

Bill Of Lading

Date: 2024/07/09	
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA SID#: _____ FOB: <input type="checkbox"/>	Bill Of Lading Number: MP24070915110882 4MYB59QF.5NEJ4UY.438HRM8C.2SIS7MCW <div style="text-align: center;">BAR CODE SPACE 30225328671</div>
SHIP TO Amazon YYZ3 7995 Winston Churchill Blvd., Brampton, L6Y 5Z4, CA CID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: Trailer number: _____ Seal number(s): SCAC: Pro number:
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip: SPECIAL INSTRUCTIONS:	<div style="text-align: center;">BAR CODE SPACE</div> Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3 rd 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
4MYB59QF, 438HRM8C, 2SIS7MCW, 5NEJ4UY	30225328671
#PALLETS	#CARTONS
10	245
#EACHES	WEIGHT
245	6659.52 pounds
PALLET/SLIP	Y N
Y	N
GRAND TOTAL	
ADDITIONAL SHIPPER INFO	
CARRIER INFORMATION	
HANDLING UNIT	PACKAGE
QTY TYPE	QTY TYPE
10	PALLETS
245	CARTONS
6659.5200LB	Chainsaw Guide
WEIGHT	H.M. (X)
6659.5200LB	(X)
COMMODITY DESCRIPTION	
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	
LTL ONLY	
NMFC#	CLASS
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 _____"	
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 <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>	