



Bill to:
WHEAT STATE UNLIMITED
7417 WINDSOR ST,
PRAIRIE VLG,
KS,

Invoice Date: 11/30/2023
Invoice #: 139452
Terms: NET 30
Due Date: 12/30/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
11/29/2023		Orrick, MO, USA - Houston, TX, USA			
			1	\$2,550.00	\$2,550.00

TOTAL
\$2,550.00

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



LOAD CONFIRMATION: TRIP-41375

Wheat State Unlimited
10540 Marty Suite 230
Overland Park, KS 66212
USA
Tel: (913) 229-3600
Fax: (913) 229-3601

Carrier: ROYAL 3 INC (ZIGI FREIGHT)
Attention: joey
Equip. Req.: Van
Phone: (321) 465-5667

<Contract Advertisement>

Shipment 1

PRO-139452

Pickup Date:	Nov 29, 2023	Delivery Date:	Nov 30, 2023
Commodity:	AIR VENTS; skids; 20,000.00 lbs		
Shipper:	AIR VENT-ORRICK 418 E NORTH FRONT ST ORRICK, MO 64077 (816) 770-3315	Consignee:	BEACON - HOUSTON 1031 Bammel RD HOUSTON, TX 77073 (936) 441-7727
Pickup Note:	SO#908243PO#4200167621 PO#1438748 -- 0800-1500 FCFS	Receiving Info:	0700-1400 FCFS - M-F
		Delivery Note:	-- 0700-1400 FCFS - M-F

In case of delays or problems, please call WES SEWELL at (913) 229-3600

Charge Description	Amount
3RD PARTY FREIGHT	\$2,550.00
USD Total	(All Inclusive Rate - INCL FUEL SURCHARGES) \$2,550.00
Signature: <u>Joey Cimbaljevic</u>	Date: <u>11/29/2023</u>
Carrier Pro#: _____	Driver's Cell#: _____

PLEASE SIGN and fax back to (913) 229-3601 or email to wsewell@teamwsi.com

*****CRITICAL NOTES*****

POD and INVOICE MUST BE EMAILED to billing@teamwsi.com within 72 hours of delivery - OR A \$72 PENALTY WILL BE DEDUCTED FROM A CARRIER'S SETTLEMENT.

Wheat State Unlimited load confirmation number must appear on Carriers invoice.

Problems and delays must be reported to dispatch@teamwsi.com immediately.

Loads picked up or delivered late will be subject to a \$250 late fee.

Payment is issued 30 days from receipt of carrier invoice and proof of delivery.

TRIP-41375

BILL OF LADING

SHIP FROM	
Name:	AMERICAN WILCON
Address:	418 NORTH FRONT STREET
City/State/Zip:	ORRICK, MD 64077
SID#:	FOB: <input type="checkbox"/>

Bill of Lading Number: 07157510000547345



(402) 07157510000547345

SHIP TO	
Name:	BEACON BLDG 800-HOUSTON Location #:
Address:	PO # 1438748, 1031 BAMEL RD
City/State/Zip:	HOUSTON, TX 77073
CID#:	919.693-1141 FOB: <input type="checkbox"/>

CARRIER NAME: Wheat State

Trailer number: W94430

Seal number(s): S444W854

SCAC: WSUI

Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:	
Name:	
Address:	
City/State/Zip:	
SPECIAL INSTRUCTIONS:	

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect ☐ 3rd Party ☐☐ Master Bill of Lading: with attached underlying Bills of Lading
(check box)

CUSTOMER ORDER INFORMATION						ADDITIONAL SHIPPER INFO
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)			
PO#PO#4200167621	840	20160.0 lbs	Y	N	SO#908243	
			Y	N		
			Y	N		
			Y	N		
			Y	N		
GRAND TOTAL	840	20160.0 lbs				

HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	NMFC #	CLASS
		840	ctns	20160.0 lbs		156600	150
		840		20160.0 lbs		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.

Signature _____ Shipper

SHIPPER SIGNATURE / DATE 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. BBlyth 11-29	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. 9/29
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BOL Text: _____ **Appt:** _____ **IN:** _____ **OUT:** _____
DELIVERY BY APPOINTMENT ONLY 7AM-3pm MON-FRI. Call Jamie
Partida at 972-875-4401

BOL#



54734

Date: November 28, 2023

BILL OF LADING

Page 1

SHIP FROM

Name: AMERICAN WILCON
Address: 418 NORTH FRONT STREET
City/State/Zip: ORRICK, MO 64077
SID#:

FOB: ☐

SHIP TO

Name: BEACON BLDG 800-HOUSTON Location #:
Address: PO # 1438748, 1031 BAMMEL RD
City/State/Zip: HOUSTON, TX 77073
CID#: 919-693-1141

FOB: ☐

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

SPECIAL INSTRUCTIONS:

Bill of Lading Number: 07157510000547345



(402) 07157510000547345

CARRIER NAME: Wheat State

Trailer number: W944930

Seal number(s): S4440854

SCAC: WSUI

Pro number:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect ☐ 3rd Party ☐☐ 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

PO#PO#4200167621

840

20160.0 lbs

Y

N

SO#908243

Y

N

Y

N

Y

N

Y

N

GRAND TOTAL

840

20160.0 lbs

CARRIER INFORMATION

HANDLING
UNIT

PACKAGE

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

840

ctns

20160.0 lbs

Cartons of Plastic or Rubber Articles

156600

150

840

20160.0 lbs

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

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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above received in good order, except as noted.

SHIPPER SIGNATURE / DATE

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.

Trailer Loaded:

☒ By Shipper
☐ By Driver

Freight Counted:

☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

BOL Text:

Appt:

IN:

OUT:

DELIVERY BY APPOINTMENT ONLY 7AM-3pm MON-FRI. Call Jamie
Partida at 972-875-4401

BOL#



54734

Luis Torres
11-30-23