

Bill Of Lading

Date: 2025/03/06 <div style="text-align: center;">SHIP FROM</div> VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA SID#: _____ FOB: <input type="checkbox"/>		Bill Of Lading Number: MP25030427396209 LYLHHHG <div style="text-align: right;">BAR CODE SPACE 34784247201</div>					
<div style="text-align: center;">SHIP TO</div> Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA CID#: _____ FOB: <input type="checkbox"/>		CARRIER NAME: DAY & ROSS INC Trailer number: _____ Seal number(s): _____ SCAC: DAYR Pro number: _____ <div style="text-align: right;">BAR CODE SPACE</div>					
THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____ SPECIAL INSTRUCTIONS: _____		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES <u>3rd</u> Party _____ <input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading					
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER		SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP
1YLHHHG		34784247201		1	1	7.94 pounds	Y N
GRAND TOTAL				ADDITIONAL SHIPPER INFO			
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE			LTL ONLY NMFC#	CLASS
		1	CARTONS	7.9400LB		Guillotine Heat Crimp Sealer	
GRAND TOTAL							
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or if 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"/> 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).						RECEIVING STAMP SPACE	
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. <i>Property described above is received in good order, except as noted</i>							