

**Bill to:**

C&M FORWARDING CO INC
45 JETVIEEW DR ,
Rochester,
NY,
14624

Invoice Date: 07/07/2023

Invoice #: 231266

Terms: NET 30

Due Date: 08/07/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/06/2023		1645 Lyell Ave, Rochester, NY 14606, USA - 219 Commerce Drive, Mount Vernon, OH, USA			
			1	1000	1000

TOTAL
1000

PLEASE NOTE

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS)
and all payments hereunder are to be directed to the assignee at the address noted below.

Remittances to other than CFS do not constitute payment of this invoice. CFS must be given
notification of any claims, agreements or merchandise returns which would affect the payment
of all or part of this Invoice on the due date.

COMPASS FUNDING SOLUTIONS LLC

P.O.BOX 205154

DALLAS, TX 75320-5154

Tel: 844-899-8092



Carrier Confirmation

Carrier: ZIGI FREIGHT INC
DBA ROYAL 3 INC
CHICAGO, IL 60638
Tel:
MC#: 944686
Email:
Pickup at: NEWTEX INDUSTRY
8050 VICTOR MENDON RD
VICTOR, NY 14564
Pickup Date/Time: 07/06/23 16:00

Bill To: C&M FORWARDING
3457 UNION ST
NORTH CHILI, NY 14514

(585) 279-0770

Carrier Rate: \$1000

Reference Number: 231266
Equipment Type:
Hazmat Load: NO
Temp Code:
Miles: 346
Route/Manifest#:
Driver Phone#: () -
Notes: ACTUAL PICK UP IS NEWTEX
INDUSTRIES 1645 LYELL
AVE ROCHESTER NY 14606

Stop 1

MAUSER USA
219 COMMERCE DR

MOUNT VERNON, OH 43050

Delivery Date: 07/07/23
Delivery Time: 08:00-15:00

Shipments: 1

Weight: 20000 lb

Seal#

ALL POD'S & INVOICES MUST BE RETURNED TO ACCOUNTSPAYABLE@CMFORWARDING.COM WITHIN 30 DAYS OF DELIVERY IN ORDER TO RECEIVE TIMELY PAYMENTS

NOTE: Driver will be given a seal for each stop. Load must be sealed at all times. If your driver fails to seal a trailer, you will be subjected to a rate reduction and all costs associated with the failure to comply.

LOAD TENDERED IS FOR EXCLUSIVE USE OF TRUCK UNLESS OTHERWISE SPECIFIED AND AGREED UPON IN WRITING WITH C & M FORWARDING.

Service failure may be subject to rate reduction. There is no detention on loading at C & M Forwarding.

Driver needs to call 800-295-5534 when unloaded otherwise a \$25.00 fee per occurrence will be charged.

Payment Requirements: Original signed Bill of Lading; Proof of Deliveries; LOAD/RATE Confirmation

Payment Requirements for loads that require handling or lumper – Driver must call 800-295-5534 for approval and submit all of the above plus signed bills indicating lumper or handling was required or preapproved lumper receipt.

BY ACCEPTING THIS LOAD, YOU AGREE TO THESE TERMS

Carrier/Driver Name: _____

Cellular #: _____

Carrier/Driver Signature: Asta Mijad

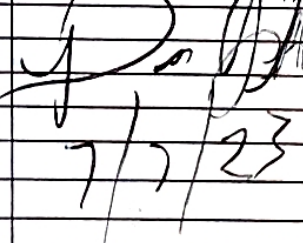
Trailer #: _____

Driver Time In: _____

Driver Time Out: _____

SHIP FROM		Bill of Lading Number: _____	
Name: NEWTEX INDUSTRIES INC.		BAR CODE SPACE	
Address: 1645 LYELL AVENUE			
City/State/Zip: ROCHESTER NY 14606		CARRIER NAME: <u>ROYAL 3</u>	
SID#: _____		Trailer number: _____	
FOB: <input type="checkbox"/>		Seal number(s): _____	
SHIP TO		SCAC: _____	
Name: MAUSER USA		Pro number: _____	
Location #: _____		BAR CODE SPACE	
Address: 219 COMMERCE DRIVE			
City/State/Zip: MOUNT VERNON OH 43050		Freight Charge Terms: <i>(freight charges are prepaid unless marked otherwise)</i>	
CID#: _____		Prepaid _____ Collect _____ 3 rd Party _____	
THIRD PARTY FREIGHT CHARGES BILL TO:		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Name: C & M FORWARDING		(check box)	
Address: _____			
City/State/Zip: _____			
SPECIAL INSTRUCTIONS: _____			

CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
MV32122	16	20,000	<input checked="" type="radio"/>	N	300 OEM MG IBC HEAT SHIELD COMPLETE	
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
GRAND TOTAL	16	20,000				

HANDLING UNIT		PACKAGE		CARRIER INFORMATION			COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360		NMFC #	CLASS	
							DEL IN: 7:20 AM			
							OUT: 8:27 AM			
GRAND TOTAL										

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: ☐ Prepaid: ☐
Customer check acceptable: ☐

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

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.

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☐ 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.