-	_
Docot	-orm
Reset	FULLI

-				
P	PI	n	ч -	



Bill of Lading

NOT NEGOTIABLE

Customer Service

DATE 02/18/2015

Shipper Name (FROM) Cloudy Heights Wellness Spa Supplies Street Address 2693 MacLaren Street				BOL Number 97480193 Purchase Order # 689821		Shipper's Number 51336				
						Quote Number				
City/Town O	ttawa		Province / State Ontario,	CA		Freight Cha	rges (Check	(One)	Enter Info Below	
Postal / Zip Cod K1F	le P 5M7	Phone #	613-750-4590		Prepai	d X Collect		Third Pa	arty	
Consignee Name (TO) Pure Harmony Spa				Bill to Name same as consignee						
Street Address	2995 Orenda Rd				Street Address					
City / Town	Brampton		Province / State Ontario,	CA	City / Town Province / State					
Postal / Zip Coo	le L6W 1Z2	Phone #	905-459-7306		Postal / Zip Code		Phone #			
Routing Inform		from cor	signee		Special Instructions	s (indly give us a ca	Il once item is re	eceived.		
# of Pieces	De	scrintion	of the Goods, Mark	e Everntion	ne	Weight in LBS. DANGEROUS GOODS			GOODS	
		- 15 T	-	•		a 2000	Class	P.I.N.		
10			cludes 1) Facial Ste		er News (children)	160	200	4052	22 111	
	CSA approved	• Auto :	shut-off • Adjustab	le height st	and					
	Sturdy 5 point base									
	- 2) Gas Lift Stool									
Available in White or Black										
Soft round cushion										
Total Pieces 30					Total Weight 1,600	Emer	Emergency Response Phone 222-222			
	Cube Factor						C	.O.D. Aı	mount	
	x x _						\$ 12,2	250.00	CDN US X	
Subject to 10 lbs per cubic foot or 1000 lbs per						C.O.D. Fee				
lineal foot used over 10 feet of trailer.					Prepaic	Prepaid Collect				
16,000 1.6						D	eclared	l Value		
Total Cu	be Total Lineal F	eet Used					*\$ 12	,250.00	CDN US X	
	isk, write or stamp here						unless a De additiona *Leave bl	clared Value al fee will be ank if waivin	ier is \$2.00 per pound is entered here (an charged for this). ig extra insurance	
contents in packa authorized route mutually agreed, to be performed h	oint shown on the date s ge unknown) marked, co or otherwise to cause to l as to each carrier of all or nereunder shall be subjec cepted for himself and hi	nsigned ar be carried l any of the t to all the	nd destined as indicated by another carrier on the goods over all or any po	above, whice route to said ortion of the ro	h the carrier agrees to co destination, subject to to oute to destination, and	arry and to deliver to the he rates and classificat as to each party at any	ne consignee at the ion in effect on the time interested in a	said destina date of the s ill or any goo	tion, if on its own hipment. It is ods, that every service	
Shipper Cloudy	Heights Wellness S	pa Supp	lies	Carrier Lte	dgzilla Xpress		Date 2/18/20	15	Number of Pieces Received	
			Per			Time 13:15hrs		30		