

# Bill Of Lading

Date: 2024/12/27		Bill Of Lading Number: MP24122424101097 5TX31CNZ					
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA		BAR CODE SPACE 33635541701					
SHIP TO Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA		CARRIER NAME: CEVA LOGISTICS Trailer number:					
THIRD PARTY FREIGHT CHARGES BILL TO:		Seal number(s): SCAC: CEVA Pro number: BAR CODE SPACE					
Name: Address: City/State/Zip: SPECIAL INSTRUCTIONS:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3 <sup>rd</sup> Party _____					
<b>CUSTOMER ORDER INFORMATION</b>							
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS				
5TX31CNZ	33635541701		1				
GRAND TOTAL	ADDITIONAL SHIPPER INFO	#EACHES	WEIGHT				
		1	11.57 pounds				
PALLETT/SLIP		Y	N				
<b>CARRIER INFORMATION</b>							
HANDLING UNIT	PACKAGE	WEIGHT	H.M.	COMMODITY DESCRIPTION	LTL ONLY		
QTY	TYPE	QTY	(X)		NMFC#	CLASS	
	1 CARTONS	11.5700LB		12V Onboard Air Compressor			
<b>GRAND TOTAL</b>							
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		Trailer Loaded		Freight Counted		CARRIER SIGNATURE / PICKUP 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.		<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver pallets said to contain <input type="checkbox"/> By Driver/Pieces		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	