

Bill Of Lading

Date: 2024/06/05 <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA SID#: _____ FOB: <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> SHIP TO Amazon YYZ3 7995 Winston Churchill Blvd., Brampton, L6Y 5Z4, CA CID#: _____ FOB: <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____ SPECIAL INSTRUCTIONS: _____ </div>				Bill Of Lading Number: MP24060413265025 4H71HOB1,3NXBJXRN,7AAGGKYD,492M3MEE <div style="border: 1px solid black; padding: 5px; margin-top: 5px; text-align: center;"> BAR CODE SPACE 29598009111 </div> CARRIER NAME: _____ Trailer number: _____ Seal number(s): _____ SCAC: _____ Pro number: _____ <div style="border: 1px solid black; padding: 5px; margin-top: 5px; text-align: center;"> BAR CODE SPACE </div> Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3rd 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
7A4GGKYD, 492M3MEE, 3NXBJXRN, 4H71HOB1		29598009111	4	85	85	2589.64 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	
QTY	TYPE	QTY	TYPE			NMFC#	CLASS
4	PALLETS	85	CARTONS	2589.6400LB	Mini Beer Keg		
GRAND TOTAL							
<small>When 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 _____"</small>						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). 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 DOT.						Carrier Signature _____ SHIPPER SIGNATURE _____ 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"/> 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>							