

**Bill to:**

LOGISTICS PLUS  
1406 PEACH STREET,  
Erie,  
PA,  
16501

Invoice Date: 02/29/2024

Invoice #: NAD1706119

Terms: NET 30

Due Date: 03/29/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/28/2024		1089 Allen Street, JAMESTOWN, NY 14701, USA - 4500 Epic Blvd, ORLANDO, FL 32819, USA			
			1	\$3,100.00	\$3,100.00

<b>TOTAL</b>
\$3,100.00

**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**

## CARRIER AGREEMENT

**Account Name:**
**Shipment Number: NAD1706119**
**SHIPPER:(Pickup Address)**
**CONSIGNEE:(Delivery Address)**

Artone LLC  
1089 Allen Street  
JAMESTOWN, NY 14701  
USA

Universal Project 912  
4500 Epic Blvd  
ORLANDO, FL 32819  
USA

Contact Name: LYNN  
Phone: 716.664.2232  
Fax:

Contact Name: Phone: Fax:

**Instructions:**
**Instructions:**

Bill Prepaid Third Party to:

Logistics Plus  
PO Box 1288  
Erie, PA 16512-1288 USA

**CARRIER/ROUTE:** ZIGI FREIGHT INC  
**PRO #:**

**Shipment Date:** 02/26/2024

Pickup between 12:00 and 14:00

**Delivery Date:** 02/28/2024

Deliver between 07:00 and 07:00

**PO #:** 41370\_20240226-RM-1

**REF#:** Project 912

*Kelly Ivanovic*

CARRIER SIGNATURE ON AGREED CHARGES  
PLEASE RETURN VIA FAX TO

**Items:** If Hazmat Item is marked with X then Item is Hazmat otherwise not

HAZMAT	Quantity	Type	Description	Dimensions (in)	Weight (lb)	Pickup	Delivery
	1	LOAD	PREFABRICATED FURNITURE	0 x 0 x 0	35,000	Origin	Destination
<b>Total:</b>				35,000			

**Equipment:** 53 VAN

**General BOL Notes:**

MUST PICKUP TODAY BETWEEN 8-2PM MUST DEL MONDAY 7AM  
MUST SEND POD MUST UPDATE JON 814-823-9262 Dispatch  
Name: Yasser TRUCK: 772 TRAILER: W97037

**Critical BOL Notes:**

**FAILURE TO ACCEPT TRACKING IS \$250 RATE REDUCTION. MISSING APPT IS \$500 RATE REDUCTION WITH NO FURTHER COMPENSATION TO HOLD UNTIL NEXT AVAILABLE. IF SEAL IS BROKEN, WILL BE PAID FOR A PARTIAL**

**Charges:**

Description	Rate
TRUCKLOAD FREIGHT	\$3,100.00

**Total: 3,100.00 USD**

**MANDATORY REQUIREMENTS FOR SECUREMENT AND SAFETY:**

- FOR ALL OPEN DECK LOADS, DRIVER MUST FULLY SECURE FREIGHT PRIOR TO MOVING TRAILER.
- FOR SAFETY CONCERNS, DRIVER MUST COMMUNICATE IN ENGLISH AND UNDERSTAND ALL INSTRUCTIONS AS GIVEN.
- CAUTION: DRIVERS ARE REQUIRED TO HAVE SAFETY GLASSES, HARD HAT, LONG PANTS, SHIRT WITH SLEEVES, AND STEEL TOED BOOTS (with a distinct heel).
- DRIVERS MUST CALL IN TO NOTIFY LOGISTICS PLUS WHEN LOAD IS PICKED UP AND DELIVERED (Penalty of \$50 per each occurrence if Logistics Plus is not notified.)

**MANDATORY REQUIREMENTS FOR PROMPT PAYMENT OF YOUR INVOICE:**

- SHIPMENT NUMBER MUST APPEAR ON BOTH POD AND INVOICE.
- ALL ACCESSORIAL CHARGES MUST BE PRE-APPROVED OR THEY WILL NOT BE PAID. THIS INCLUDES, BUT IS NOT LIMITED TO, DETENTION, LUMPER FEES, TRUCK ORDERED NOT USED FEES, ETC.
- ANY LOAD TENDERED AS A FULL LOAD THAT MOVES AS A PARTIAL LOAD WILL BE PAID AT A MAXIMUM RATE OF \$0.75 PER MILE.

PLEASE INCLUDE OUR SHIPMENT NUMBER ON THE POD

If you have any questions, please call Logistics Plus at or Jon White at 814-240-1285

To ensure prompt payment of your invoices, please send a copy of the invoice, the proof of delivery and the signed carrier rate agreement to nadinvoice@Logisticsplus.com or fax to 814-690-2000

National Truckload, Inc. (NTL) and Logistics Plus, Inc., (LP) have common ownership. Carriers who have been set up and approved by either NTL or LP are approved to be tendered loads by both NTL and LP. By signing this Carrier Agreement, the Carrier hereby agrees to be bound by the terms of Carrier Service Contract it signed with either National Truckload, Inc. or Logistics Plus, Inc., and that such terms shall be applicable and binding when hauling either National Truckload, Inc. or Logistics Plus, Inc. loads.

\*\*\* eShipPlus TMS 4.35.2.7 - 2024-02-26 11:50:54 \*\*\*



BOL NUMBER: NAD1706119

**STRAIGHT BILL OF LADING SHORT FORM-ORIGINAL-Not Negotiable**

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading. The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry 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. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at time interested in all or any of said property, that every service to be performed hereunder shall be subject to all terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

**ORIGIN:**

Artone LLC  
1089 Allen Street  
JAMESTOWN, NY 14701  
USA

**DESTINATION:**

Universal Project 912  
4500 Epic Blvd  
ORLANDO, FL 32819  
USA

The carrier shall not make delivery if the shipment without payment of freight and all other lawful charges.  
(Signature of Consignor)

If charges are to be prepaid, enter "To be Prepaid"  
3RD PARTY

Contact Name: LYNN  
Phone: 716.664.2232

Fax:

Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_

**Pickup Instructions:**

CARRIER/ROUTE: ZIGI FREIGHT INC (DOT# 2828543)  
SHIPMENT DATE: 02/26/2024  
Available for pickup between 12:00 and 14:00

**Delivery Instructions:**

Bill Freight Charge(s) to:  
Logistics Plus  
PO Box 1288  
Erie, PA 16512-1288 USA

QUANTITY	HM (✓)	DESCRIPTION AND IDENTIFICATION OF ARTICLES	WEIGHT (lb)	CLASS/RATE
LOAD: 1 STC #: 1 0 x 0 x 0 in.	<input type="checkbox"/>	PREFABRICATED FURNITURE	35,000	0

NMFC #:

Total: 35,000

**General Notes:**

MUST PICKUP TODAY BETWEEN 8-2PM MUST DEL MONDAY  
7AM MUST SEND POD MUST UPDATE JON 814-823-9262  
Dispatch Name: Yasser TRUCK: 772 TRAILER: W97037

**Critical Notes:**

FAILURE TO ACCEPT TRACKING IS \$250 RATE  
REDUCTION. MISSING APPT IS \$500 RATE REDUCTION  
WITH NO FURTHER COMPENSATION TO HOLD UNTIL NEXT  
AVAILABLE. IF SEAL IS BROKEN, WILL BE PAID FOR A  
PARTIAL

**Service Type:** Truckload**Equipment Type:** 53 VAN**Shipment Number:** 1706119**PRO:****PO Number:** 41370\_20240226-RM-1**REF:** Project 912

Received in Apparent good Order (Except as Noted) The Goods Described Herein.

Driver: \_\_\_\_\_ Company: \_\_\_\_\_ Pieces: \_\_\_\_\_  
Date: \_\_\_\_\_

**SHIPPER CERTIFICATION**

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 Department of Transportation.

Per: [Signature] Date: 2/26

Receiver: \_\_\_\_\_ Date: \_\_\_\_\_  
Freight Received in good order(except as noted). Quantity confirmed as above; unless noted

Seal No.: 12 95

**IMMEDIATELY UPON DELIVERY PLEASE SEND THE SIGNED PROOF OF DELIVERY TO LOGISTICS PLUS EITHER BY FAX AT 814-464-0674 OR BY EMAIL AT TLAP@LOGISTICSPLUS.COM**

If you have any questions or if requested pick up cannot be made for any reason, please call Jon White at 814-240-1285.

\*\*\* eShipPlus TMS 4.35.2.7 - 2024-02-26 11:51:22 \*\*\*

TIME IN 13:30  
TIME OUT 17:00





BOL NUMBER: NAD1706119

**STRAIGHT BILL OF LADING\_SHORT FORM-ORIGINAL-Not Negotiable**

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading. The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry 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. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at time interested in all or any of said property, that every service to be performed hereunder shall be subject to all terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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Artone LLC  
1089 Allen Street  
JAMESTOWN, NY 14701  
USA

**DESTINATION:**

Universal Project 912  
4500 Epic Blvd  
ORLANDO, FL 32819  
USA

The carrier shall not make delivery if the shipment without payment of freight and all other lawful charges.  
(Signature of Consignor)

If charges are to be prepaid, enter "To be Prepaid"  
3RD PARTY

Contact Name: LYNN Phone: 716.664.2232 Fax:

Contact Name: Phone: Fax:

**Pickup Instructions:**

CARRIER/ROUTE: ZIGI FREIGHT INC (DOT# 2828543)

SHIPMENT DATE: 02/26/2024

Available for pickup between 12:00 and 14:00

**Delivery Instructions:**

Bill Freight Charge(s) to:

Logistics Plus  
PO Box 1288  
Erie, PA 16512-1288 USA

QUANTITY	HM (✓)	DESCRIPTION AND IDENTIFICATION OF ARTICLES	WEIGHT (lb)	CLASS/RATE
LOAD: 1 STC #: 1 0 x 0 x 0 in.	<input checked="" type="checkbox"/>	PREFABRICATED FURNITURE	35,000	0

NMFC #:

Total: 35,000

**General Notes:**

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PARTIAL

Service Type: Truckload

Equipment Type: 53 VAN

Shipment Number: 1706119

PRO:

PO Number: 41370\_20240226-RM-1

REF: Project 912

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Driver: \_\_\_\_\_ Company: \_\_\_\_\_ Pieces: \_\_\_\_\_  
Date: \_\_\_\_\_

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Per: [Signature] Date: 2/26

Receiver: [Signature] Date: 2/28/24  
Freight Received in good order (except as noted). Quantity confirmed as above; unless noted

Seal No.: \_\_\_\_\_

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