

**Bill to:**

SOUTHLAND BROKERAGE COMPANY, INC.
7925 U.S. HIGHWAY 601 ,
Boonville,
NC,
27011

Invoice Date: 08/18/2023

Invoice #: 834278

Terms: NET 30

Due Date: 09/18/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/16/2023		1005 Commercial Dr, Owensville, MO 65066, USA - 1100 Schwab Rd, Hatfield, PA 19440, USA			
			1	2750	2750

TOTAL
2750

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



Southland Brokerage Co., Inc.
CINCINNATI, OH OFFICE
PO BOX 99 BOONVILLE, NC 27011
Local: (336) 551-7010
FID 56-2010528 MC 364070 B

Order #: 834278

Carrier Confirmation

Carrier Information

BRZ
8225 Leclair Ave
BURBANK, IL 604592734

Contact: Ana
Phone: 708-303-5150
Fax:
Email:

Stop Information

Load At

LSC COMMUNICATION
1005 COMMERCIAL DR
OWENSVILLE, MO65066
Directions:

Mileage:

Earliest date: 08/16/23 10:00
Latest date: 08/16/23 10:00

Stop Notes:

***DRIVER MUST CHECK IN AS SOUTHLAND ***
PU# 106713497 / 106713330

Deliver To

FOX GROUP
1100 SCHWAB RD
HATFIELD, PA19440
Directions:

Mileage: 960

Earliest date: 08/18/23 10:00
Latest date: 08/18/23 10:00

Stop Notes:

Upon delivery, send copy of POD to
cintracking@sltrans.com

Load Summary

Load Stop Count: 2

PCS 43,500 LBS

Load Miles: 980

Trailer Type: VAN OR REEFER

Pay Information

Description	Quantity	Rate	Unit	Amount
BROKERAGE CARRIER PAY	1	\$2,750.00	FLT	\$2,750.00
Total Pay:				\$2,750.00

CARRIER TERMS:

DISPATCH:

Upon dispatch, the DRIVER must accept PROJECT44 (P44) tracking. Tracking must be used via the phone text message or through the P44 App. Failure to allow P44 tracking will result in NON-PAYMENT of any detention or layover fees incurred. DRIVERS MUST CALL (336) 551-7010 WITH BILL OF LADING INFORMATION UPON PICKUP. DRIVERS are responsible for number of pieces count stated on the BOL

RATE ACCEPTANCE:

The payable rate quoted by BROKER: SOUTHLAND BROKERAGE COMPANY to the below Signed CARRIER is acknowledgement of the rate assessed for this shipment. This agreement becomes an addendum to the CARRIER/BROKER Agreement and by accepting this shipment at the rate quoted, the CARRIER agrees to hold harmless the Shipper, Consignee, and BROKER for any billings in excess of quoted rate. Fuel surcharges are included in the quoted rate.

PAYMENT and PAPERWORK:

All Carrier Payments are now processed through **TriumphPay.com**

Go to secure.TriumphPay.com Carrier Portal to register online to receive payments:

All paperwork associated for the load will need to be uploaded on the TriumphPay carrier portal to receive payment for loads Paperwork can also be emailed to carrierinvoice@sltrans.com if the website is not available.

- Go to www.secure.TriumphPay.com
- Register your company
- Connect with Southland
- Add your payment information
- Control your money!



Get Paid Now!

Login to TriumphPay.com to set up your default payment method.

BROKER: SOUTHLAND BROKERAGE CO.

CARRIER: BRZ



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CINCINNATI, OH OFFICE
PO BOX 99 BOONVILLE, NC 27011
Local: (336) 551-7010
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Order #: 834278

Carrier Confirmation

BY: _____
CINCINNATI, OH Dispatcher

BY: _____


TITLE: _____

DATE: _____

ATTENTION CARRIERS: Upon dispatch, the DRIVER must accept PROJECT44 (P44) tracking through the phone text message or through the P44 App. Also, the proper procedures needed to allow tracking must be followed to allow successful tracking. Failure to download and accept tracking via P44 will result in NON-PAYMENT of any detention or layover incurred on this load.

Date: 8/16/23		19:06:50		BILL OF LADING		Page: 1 OF 2	
SHIP FROM				Bill of Lading Number:			
Name: LAKESIDE BOOK COMPANY Address: 1005 COMMERCIAL DRIVE City/State/Zip: OWENSVILLE, MO 65066 SID#: _____ FOB: <input checked="" type="checkbox"/>				593000358620			
SHIP TO				Carrier Name: DLS/			
Name: FRANK PINZKA Address: FOX GROUP, INC 1100 SCHWAB ROAD HATFIELD, PA USA 194400000 City/State/Zip: _____ CID#: _____ Telephone: 215-538-5380 Location #: _____ FOB: <input type="checkbox"/>				Trailer number: 593000358620 Seal number(s) 9221022			
FREIGHT CHARGES BILL TO:				SCAC: DRRG			
Name: _____ Address: LSC COMM MCL, LLC DBA ENRU 1000 WINDHAM PARKWAY BOLINGBROOK, IL USA 604900000 City/State/Zip: _____				Pro number:			
SPECIAL INSTRUCTIONS:				Freight Charge Terms: (freight charges are prepaid unless marked otherwise)			
MANIFEST 106713330				Prepaid _____ Collect _____ 3 rd Party <u>X</u> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
Sig 001	241452	42496	Y N	00024937950 9744320230400230	
			Y N		
			Y N		
			Y N		
			Y N		
GRAND TOTAL	241452	42496			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
19		241452		42496		BOOK PAGES (SIGNATURES)  Walter Wheaton 8-18-23	161540	55
19		241452		42496		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: <input type="checkbox"/> Prepaid: <input type="checkbox"/>
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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 tariffs, classifications or contracts in effect on the date of issue of this bill of lading

SHIPPER SIGNATURE / DATE TANGELIA KETCHERSIDE LSC Communications US, LLC <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.</small>		Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / PICKUP DATE <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.</small>
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