

Bill Of Lading

Date: 2024/09/24		SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 160-2920 188th Street, Surrey, BC V3Z 0W5, CA SID#: _____ FOB: <input type="checkbox"/>		Bill Of Lading Number: MP24092418907245 4PHUBN6W, 1QM2Z231, 1QEYZHYE BAR CODE SPACE 31787357831		CARRIER NAME: Trailer number: _____			
SHIP TO Amazon YYC4 6635 106 AVE SE, CALGARY, T2C 5X1, CA CID#: _____ FOB: <input type="checkbox"/>		Seal number(s): SCAC: Pro number:		BAR CODE SPACE		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)			
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address:		Prepaid _____ Collect YES 3rd Party _____		<input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading		City/State/Zip: SPECIAL INSTRUCTIONS:			
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER 1QM2Z231, 4PHUBN6W, 1QEYZHYE		SHIPMENT ID 31787357831	#PALLET(S) 41	#CARTONS 41	#EACHES 41	WEIGHT 174.46 pounds	PALLET/SLIP Y N		
GRAND TOTAL				ADDITIONAL SHIPPER INFO					
CARRIER INFORMATION									
HANDLING UNIT QTY TYPE		PACKAGE QTY TYPE		WEIGHT 174.4600LB	H.M. (X) LED felt letter board	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section(2)(a) of NMFC Item 360</small>		LTL ONLY NMFC# _____ CLASS _____	
		41 CARTONS						RECEIVING STAMP SPACE	
GRAND TOTAL									
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or 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: <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable: <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).						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.			
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 DOT.						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 <input type="checkbox"/> By Driver/Pieces	
						Shipper Signature _____		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. <i>Property described above is received in good order, except as noted</i>	