



Bill to:
FREIGHT MANAGEMENT TEAM INC
PO BOX 460,
,
AVON,
OH

Invoice Date: 12/08/2023
Invoice #: 35448
Terms: NET 30
Due Date: 01/08/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/06/2023		66081 N 2541 Rd, Watonga, OK, USA - 117 North Ave, Youngstown, OH 44502, USA			
			1	\$2,400.00	\$2,400.00

TOTAL
\$2,400.00

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

Rate & Load Confirmation

Freight Management Team Inc

PO Box 460
Avon, OH, USA 44011
Phone: 216-862-0187
Fax: 216-862-0368

Dispatcher:	Chuck L	LOAD #	35448
Phone #:	216-862-0187	Ship Date:	12/06/2023
Fax #:	216-862-0368	Today's Date:	12/05/2023
Email:	chuckfmteaminc@gmail.com		
W/O:			

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
Royal 3 inc	630-485-7370 x108		Van	\$2,400.00 USD	Covered

Shipper 1 US Gypsum 1 Oklahoma 51A Southard, OK, 73770 Phone: 580-822-6129	Date:	12/06/2023	Purchase Order #:	8064, SOU5528224
	Type:	tl	Major Intersection:	
	Quantity:	11	Shipping Hours:	8am-6pm fcfs
	Weight:	44880 lbs	Appointment:	No
	Notes:	PU Appt: 6 pm: Driver must text us pictures of load bars securing freight.		
Shipper Notes:		Pallets are loaded 5, then 6ft gap, then 6 pallets: pallets are 43 inches long, 53 inches wide. Use load bars and straps to secure the freight.		

Consignee 1 Fireline Inc (New) 117 North Ave Youngstown, OH, 44502 Phone: 330-553-9840	Date:	12/08/2023	Purchase Order #:	
	Type:	tl	Major Intersection:	
	Quantity:	11	Receiving Hours:	8-3:30 fcfs (Must provide
	Weight:	44880 lbs	Appointment:	No
	Notes:	8-2 fcfs: Make sure you deliver to the address on my rate sheet. The address for delivery on the BOL might be wrong.		
		Description: Driver to use load bars/straps to secure freight: if you arrive at the receiver without it secured you will be rejected		

Dispatch Notes:

This serves as an addendum to the Carrier Agreement on file. Carrier warrants that the driver assigned to this load has sufficient hours of service available and will not violate FMCS regulations. Failure to deliver on time will result in a minimum rate reduction of twenty five percent. Any additional charges must be authorized by Freight Management Team Inc at the time they are incurred. This agreement is null and void if the shipment is double-brokered. Carrier recognized this agent as intermediary and agrees not to solicit Shipper/Principal/Consignee. Carrier must supply the original BOL, original signed delivery receipt and signed rate confirmation. *All invoices must be mailed to PO BOX 460, Avon OH 44011.* The carrier will be compensated based on the agreed amount minus charges associated with the recovery of the shipment as determined by the Principal and/or Freight Management Team Inc. Carrier shall not withhold any goods of the customer on account of any dispute as to rates or any alleged failure of Freight Management Team Inc to pay charges incurred hereunder. DOD/Govt load requirements: \$150,000 cargo insurance: Ability to load/unload on military base: Must pass a US Citizens Background Check. **CONVICTED FELONS OR ANYONE WITH DRUG RELATED CHARGES WILL NOT BE PERMITTED ACCESS TO United States Military Bases. Govt provided BOL must be used as a proof of delivery to be paid.**

Carrier Pay: Line Haul: \$2400.00, **TOTAL: \$2400.00 USD**

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PO Box 460
Avon, OH, USA 44011
Phone: 216-862-0187
Fax: 216-862-0368

Dispatcher:	Chuck L	LOAD #	35448
Phone #:	216-862-0187	Ship Date:	12/06/2023
Fax #:	216-862-0368	Today's Date:	12/05/2023
Email:	chuckfmteaminc@gmail.com		
W/O:			

Accepted By: _____ **Date:** _____ **Signature:** _____

Driver Name: _____ **Cell #:** _____ **Truck #:** _____ **Trailer #:** _____

Corporate Office
550 West Adams St.
Chicago, IL 60661-3665

BILL OF LADING

Carrier Copy

BILL OF LADING NUMBER
000010071662

ORDER #	CUSTOMER P.O.	TRIP ID	SHIP DATE	SCHEDULED DELIVERY DATE	SCHEDULED DELIVERY TIME	STOP #
11045057	6980-00	SOU5528224	12/06/23	01/31/24	08:00:00 AM - 04:00:00 PM	STOP 01 OF 01

LINE#	ITEM		SHIPPING QTY		SKU	PRODUCT DESCRIPTION / COMMENTS	LENGTH		PRICING QTY	SALES UOM	# UNITS/ PALLETS	WEIGHT (LBS)
	COMMODITY	SFX	COUNT	UNITS			FT	IN				

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BILL TO	SHIP TO	REMARKS / SPECIAL INSTRUCTIONS
FIRELINE INC 8560 FOXWOOD CT YOUNGSTOWN, OH, 445144301	FIRELINE INC 300 ANDREWS AVE YOUNGSTOWN, OH, 44505	

PLANT	CARRIER	CUSTOMER PICK UP	VEHICLE#	29473
Southard UNITED STATES GYPSUM COMPANY Hwy 51A Southard, OK, 73770-9705	SCAC	9CPU	MODE	Customer Pick Up
	FREIGHT TERMS	PKUP/CL	SEAL	0249972
			CONTAINER#	

LINE#	ITEM	SHIPPING QTY	SKU	PRODUCT DESCRIPTION / COMMENTS	LENGTH	PRICING QTY	SALES UOM	# UNITS/PALLETS	WEIGHT (LBS)
COMMODITY	SFX	COUNT	UNITS		FT	IN			
001	107290	244	880	BG					
				50lb Bag, PURITAN Pottery Plaster, Special Test, 25-35 Minute Set Stamp, 80 Bag Pit	00		22.00	TON	11.00
									44880

SIGNATURE OF DRIVER/CARRIER	DATE OF PICKUP	TOTAL ORDER WEIGHT (LBS)

DO NOT COVER SIGNATURE AREA ABOVE

IMPORTANT: To RECEIVE CREDIT for damaged or missing material, CHECK appropriate box on the CARRIER COPY of the Bill of Lading. In the space provided, give a BRIEF DESCRIPTION of the product, problem, and number of damaged/missing items. STATE ONLY FACTS and do not speculate or offer an opinion as to the root cause of the problem. SIGN CARRIER COPY of Bill of Lading and return to driver. Have the TRUCK DRIVER SIGN and PRINT name to acknowledge the facts. Contact your Sales Representative or Customer Service to provide relevant information and photographs to file a claim. Provide additional damage/shortage documentation notations or receiving stickers in this space.

SELECT: ☐ MATERIAL DAMAGED ☐ MISSING / SHORTAGE

Provide additional damage/shortage documentation notations or receiving stickers in this space.

SIGNATURE OF RECEIVER

DATE OF RECEIPT

TOTAL SHIPMENT WEIGHT (LBS)

44880

DO NOT COVER SIGNATURE AREA ABOVE

The Seller of the products shown is the identified USG shipping entity (Plant). This confirms the contract with customer for sale of the goods which is subject to and includes the USG Terms and Conditions of Sale previously provided or made available to customer. The property described has been received by Carrier in apparent good order, except as noted, and is marked, consigned, and destined as indicated. Carrier agrees to carry property to its usual place of delivery at said destination. If on its route, otherwise to deliver to another carrier on the route to said destination. Each carrier of, and any party at any time interested in, all or any of said property over all or any portion of said route to destination agrees to perform every service required hereby in accordance with the applicable contract(s), if any, between the USG shipping entity and Carrier. If there is no applicable contract in place for this shipment, carriers performance shall be subject to the terms and conditions the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classifications in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification if this is a motor carrier shipment.

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ITEM		SHIPPING QTY		SKU		PRODUCT DESCRIPTION / COMMENTS		LENGTH FT IN		PRICING QTY		STOP #			
COMMODITY SFX		COUNT UNITS										STOP 01 OF 01			
												# UNITS/ PALLETS		WEIGHT (LBS)	

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