Bill Of Lading

| Date | : 20 | 024/0 | 8/22 | | | | | | | | | | | | |
|--|--|------------------------------|----------------------------------|---------------------------------------|-----------------------|--|---|---|--|----------------------------|---|----------------------------------|-------------|---------------------------|--|
| SHIP FROM | | | | | | | | | Bill Of Lading Number:MP24082017186511 | | | | | | |
| VEVOR VEVOR CA, +86 166 0183 9140 unit 2, 6880 Columbus Rd Mississauga, ON LST 2G1. CA | | | | | | | | BAR CODE SPACE 30986946341 | | | | | | | |
| | | | | | | | | CARRIER NAME:CEVA LOGISTICS | | | | | | | |
| SID#: FOB:□ SHIP TO | | | | | | | | | Trailer number: | | | | | | |
| Amazor 6351 Si Scarbor M1X 1N CID#: | 10 | E/ | ne⊹⊟ | Seal number(s): SCAC:CEVA Pro number: | | | | | | | | | | | |
| CID#: FOB: THIRD PARTY FREIGHT CHARGES BILL TO: | | | | | | | | - | | E | BAR CC | DE SPACE | | | |
| Name: Addre | | KITF | KEIGH | CHAR | 3E3 B | ILL | 10: | Freight C | hard | no Torn | ne:/fraia | ht chames an | e nre | naid unless | |
| City/State/Zip: | | | | | | | | Freight Charge Terms:(freight charges are prepaid unless marked otherwise) Prepaid Collect YES 3 rd Party | | | | | | | |
| SPECIAL INSTRUCTIONS: | | | | | | | | Prepaid | | | | | | - | |
| | | | | | | | | Master Bill of Lading with attached | | | | | | | |
| | | | | | | | | underlying Bills of Lading ER INFORMATION | | | | | | | |
| CUSTOMER SHIPME ORDER NUMBER | | | | | | | #CARTO | | | CHES | WEIGHT | - | PALLET/SLIP | | |
| | | | | | 16244 | | | 1 | | | 1 | 20.94 pound | do | YN | |
| 13QTZE4P 30986946341 GRAND TOTAL | | | | | | | | ADDITION | ΙΔΙ | | | | 12 | i in | |
| OKAN | DIOIAL | | | | | _ | ARRIER II | NFORMATIO | | ····· | | | | | |
| | | | | | | | | ODITY DE | | RIPTION | 1 | LTL | ONL | Y | |
| QTY | TYPE | QTY | TYPI | E | | (X) | 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(e) of NMFC tran 360 | | | | NMFC# | | CLASS | | |
| | | 1 | CARTONS | NS 20.940 | 00LB | | Diesel Heater | | | | | | | | |
| | | | | | | | | | | | | | | RECIEVING | |
| | | | | | - | | | | | | _ | | | STAMP SPACE | |
| | | | | | | | G | RAND T | OT. | AL | | | | | |
| Where the property a exceeding | rate is dependent s follows: "The agr pol | , shippers a sclared valu | re required to e of the prope | state spe erty is spe | cificall cifically | reed or of the COD Amount: \$ Fee Terms: Collect: □ Prepaid □ Customer check acceptable: □ | | | | | | | | | |
| | iability Limita | | | | | | | | | | 14706(c)(| (A) and (B). | | | |
| agreed the rate | /ED, subject t upon in writing s, classification ilable to the sl | g betwe | en the c | arrier and at have be | shipper en esta | r, if a iblish | pplicable, of ed by the ca | herwise to arrier and | | | | d all other lawfu | | shipment without rges. | |
| regulation | | прры, | on reque | isi, and to | ан аррі | iicabi | e state and | iouoiai | Ship | per Sign | nature | | | _ | |
| SHIPPER SIGNATURE/DATE Trailer Loaded | | | | | | | Freight Counted | | | CARRIER SIGNATURE / PICKUP | | | | | |
| This is to certify that the above named By Shipper | | | | | | | | □ By Shipper | | | DATE | | | | |
| materials are properly classified, described, | | | | | | | | ☐ By Driver pallets | | | Carrier acknowledges receipt of packages and | | | | |
| packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT. | | | | | | | | said to contain | | | required placards. Carrier certifies emergency response information was made available and/ or carrier has the DOT emergency response | | | | |
| o app | ioudie regulal | JOHO UI | 501 | | | | | ☐ By Driver/Pieces | | | guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted | | | | |