

Bill Of Lading

Date: 2024/09/24		Bill Of Lading Number: MP24092418907299 <small>7LBIO26S</small>	
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 18 Kenview Blvd, Brampton, ON L6T 5S8, CA		BAR CODE SPACE 31792167061	
SID#: _____ FOB: <input type="checkbox"/>		CARRIER NAME: Trailer number: _____	
SHIP TO Amazon YYZ3 7995 Winston Churchill Blvd., Brampton, L6Y 5Z4, CA		Seal number(s): SCAC: Pro number:	
CID#: _____ FOB: <input type="checkbox"/>		BAR CODE SPACE	
THIRD PARTY FREIGHT CHARGES BILL TO:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3 rd Party _____	
Name: Address:			
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading <input type="checkbox"/>	
SPECIAL INSTRUCTIONS:			
CUSTOMER ORDER INFORMATION			
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS
7LBIO26S	31792167061	5	120
			#EACHES
			120
			WEIGHT
			4094.7 pounds
			PALLET/SLIP
			Y N
GRAND TOTAL		ADDITIONAL SHIPPER INFO	
CARRIER INFORMATION			
HANDLING UNIT	PACKAGE	WEIGHT	H.M.
QTY	TYPE	QTY	TYPE
5	PALLETS	120	CARTONS
		4094.7000LB	
			COMMODITY DESCRIPTION
			Youth style inflatable touch ball
			<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>
			LTL ONLY
			NMFC#
			CLASS
			RECEIVING STAMP SPACE
			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.	
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		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. <i>Property described above is received in good order, except as noted</i>