



**Bill to:**  
PIONEER LOGISTICS SYSTEMS, INC.  
1 MAPLE STREET UNIT #4 ,  
East Rutherford,  
NJ,  
07073

Invoice Date: 09/14/2023  
Invoice #: 119641  
Terms: NET 30  
Due Date: 10/14/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
09/13/2023		2900 Cindel Drive, Delran, NJ, USA - 4890 Spring Grove Avenue, Cincinnati, OH, USA			
			1	1100	1100

TOTAL
1100

**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**

**Pioneer Logistics Systems, Inc.**  
123 NW 13th St., Suite 307  
Boca Raton, FL 33432  
Phone: 201-460-7400 Fax: 561-368-2774

**Order #: 119641**  
**\* Must Appear on ALL Documentation \***

**Date - 09/12/23 Time - 16:17:26**

**Contract of Carriage**

**\*\*\* Carrier to provide the following information \*\*\***

**Carrier:** BRZ **Driver:** Fernando **Truck #:** 834  
**Contact:** Edith Taylor **Phone:** 786-260-6514 **Trailer #:** w94938  
**Phone:** 708-852-5664 **VIN:**  
**Email:** edith@rtbrz.com

**Customer Requirements**

- No Stacking Pallets or Turning pallets AT ANY TIME! There will be a \$100.00 Fine per Pallet if these instructions are ignored!
- All Load Confirmation agreements must be signed and returned prior to pickup of Pioneer Logistics loads. If not, Shipment will be cancelled.
- Driver MUST send clear and complete photos of all pages of the POD within 4 hours of delivery. If not, penalties will apply.
- ALL LOADS TO BE DELIVERED TO ADDRESS ON BILL OF LADING - NO EXCEPTIONS!!!

**Pick Up**

CTX **Date:** 09/13/23  
2900 CINDEL DRIVE **Load Time:** 0800  
DELRAN, NJ **Pick Up #:**  
**Phone:**

**Commodity:** ROLLS PAPER **Quantity:** 21 SKIDS **Weight:** 41358 **Class:** **Ref:**

**PO #:** 70001884592

**Additional Information:** P/U FCFS 0800-1500. DELIVERY NEXT DAY B 9-10 AM NO EXCEPTIONS

**Special Instructions:**

**Deliver To**

UNITED ENVELOPE **Date:** 09/14/23  
4890 SPRING GROVE AVENUE **Del Time:** 0900  
CINCINNATI, OH 45232 **Appt #:**  
**Phone:** (513) 542-5260 Ext.

**Commodity:** ROLLS PAPER **Quantity:** 21 SKIDS **Weight:** 41358 **Class:** **Ref:**

**Pioneer Logistics Systems, Inc.**  
123 NW 13th St., Suite 307  
Boca Raton, FL 33432  
Phone: 201-460-7400 Fax: 561-368-2774

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**Date - 09/12/23 Time - 16:17:27**

## Contract of Carriage

### Terms & Conditions

1. This load CAN NOT be double brokered.
2. Carrier agrees that it will not contact Pioneer Logistics customer's shipper or consignee for any reason and will look solely to Pioneer Logistics, Inc. for all and any payments owed to the carrier.
3. Drivers/dispatchers are responsible to notify Pioneer Logistics IMMEDIATELY of any problems, delays, rescheduling, etc. Any changes made to pick up or delivery time and/or date without prior notification will result in fines up to \$100.00 / day plus fines for late delivery!
4. All Drivers MUST notify Pioneer Logistics of any shortages, overages, or damages at the time of occurrence.
5. In the event of a possible claim, DO NOT LEAVE CLAIM SITE! Pioneer Logistics MUST be notified IMMEDIATELY!
6. Carrier agrees to 2 free hours of loading or unloading. Additional rate is \$35/hour. Pioneer Logistics must be notified immediately of any delay. If not, reimbursement will not apply. Original BOL's must be signed by receiver with TIME IN & TIME OUT.
7. Accessorial fees MUST be reported and approved by Pioneer Logistics in writing at the time of occurrence.
8. Any carrier with Auto insurance other than ALL AUTO, the VIN provided must match exactly. If not, Pioneer Logistics will be exempt from any liability pertaining to this load.

This agreement is subject to the terms of the Broker Carrier Agreement executed between our companies and this constitutes an addendum to the Agreement. If Carrier has not signed a contract with Pioneer Logistics Systems, Inc., the rate shown is the agreed individually determined rate. This rate is inclusive of all rate charges. Written (fax/email) objection to terms of this confirmation must be received within 24 hours of receipt of this confirmation but in no event after pick up of the load, or you will have agreed to these terms. All freight is time dated expedited material. Verbal POD required. Carrier shall maintain all risk cargo insurance in the amount of not less than \$100,000.00 per shipment. Carrier shall maintain public liability insurance in the amount of not less than \$1,000,000.00. Carrier shall maintain workers compensation insurance as required by state law. Carrier shall provide proof of insurance upon request. Carrier's cargo insurance policy must not exclude from coverage any commodities or cargo carried on this load. If Carrier's insurance policy contains a schedule of covered vehicles or equipment, Carrier WILL NOT transport any cargo on this load using a vehicle and/or equipment not listed as scheduled on Carrier's insurance policy.

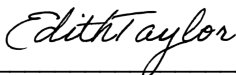
### Invoicing Requirements

**ALL ORIGINAL PODS MUST BE MAILED WITH  
INVOICE TO PROCESS PAYMENT**

**MAIL Invoices, Rate Confirmation & Original POD's to:**

**Pioneer Logistics Systems, Inc.**  
123 NW 13th St., Suite 307  
Boca Raton, FL 33432  
(561) 368-2774  
danapioneer@me.com

**Carrier:** BRZ  
**Confirmed Linehaul Rate:** 1100.00

Carrier Representative Signature: 

# Bill of Lading

Ship From:  
CTX C/O UNITED  
2900 CINDEL DRIVE  
DELRAN NJ 08075

SID#:

☐ FOB

Ship To:

Location No:

United Envelope-CIN  
4890 Spring Grove Avenue  
Cincinnati, OH 45232

CID#:

☐ FOB

Third Party Freight Charges - Bill To:

Date: 12-September-2023

Bill of Lading No: 70001884592

BARCODE SPACE

Carrier Name: PIONEER

Trailer No:

Seal Number(s):

SCAC:

Pro No:

BARCODE SPACE

Freight Charge Terms (prepaid unless marked otherwise)

☐ Prepaid ☐ Collect ☒ 3rd Party

☐ Master BOL: w/attached underlying BOLs

Special Instructions:

## Customer Order Information

Customer Order No.	# Pkgs.	Weight	Pallet/Slip (Y/N)	Additional Shipper Info
30327150	21	41358	Y	21 PACKAGES CONTAINING 69 ROLLS 50# WMBURG WHWB SMTH

Totals 21 41358.00

## Carrier Information

Handling Unit QTY	Package TYPE	Weight	H.M. (X)	Commodity Description	LTL Only NMFC No.	Class
				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>See Section 2(e) of NMFC Item 360</small>		
				JAMES M. HELD 9-14-23 HELD		

Totals

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 \_\_\_\_\_"

FOB

COD Amt. \$ \_\_\_\_\_

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 \_\_\_\_\_

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 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.

Shipper Signature \_\_\_\_\_

Date \_\_\_\_\_

Carrier Signature \_\_\_\_\_

Pickup Date \_\_\_\_\_