

Bill Of Lading

Date: 2024/11/12						
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 18 Kenview Blvd, Brampton, ON L6T 5S8, CA SID#: _____ FOB: <input type="checkbox"/>	Bill Of Lading Number: MP24111221446617 <small>4THQ4BKO,144M6FVJ,764BPDSR,6M49RFOA</small> BAR CODE SPACE 32759476761					
SHIP TO Amazon YYZ7 12724 Coleraine Drive, Bolton, L7E 4L8, CA CID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: Trailer number: _____ Seal number(s): SCAC: Pro number: BAR CODE SPACE					
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Address: City/State/Zip:	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	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP
4THQ4BKO, 144M6FVJ, 764BPDSR, 6M49RFOA	32759476761		137	137	1060.67 pounds	Y N
GRAND TOTAL		ADDITIONAL SHIPPER INFO				
CARRIER INFORMATION						
HANDLING UNIT	PACKAGE		WEIGHT	H.M.	COMMODITY DESCRIPTION	LTN ONLY
QTY	TYPE	QTY	TYPE	(X)	<small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360</small>	NMFC#
		137	CARTONS	1060.6700LB	Lab Scales Balances	CLASS
GRAND TOTAL						RECEIVING STAMP SPACE
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: \$ _____	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).					Fee Terms: Collect: <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
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/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.					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 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>		