

Bill Of Lading

Date: 2024/11/19				SHIP FROM				Bill Of Lading Number: MP2411192186540 1GRPULK8L_3BFCU9RM,4MPC51TL7MFUX3BM			
VEVOR VEVOR CA, +86 166 0183 9140 160-2920 188th Street, Surrey, BC V3Z 0W5, CA								BAR CODE SPACE 32906298561			
SID#:				FOB: <input type="checkbox"/>				CARRIER NAME:			
SHIP TO								Trailer number:			
Amazon YYZ4 8050 Heritage Road, Brampton, L6Y 0C9 , CA								Seal number(s):			
CID#:				FOB: <input type="checkbox"/>				SCAC:			
THIRD PARTY FREIGHT CHARGES BILL TO:								Pro number:			
Name:								BAR CODE SPACE			
Address:								Freight Charge Terms: (freight charges are prepaid unless marked otherwise)			
City/State/Zip:								Prepaid _____ Collect YES 3rd Party _____			
SPECIAL INSTRUCTIONS:								<input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading			
CUSTOMER ORDER NUMBER				SHIPMENT ID	#PALLET(S)	#CARTONS	#EACHES	WEIGHT	PALLET/SPLIT		
1GRPULK8L, 4MPC51TI, 3BFCU9RM, 7MFUX3BM				32906298561		122	122	563.1 pounds	Y	N	
GRAND TOTAL				ADDITIONAL SHIPPER INFO							
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY			
QTY	TYPE	QTY	TYPE			NMFC#	CLASS				
		122	CARTONS	563.1000LB		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)(e) of NMFC Item 360					
						Counting Scale					
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 checked="" type="checkbox"/> <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).											
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, 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 said to contain <input type="checkbox"/> 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			