 **BILL OF LADING HOFFMAN IMPORTS LTD. STEVE 1-780-217-3848**

**Shipper Details: Hoffman Imports Carrier Details:**

- Name: - Carrier Name:

- Address: - Address:

- Phone: - Phone:

**Consignee Details: Shipment Details:**

- Name: - BOL Number:

- Address: - Date:

- Phone: - Mode of Transportation:

 - Special Instructions:

**Item Details:**

| Quantity | Description | Weight (lbs) | Dimensions (inches) |

**Shipper's Certification:**

- I, the undersigned shipper, certify that the information provided in this Bill of Lading is accurate and complete to the best of my knowledge.

Shipper's Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Carrier's Acknowledgment:**

- I, the undersigned carrier, acknowledge receipt of the above-described goods in good condition, as specified.

**Carrier's Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_