

Bill Of Lading

Date: 2024/07/03	
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 102-6791 Elmbridge Way, Richmond, BC V7C4N1, CA SID#:	Bill Of Lading Number: MP24070214805935 2NOYXCXN BAR CODE SPACE 30107862651
SHIP TO Amazon YOO1 789 Salem Rd N, Ajax, L1Z 0J2, CA CID#:	CARRIER NAME: Trailer number: Seal number(s): SCAC: Pro number:
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip: SPECIAL INSTRUCTIONS:	BAR CODE SPACE 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
2NOYXCXN	30107862651
#PALLETS	#CARTONS
3	36
#EACHES	WEIGHT
36	1389.55 pounds
PALLET/SLIP	Y
N	
GRAND TOTAL	
ADDITIONAL SHIPPER INFO	
CARRIER INFORMATION	
HANDLING UNIT	PACKAGE
QTY	TYPE
3	PALLETS
36	CARTONS
WEIGHT	H.M.
1389.5500LB	(X)
COMMODITY DESCRIPTION	
Light commercial cube ice machine	
LTL ONLY	
NMFC#	CLASS
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).	
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