

Bill Of Lading

Date: 2024/07/11								
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 102-6791 Elmbridge Way, Richmond, BC V7C4N1, CA SID#: _____ FOB: <input type="checkbox"/>			Bill Of Lading Number: MP24070915117215 <small>7IEIXCEE</small> BAR CODE SPACE 30222549311					
SHIP TO Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA CID#: _____ FOB: <input type="checkbox"/>			CARRIER NAME: CEVA LOGISTICS Trailer number: _____ Seal number(s): _____ SCAC: CEVA 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 _____					
SPECIAL INSTRUCTIONS: _____			<input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading <input type="checkbox"/>					
CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER		SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP	
7IEIXCEE		30222549311		1	1	9.92 pounds	Y	N
GRAND TOTAL				ADDITIONAL SHIPPER INFO				
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY
QTY	TYPE	QTY	TYPE			<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>		NMFC#
		1	CARTONS	9.9200LB		Hoverboard Seat Attachment-1		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).						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. Property described above is received in good order, except as noted	