





Date: 03/16/2026		BILL OF LADING				Page: 1 of 1			
SHIP FROM				Bill of Lading Number: 06223560020102046					
Name: SharkNinja Sales Co Address: 16300 Fern Ave City/State/Zip: Chino, CA 91708 SID#: 7BE4691				 (402)06223560020102046					
SHIP TO				CARRIER NAME: JB HUNT RAIL					
Name: DHL MEGA CAMPUS NAVE1 Address: Avenida Recursos Hidraulicos No. 1 Entrada Sur, Nave 1 - DHL City/State/Zip: Nextlalpan, EM 55796 CID#: null				Trailer number: 5303 Seal Number 371124					
THIRD PARTY FREIGHT CHARGES BILL TO				SCAC: HJBI Pro number: 80674743					
Name: Address: City/State/Zip:									
				Freight Charge Terms: <input type="checkbox"/> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading					
SPECIAL INSTRUCTION: LOAD ID #: 7BE4691									
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT LBS	PALLET/SLIP	Must Deliver by Date	5 Digit Destination#	4 Digit PO TYPE	5 Digit Dept #	Additional Shipper Info	
1292026SL201	1050.0	26071.5	Y N		MX1B2B			Model #: SL201, UPC: 622356635202	
GRAND TOTAL	1050.0	26071.5							
CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT LBS	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE					NMFC #	CLASS
	PALLET	1050.0	CARTON	26071.5		ItemIndex.Description Model #: SL201, (1 UNIT/MC)		26720-1	175
31		1050.0		26071.5					
Where the rate is independent 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 _____ per _____.						COD Amount: \$ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 1406(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/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 Department of Transportation.				Trailer Loaded:		Freight Counted:		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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.	
				<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper	<input type="checkbox"/> By Driver/pallets said to contain		
Driver Name:				APPT	Check In	Check Out	Received in good order BY/DATE		

California USA COMMERCIAL DRIVER LICENSE

	DL A9527445	CLASS A
	EXP 06/24/2029	END NONE
LN GUIZAR VALENCIA		
FN JUAN M		
714 E SHAMROCK ST RIALTO, CA 92376		
DOB 06/24/1976	0824197	
RSTR NONE		
SEX M	HAIR BL	EYES BRN
HGT 5-07"	WGT 225.15	ISS 04/29/2024
DD 04/29/2024 65728/CCFD/29		