

Bill Of Lading

Date: 2024/04/11		SHIP FROM				Bill Of Lading Number:MP24040910582092 218XDE5G					
VEVOR VEVOR CA, +86 166 0183 9140 11420 Blacksmith Place, Richmond, BC V7A 4X1, CA		SID#: _____		FOB: <input type="checkbox"/>		BAR CODE SPACE 28513588791					
SHIP TO		Amazon YYZ9 6351 Steeles Ave E, Scarborough, M1X 1N5, CA				CARRIER NAME:CEVA LOGISTICS Trailer number:					
CID#: _____		FOB: <input type="checkbox"/>		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)					
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> Prepaid				Collect		YES 3 rd Party _____			
		<input type="checkbox"/>				Master Bill of Lading with attached underlying Bills of Lading					
CUSTOMER ORDER INFORMATION											
CUSTOMER ORDER NUMBER		SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP				
218XDE5G		28513588791		1	1	15.45 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)	<i>*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)</i>			NMFC#	CLASS	
		1	CARTONS	15.4500LB		Chainsaw Guide					
									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>			