

Date: 2025-01-13		BILL OF LADING	
SHIP FROM		Bill of Lading Number: FBA18RXBFH6W	
David Hammons		Amazon PO Id: 42U5EOAG	
40828 FM149 RD		5 a U n c b ' F Y Z f Y b W ' B i a V Y f 34005334631	
MAGNOLIA, TX, 77354-1225		CARRIER NAME: ESTES EXPRESS LINES	
SHIP TO		SCAC: EXLA	
Amazon.com Services, Inc.		Pro number: _____	
6050 Gateway Court		THIRD PARTY FREIGHT CHARGES BILL TO:	
Groveport, OH, 43125-9016		Name:	
		Address:	
		City/State/Zip: AA	
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Prepaid _____ Collect ___✓___ 3 rd Party _____	
Shipment Details			
Total Cartons		228	
Num. Stackable Pallets		0	
Num. Unstackable Pallets		5	
Total Shipment Weight		4350 pounds	
Total Shipment Volume		338.889 cubic feet	
Freight Class		70.0	
Shipment Type		FTL/LTL	
Total Units		334	
Declared (Insurable) Value		2280.00 USD	
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value 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 checked="" type="checkbox"/> Prepaid: <input type="checkbox"/> Cust omer 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 / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		Shipper Signature	
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. Property described above is received in good order, except as noted.	