

# **BILL OF LADING** **SIERRA MOUNTAIN EXPRESS**

Sales Rep #

#MC207234  
US DOT 365516 CA# 84940

PLEASE REMIT TO: Box 966  
CONCORD, CALIFORNIA 94522-0966  
1-800-426-4255

Delivery Promised by:		Invoice #	
Night Drop OK YES NO	Driver <b>SHAUN</b>	Truck # <b>098</b>	

Shipper and Carrier agree that all shipments tendered under this Bill of Lading and Pre-Loading Inspection Report (Form No. 62.2) shall be transported under the terms and conditions set forth hereafter and in Carrier's tariff which is available to Shipper upon request. Shipments described hereafter were received in apparent good order, except as noted in Pre-Loading Inspection Report.

SHIP TO: West Coast Shipping  
ADDRESS 1065 Broadway Ave  
CITY, ZIP SAN PABLO CA 94806

ORDER # 4771 DATE: 4-5-11

PHONE  
CONTACT 1-305-635-1004

SHIP FROM: BRASHERS AA  
PORTLAND OR  
23885 NE SANDY BLVD  
CONTACT: PH# 503-492-9200

BILL TO: MAKMAL N America  
92 DOVERTAIL DR  
Richmond Hill, ON L4E5A7  
CONTACT VALANTINA PH# 416 840 5849

FAX 647 435-5876

## **VEHICLE DESCRIPTION**

EQUIPMENT TYPE USED ☐ OPEN ☐ ENCLOSED

CAR #	YEAR	MAKE	MODEL	COLOR	VIN # (last 8)	LICENSE #
1	<u>2007</u>	<u>Honda</u>	<u>CRU</u>	<u>BLACK</u>	<u>7C074771</u>	
2						
3						
4						
5						
6						
7						
8						
9						
10						

NOTE: DRIVER MUST INSPECT VEHICLES USING FORM NO. 62.2 - (PRE-LOADING AND INSPECTION REPORT) NOTING ALL DAMAGES AND SHORTAGES - GIVING A SIGNED COPY TO SHIPPER AS TO CONDITION WHEN IT WAS RECEIVED BY SIERRA MOUNTAIN EXPRESS.

Delivery Exceptions All Damage NOTED ON GATE Release AT Time of Pkg

Driver's Signature

Shaun Porty

Receiver's Signature

**Loss or Damage** - Carrier's liability for loss or damage to shipments and claims shall be governed by the terms and conditions of the Bill of Lading and Carrier's tariff, available upon request, but in no event shall Carrier's liability exceed \$50,000.

Freight Prepaid ☐

Carrier shall not make delivery without payment of transportation charges.

(Signature of Consignor)

1 Units @ \_\_\_\_\_ = \$ 250-

Other Charges \$ \_\_\_\_\_

**PAY THIS AMOUNT** \$ \_\_\_\_\_

Cash paid to \_\_\_\_\_

Shipper and Carrier hereby certify that they are familiar with the terms and conditions of this two-sided Bill of Lading and that said terms and conditions are hereby agreed to and accepted by Shipper and Carrier.

Shipper: \_\_\_\_\_

Carrier: \_\_\_\_\_

Per: \_\_\_\_\_

Per: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_