

Bill Of Lading

Date: 2024/09/24								
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 160-2920 188th Street, Surrey, BC V3Z 0W5, CA SID#: _____ FOB: <input type="checkbox"/>	Bill Of Lading Number: MP24092418907229 7LBIO26S,88GDRO9Y,1SPV7HKW,8KFLQPHS 74UDMNX Y <div style="text-align: center;"> BAR CODE SPACE 31792130381 </div>							
SHIP TO Amazon YYZ3 7995 Winston Churchill Blvd., Brampton, L6Y 5Z4, CA CID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: Trailer number: _____ Seal number(s): SCAC: Pro number: <div style="text-align: center;"> BAR CODE SPACE </div>							
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 _____ <input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading							
CUSTOMER ORDER INFORMATION								
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP		
7LBIO26S, 74UDMNX Y, 8KFLQPHS, 1SPV7HKW, 88GDRO9Y	31792130381	7	245	245	5474.13 pounds	Y N		
GRAND TOTAL			ADDITIONAL SHIPPER INFO					
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M.	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE		(X)		NMFC#	CLASS
7	PALLETS	245	CARTONS	5474.1300LB		Round Electric Hot Pot		
							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). 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 _____		
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.	