

Bill Of Lading

Date: 2024/12/06 <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 unit 2, 6880 Columbus Rd Mississauga, ON L5T 2G1, CA SID#: _____ FOB: <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> SHIP TO Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA CID#: _____ FOB: <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____ SPECIAL INSTRUCTIONS: _____ </div>		Bill Of Lading Number: MP24120423017918 7BB9UMHQ <div style="border: 1px solid black; padding: 5px; margin-top: 10px; text-align: center;"> BAR CODE SPACE 33229489991 </div> CARRIER NAME: CEVA LOGISTICS Trailer number: _____ Seal number(s): _____ SCAC: CEVA Pro number: _____ <div style="border: 1px solid black; padding: 5px; margin-top: 10px; 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
7BB9UMHQ	33229489991		1	1	7.17 pounds	Y N
GRAND TOTAL		ADDITIONAL SHIPPER INFO				
CARRIER INFORMATION						
HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE		NMFC#	CLASS
	1	CARTONS	7.1700LB	snowshoes		
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 said to contain <input type="checkbox"/> By Driver/Pieces		
SHIPPER 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						