

Bill Of Lading

Date: 2024/11/05	
SHIP FROM VEVOR VEVOR CA, +86 166 0183 9140 18 Kenview Blvd, Brampton, ON L6T 5S8, CA SID#: _____ FOB: <input type="checkbox"/>	Bill Of Lading Number: MP24110521069322 ICDHATTY,24RNEQYK BAR CODE SPACE 32645640171
SHIP TO Amazon YXU1 11884 Sunset Rd, St Thomas, N5P 0G9, CA CID#: _____ FOB: <input type="checkbox"/>	CARRIER NAME: Trailer number: Seal number(s): SCAC: 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 _____ <input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading
CUSTOMER ORDER INFORMATION	
CUSTOMER ORDER NUMBER	SHIPMENT ID
1CDHATTY, 24RNEQYK	32645640171
#PALLETS	#CARTONS
33	33
#EACHES	WEIGHT
402.81 pounds	Y N
PALLET/SLIP	GRAND TOTAL
Y N	ADDITIONAL SHIPPER INFO
CARRIER INFORMATION	
HANDLING UNIT	PACKAGE
QTY TYPE	QTY TYPE
33 CARTONS	402.8100LB
WEIGHT	H.M.
(X)	COMMODITY DESCRIPTION
Fiberglass baseball pitching net	LTL ONLY
<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#
CLASS	RECEIVING STAMP SPACE
GRAND TOTAL	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.
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.	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Shipper Signature _____ 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
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