch

Date: 5/19/2021

BILL OF LADING

Page 1 of 1

SHIP FROM

Name: MPIO
 Address: 18553 S DOMINGUEZ HILLS DRIVE
 City/State/Zip: RANCHO DOMINGUEZ, CA 90220
 Contact Name/Number: ERIC CHO 310-223-1700 FOB:

Bill of Lading Number:

SHIP TO

Name: SOUTHERN CROWN PARTNERS LLC
 Address: 916 W DARLINGTON ST
 City/State/Zip: FLORENCE, SC 29501
 Contact Name/Number: Jackie Tyner (GPM)

CARRIER NAME: XPO
 Trailer number:
 Seal number(s):
 SCAC:

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: ANHEUSER-BUSCH U.S. Bank c/o Syncada
 Address: Dept ABI
 PO BOX 3001
 City/State/Zip: NAPERVILLE, IL 60566-7001

Driver's signature acknowledges receipt of freight only. Received shipment is subject to terms of a written contract if any, otherwise subject to the terms, conditions and limitations of liability set forth in XPO Logistics and Freight, Inc. rules tariff. (see www.xpo.com)

718-616371 XPOLogistics

SPECIAL INSTRUCTIONS:
 Anheuser-Busch Discount Applies

Freight Charge Terms:

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

CUSTOMER ORDER INFORMATION				
Anheuser-Busch PO Number (required)	# PKGS	WEIGHT (LBS)	PALLET/SLIP? (check if YES)	ADDITIONAL SHIPPER INFO
Primary PO: CMD 4800460082 3-alpha numeric	4	160.00	<input checked="" type="checkbox"/>	
Primary PO Error Check: **A-B PO Format Verified**			<input type="checkbox"/>	
SAP Code:			<input type="checkbox"/>	
SAP Owner: (Full Name)			<input type="checkbox"/>	
GRAND TOTAL:	4	160 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
4	CARTON(S)	1	PALLET(S)	160.00	<input type="checkbox"/>	METAL MERCHANDISING POS		300
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
					<input type="checkbox"/>			
4		1		160 LBS		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:
 or declared value of the property is specifically stated by the shipper to be not exceeding:
 _____ per _____

COD Amount: \$ N/A
FEE TERMS: Collect: Prepaid:

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.

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 regulations of the U.S. DOT.

Abel Z. 5-27-21

Trailer Loaded:
 By Shipper
 By Driver

Freight Counted:
 By Shipper
 By Driver/pallets
 By Shipper said to contain

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.

Maen lswp 5-27-21

PARTY TO NOTIFY

5190:22
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information