

Bill Of Lading

Date: 2024/07/30						
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: MP24073016146588 2SQZZJCG BAR CODE SPACE 30587295131					
SHIP TO Amazon XCAB 1882 118 Avenue NE, Calgary, AB T3K 0R1, 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:	BAR CODE SPACE Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i> Prepaid _____ Collect YES <input type="checkbox"/> 3 rd Party _____ <input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading					
CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP
2SQZZJCG	30587295131	2	37	37	885.95 pounds	Y N
GRAND TOTAL		ADDITIONAL SHIPPER INFO				
CARRIER INFORMATION						
HANDLING UNIT		PACKAGE		WEIGHT	H.M.	COMMODITY DESCRIPTION
QTY	TYPE	QTY	TYPE		(X)	LTL ONLY
2	PALLETS	37	CARTONS	885.9500LB		NMFC#
						CLASS
						<small>*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(s) of NMFC Item 360</small>
						Manual Mug Heat Press
						<small>RECIEVING STAMP SPACE</small>
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: \$
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						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>
Freight Counted <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver pallets said to contain <input type="checkbox"/> By Driver/Pieces						