

Bill to: SAV ENTERPRISES INC 11325 XEON STREET NORTHWEST, Minneapolis, MN, 55448 Invoice Date: 01/22/2024 Invoice #: 41150250 Terms: NET 30 Due Date: 02/22/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/19/2024		5385 Jackson St, Denver, CO, USA - 3100 Industrial Road, Kirksville, MO, USA			
			1	\$1,500.00	\$1,500.00

TOTAL

\$1,500.00

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

Send Fax To:

1-

Faxes will be returned to:

When Faxing Send:





CARRIER RATE AGREEMENT AND LOAD CONFIRMATION

DRIVER MUST CALL DISPATCH 866-868-3230 FOR DISPATCH

S.A.V. LOAD # 41150250

BILL TO: S.A.V. ENTERPRISES, INC. P.O. BOX 480050 COON RAPIDS, MN 55448-0050 Accounting@savtrans.com

* LOAD NUMBER MUST BE REFERENCED ON YOUR INVOICE

* ORIGINAL BILLS MUST BE PROVIDED WITH YOUR INVOICE FOR PAYMENT

TRIP NOTES:

H & H AUTO PARTS P/U DATE: 01/19/2024 P/U #: CUSTARD/GLOBAL SHIPPER 5385 JACKSON ST. P/U TIME: 08:00 - 15:00 FCFS BOL #: PCS: 0 PLT: 25.00 DENVER CO 80216 WEIGHT: 44.000 PO #: H & H DENVER Phone: 303-294-0466 219 Contact: JESSE MILLER COMMODITY: AUTOMOTIVE PARTSOOTNESKIES NOTES/DIRECTIONS:

CONSIGNEE

GLOBAL TRANSMISSON PARTS INC 3100 INDUSTRIAL ROAD

KIRKSVILLE MO 63501 Phone: 660-627-7446 Contact: DEL DATE: 01/22/2024 DEL TIME: 08:00 - 16:30 FCFS DEL CONF #:

NOTES/DIRECTIONS:

CARRIER :	EQUIPMENT REQUIREMENTS:		
BRZ 8225 LECLAIRE AVE BURBANK IL 60459 Phone: 708-303-5150 Contact: MIKE/ TIA/ BLAKE/ COLE - NOTES			
DRIVER MUST CHECK IN LOADED AND DAILY BY 10:00AM OR A \$75.00 FINE MAY BE APPLIED.	BASE RATE FSC: DROPS: LUMPER: DETENTION: MISC:	\$1,500.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
	TOTAL:	\$1,500.00	

AS PER OUR PHONE CONVERSATION, FOR AND IN CONSIDERATION OF THE VALUE AND ITEMS STATED ABOVE, IT IS AGREED THAT THE ABOVE SHALL BE A MODIFICATION OF AN ADDENDUM TO THE EXISTING CONTRACT BETWEEN THE TWO PARTIES. IT IS ALSO AGREED THAT ANY ADDITIONAL CHARGES NOT LISTED ABOVE MUST BE CALLED INTO S.A.V. ENTERPRISES AT TIME OF OCCURANCE SO A REVISED RATE AGREEMENT CAN BE COMPLETED AND SENT TO THE CARRIER. NO ADDITIONAL CHARGES WILL BE HONORED WITH OUT A SIGNED RATE AGREEMENT.

ANY DIRECTIONS, SHIPMENT INSTRUCTIONS OR LOADING OR UNLOADING INFORMATION PROVIDED BY S.A.V. ENTERPRISES OR ITS CUSTOMER EITHER ORALLY OR IN WRITING ARE FOR INFORMATIONAL PURPOSES ONLY. NEITHER S.A.V. NOR ITS CUSTOMER CONTROLS CARRIER'S PERFORMANCE OF THE TRANSPORTATION SERVICES. CARRIER IS SOLELY RESPONSIBLE FOR COMPLYING WITH ALL APPLICABLE LAWS, WEIGHT AND COMMODITY RESTRICTIONS AND TO DETERMINE ROUTES OF TRAVEL. SAV DOES NOT SANCTION ANY FMSCA VIOLATIONS IN CONJUNCTION WITH ACCEPTANCE OF THE LOAD.

DRIVER MUST CALL DISPATCH 866-868-3230 FOR DISPATCH

CARRIER REF#	S.A.V. LOAD # 41150250
TRUCK # TRAILER #	TOTAL AGREED RATE\$1,500.00
BRZ	S.A.V. ENTERPRISES, INC.
Ву:	By: STEVEN ELLENSON

******SIGN AND FAX BACK TO ******

THIS AGREEMENT WILL BE NULL AND VOID IF DOUBLE BROKERED



SAV ENTERPRISES INC 11325 XEON STREET N.W. P.O. BOX 480050 COON RAPIDS MN 55448-0050

STRAIGHT BILL OF LADING - SHORT FORM

		Not Ne	gotiable		
	and the second second second second	Ship	FROM		
Company Name: Address: City/State/Zip: Contact Name: Phone:	me: H & H AUTO PARTS 5385 JACKSON ST. : DENVER, CO 80216		SAV BOL #: 41150250 Special Instructions: Shipper reference number:		
		Shij	рТО		
Company Name: Address: City/State/Zip: Contact Name: Phone:	GLOBAL TRANSMISSON PARTS INC 3100 INDUSTRIAL ROAD KIRKSVILLE, MO 63501 660-627-7446		Special Instructions: Consignee reference number: H & H DENVER		
	Third Party Billing PPD to:	A state of the state of the	THIRD PA	ARTY BILLING	
P.O. Box	sportation Group 480050 ids, MN 55448-0050		(check box): Master Bill of Lading	with attached underlying Bills of Lading	
Special Instruction	15		Carrier Information		
Pickup: Delivery: Shipment: Other: Temp Control:	**CUSTARD/GLOBAL**		Carrier Name: Trailer Number: Pro Number: Bar Code S	Space	
No. No. Pcs. Pallets		pecial or additional care	e or attention in handeling or stowing must be so See Section 2(e) of NMFC Item 360	marked and packaged as NMFC Class No.	
0 25	44,000 AUTOMOTIVE P	PARTS ON SKID	S		
0 25	44,000 <<<<<<<<	<<<< TOTALS:	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>		
Where the rate is de value of the property No Received, subject to	pendent on value, shippers are required to state	i ge in the shipme t have been agreed u	ent may be applicable. See 49 US	C 14706(c)(1)(A) and (B) ipper, if applicable, otherwise to the rates,	
Carrier certifies emer available and/or carri guidebook or equival	Pickup Date s receipt of packages and required placards. gency response information was made er has the DOT emergency response ent documentation in the vehicle. Property weived in good order, except as noted.	Trailer Loaded By Shipper By Driver	Freight Counted: By Shipper By Driver/pallets said to contain By driver/pieces	Shipper Signature / Date This is to certify that the above named materials are properly classified, packages, marked and labeles, are in proper condition for transportation according to the applicable regulations of the DOT.	
RRIVER SIGNATURE	a state of the second sec		SHIPPER SIGNATURE:	a shipment without payment of and all other	



STRAIGHT BILL OF LADING - SHORT FORM

SAV ENTERPRISES INC 11325 XEON STREET N.W. P.O. BOX 480050 COON RAPIDS MN 55448-0050

		Not No	egotiable	
		Shi	FROM	
Company Name: Address: City/State/Zip: Contact Name: Phone:	H & H AUTO PARTS 5385 JACKSON ST. : DENVER, CO 80216 :: JESSE MILLER 303-294-0466		SAV BOL #: 41150250 Special Instructions: Shipper reference number:	
		Sh	ip TO	
Company Name: Address: City/State/Zip: Contact Name: Phone:	GLOBAL TRANSMISSON PARTS INC 3100 INDUSTRIAL ROAD KIRKSVILLE, MO 63501 660-627-7446		Special Instructions: Consignee reference number: H & H DENVER	
	Third Party Billing PPD to:		THIRD PARTY BILLING	
P.O. Box	sportation Group 480050 pids, MN 55448-0050		(check box): Master Bill of Ladir	ng with attached underlying Bills of Lading
Special Instruction	ons		Carrier Information	
Pickup: **CUSTARD/GLOBAL** Dellvery: Shipment: Other: Temp Control:		Trailer Number: Pro Number: Bar Code Space		
No. No. Pcs. Pallets	S Correction) (X) (Subject to Correction) (X) (X) (X) (X) (X) (X) (X) (X) (X) (X	special or additional car	re or attention in handeling or stowing must be so e. See Section 2(e) of NMFC Item 360	o marked and packaged as NMFC Class No.
0 25 28	44,000 AUTOMOTIVE F	PARTS ON SKIL	DS	
0 25 25	2 44,000 <<<<<<<<	<<<< TOTALS	>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	
Where the rate is of value of the proper N Received, subject classifications and Carrier Signature	dependent on value, shippers are required to star ty". lote: Liability limitaion for loss or dama to individually determined rates or contractss tha rules that have been established by the carrier a / Pickup Date	age in the shipm	ent may be applicable. See 49 US upon in writing between the carrier and sh he shipper, on request, and to all applicab Freight Counted:	C 14706(c)(1)(A) and (B) ipper, if applicable, otherwise to the rates, le state and federal regulations. Shipper Signature / Date
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.		By Shipper By Driver/pallets said to contain By driver/pieces	This is to certify that the above named materials are properly classified, packag marked and labeles, are in proper condit for transportation according to the applic regulations of the DOT.	
DRIVER SIGNATUR			SHIPPER SIGNATURE:	e shipment without payment of and all other
ARRIVAL DATE /TIME: DEPART DATE /TIME:			lawful charges.	o supriment without payment of and all other

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