

Bill to:

NEX, INC.dba NEW ENGLAND EXPEDITORS 9725 WOODS DR , Skokie,

IL,

60077

Invoice Date: 08/15/2023

Invoice #: 1936 Terms: NET 30 Due Date: 09/15/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/14/2023		4363 Route 104, Williamson, NY 14589, USA - 4043 West 52nd Place, Chicago, IL 60632, USA			
			1	1500	1500

TOTAL	
1500	

## 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

## Rate & Load Confirmation

**New England Expeditors** 

9725 Woods Dr Skokie, IL, USA 60077 Phone: 630-568-6714

Fax:

Dispatcher:	Nelly M	LOAD#	1936
Phone #:	630-568-6714	Ship Date:	2023-08-14
Fax #:		Today's Date:	2023-08-14
Email:	operations@freight-lab	net	
W/O:	70216		

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
Riki Transportation INC dba BRZ	708-303-5150 x110		53' Van	\$1,500.00 USD	Open

Shipper 1 Date: 2023-08-14 Purchase Order #: P/U 846624259/74022573

MOTTS, INC/WILLIAMSON Time: 9:00 AM Major Intersection: 4363 Route 104 Type: TI Shipping Hours:

Williamson, NY, 14589

Type: TL Shipping Hours:

Quantity: Appointment: No

Weight: 42000 lbs Description: dry food on pallets

Notes: BLIND! CHECK IN AS BMM Logistics and ask for a load to

Sumner, WA

Consignee 1 Date: 2023-08-15 Purchase Order #: 70216

New England Expeditors

4043 W 52nd Place
Chicago, IL, 60632

Time:
8:00 AM
Major Intersection:
Receiving Hours:
Appaintments

Quantity: Appointment: No

Weight: 42000 lbs Description: dry food on pallets

Notes: can DEL 8am-5pm

Carrier Pay: Line Haul: \$1500.00, TOTAL: \$1500.00 USD

Accepted By: Milo Morrison Date: 8-14-2023 Signature: Milo Morrison

**Driver Name:** Jordan **Cell #:** 708 488 7038 **Truck #:** 804 **Trailer #:** 155279

DON'T PUT TRUCK#, TRAILER#, YOUR COMPANY NAME OR ANY OTHER INFORMATION ON BOL!

Only if the shipper asks to put truck and trailer # you can do that

Please confirm the freight is on pallets before leaving the site

CARRIER MUST SEND PICTURES OF BOL, FREIGHT AND SEAL IMMEDIATELY AFTER PICK UP OTHERWISE \$100 CHARGE WILL BE APPLIED

Date:			BILI	BILL OF LADING	ADI	NG rage I of
	SHIP FROM	MC			B	Bill of Lading Number: 70216
Name: MOTTS, INC/WILLIAMSON	MSON					
Address: 4363 Route 104	0177					BAR CODE SPACE
City/State/zlp. Williamson, N.t., 14509 SID#:	1, 1430	D		FOB:		
	SHIP TO	0				CARRIER NAME: RIKI Transportation INC dba BRZ
Name: New England Express, Inc.	s, Inc.	Locat	Location #:	1	<u> </u>	Trailer number:
Address: 4043 W 52nd Pl.					Sea	Seal number(s):
City/State/Zip: Chicago, IL 60632	1632					10:
CID#:				FOB:		Pro number:
THIRD PARTY FREIGHT CHARGES BILL TO:	REIGHT (	HARGES	BILL TO:			
Name						
Address:						
City/State/Zip:					Frei	Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
SPECIAL INSTRUCTIONS:					Prepaid	
					ਹ)	☐ Master Bill of Lading: with attached underlying check box) Bills of Lading
CUSTOMER ORDER NUMBER	H	# PKGS	CUSTOME	CUSTOMER ORDER INFORMATION WEIGHT PALLET/SLIP	INFORM/ T/SLIP	AUTON ADDITIONAL SHIPPER INFO
			42000	<b>/</b>	ý z	dry food on pallets
				>	z	
				>	z	RECEIVED BY
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				<b>&gt;</b>	z	Sign
				<b>&gt;</b>	z	Date \$ 115 18
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GRAND TOTAL						
HANDLING UNIT PACKAGE			CARF	CARRIER INFORMATION	RMATION	TO POSSESSION OF THE POSSESSIO
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		5		marked and	See Sec	marked and packaged as to ensure safe transportation with ordinary care.  See Section 2(e) of NMFC Rem 360
						RECEIVING
						STAMP SPAC
ife the rate is dependent on all					Ę.	GRAND TOTAL
declared value a rependent of value, shippers are required to state specifically in writing the agreed or The agreed or declared value of the property is specifically stated by the shipper to be not exceeding	erequired to ecifically sta	state specifica	ally in writing the	agreed or eeding		COD Amount: \$ Fee Terms: Collect: □ Prepaid: □
TE Liability Limitation for loss	or dam	and in this	chimmont	1		Customer check acceptable: □
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 sestablished by the carrier and are available to the shipper, on request, and to all applicable state and deben	s or contract wise to the shipper, on r	ts that have be rates, classific request, and to	en agreed upon i ations and rules i all applicable sta	may be ap n writing hat have been te and federal		RECEIVED, subject to includually determined rates or contracts that have been agreed upon in writing the carrier and shipper, if applicable, otherwise to the rates, classifications and frederal metal and are available to the shipper, on request, and to all applicable state and frederal metal metal metal and a sequence of the shipper. The carrier and are available to the shipper, on request, and to all applicable state and frederal metal metal metal.
SHIPPER SIGNATURE / DATE		Trailor I anded	T. John			Shipper Signature
This is to certify that the above named malerials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	dassified, or or oor.	By Shipper By Driver		By Shipper	: 	CARRIER SIGNATURE / PICKUP DATE Garrier acknowledges receipt of packages and required placands. Carner certifies envelopely prepares information was made and explicitly confirmed that the DOT envelopely response outlebook or equivalent documeration in the authority
				By Driver/Dallets said to contain	allets said	
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