

Anheuser-Busch

Date: 4/28/2022

BILL OF LADING

Page 1 of 1

SHIP FROM
 Name: Simon Enterprises Company
 Address: 10785 Indian Head Industrial Blvd
 City/State/Zip: St. Louis, MO 63132
 Contact Name/Number: 3142618600

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)



375-374554

XPOLogistics

SHIP TO
 Name: IMS
 Address: 10100 58th Place
 City/State/Zip: Kenosha, WI 53144
 Contact Name/Number: Receiving

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 2202200131		925.00	<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:		925 LBS		

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	Haz-mat?	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
0	CARTON(S)	2	PALLET(S)	865	<input type="checkbox"/>	Plastic Display Racks		
				865	<input type="checkbox"/>			
				865	<input type="checkbox"/>			
		2		925 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:
 agreed or declared value of the property is specifically stated by the shipper to be not exceeding:
 _____ per _____

“The
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.
 J.S. - 4/28/22

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.
 Property described above is received in good order, except as noted.
 Vernon Brumitt 4-28-22 1232

PARTY TO NOTIFY
 5827-4
 XPO Freight
 ltlccg@xpo.com
 800-755-2728
 www.ltl.xpo.com

Receiving Information
 2 skets
 44 pcs.