

**Bill to:**

ARMSTRONG TRANSPORTATION MANAGEMENT FORMARLY BBF GLOBAL  
LOGISTICS LLC

Invoice Date: 04/02/2024

Invoice #: 34831

Terms: NET 30

Due Date: 05/02/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/01/2024		3212 Lemone Industrial Blvd, Columbia, MO 65201, USA - 1801 S Shiloh Rd, Garland, TX 75042, USA			
			1	\$1,300.00	\$1,300.00

<b>TOTAL</b>
\$1,300.00

**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**

PRO # 34831

Rate Confirmation

04/01/24 09:20:20 (EST)



ARMSTRONG TRANSPORTATION MANAGEMENT  
3952 WILLOW LAKE BLVD  
MEMPHIS TN 38118

F  
R  
O  
M

CY KUEFFNER  
(901) 455-2611  
(901) 455-2611 (c) (901) 455-2611 (c)  
ckueffner@goarmstrong.com

C  
A  
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R

ZIGI FREIGHT INC  
(630) 485-7370 (p) Att: GEORGE  
(630) 485-7370 (f)  
MC # 944686 Truck # 753  
DOT 2828543 Trailer # W94934  
Driver ARMANDO Cell # (832) 628-2266

Size & Type: VAN  
Pieces:

Description: PALLETIZED GOODS  
Weight: 15000

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1300.00	MEETING A CREW TO LIVE LOAD. CREW WILL BE ONSITE AT 11:00AM.
TOTAL RATE	1300.00	

## PICK 1

PICK SITE - COLUMBIA  
3212 LEMONE INDUSTRIAL  
SUITE A  
COLUMBIA MO 65201  
Hours : 11-1PM

Ready Date: 04/01/24  
Ref # SMART METALS

## STOP 1

SPROUT  
1801 S SHILOH RD  
GARLAND TX 75042  
Hours : 8-2 FCFS  
Phone/Contact: (682) 227-8305

Must Deliver: 04/02/24

SEND INVOICES TO ATMPAPERWORK@GOARMSTRONG.COM  
901-290-0292

\*\*\*POD must be submitted within 72 hours of delivery or carrier is subject to a \$100 fine. Failure to invoice within 6 months will result in no payment.\*\*  
Carrier shall limit disclosure of information regarding this agreement, including carrier's rates and charges, only to carrier's agents, employees, and subcontractors directly involved in its execution and performance and those parties internally who have a need to know of this agreement.

Carrier Signature

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

Send Carrier Bills to the Address Above

PRO # 34831

must appear on all Invoices

<b>Bill Of Lading - Short Form - Not Negotiable</b>		<b>BOL Number:</b> 34831	
<b>Ship From</b>		<b>Pro #</b> : 34831	
PICK SITE - COLUMBIA 3212 LEMONE INDUSTRIAL SUITE A COLUMBIA MO 65201		<b>Ship Date</b> : 04/01/24	
		<b>Cust Ref #</b> :	
		<b>PU Ref #</b> : SMART METALS	
		<b>Del Ref #</b> :	
		<b>Del Appt</b> :	
		<b>Carrier</b> : ZIGI FREIGHT INC	
		<b>Carrier Pro#</b> : ARMANDO	
<b>Ship To</b>		<b>References</b>	
SPROUT 1801 S SHILOH RD  GARLAND TX 75042 (682) 227-8305			
<b>Bill To</b>			
ARMSTRONG TRANSPORTATION MANAGEMENT 3952 WILLOW LAKE BLVD MEMPHIS TN 38118			
<b>Special Instructions:</b> SPROUT LOAD TX-67668		<b>Freight Terms:</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
<b>QTY</b>	<b>PKG</b>	<b>Wgt</b>	<b>HM</b>
		15000	
<b>Item Description</b>		<b>DIMS</b>	<b>Cls</b>
PALLETIZED GOODS			<b>NMFC #</b>

*Mark with an X to designate hazardous materials as defined in title 49 of the code of Federal Regulations.	
<b>Haz Mat emergency Contact #</b>	
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 not to exceed _____ per _____"	<b>COD Amount:</b> \$ _____ <b>Fee Terms:</b> Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Check Acceptable <input type="checkbox"/>
<b>Note:</b> Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)	
<b>For Freight Collect Shipments:</b>	
If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.	<b>Trailer Loaded:</b> Freight Counted: ____ By Shipper ____ By Shipper ____ By Driver ____ By Driver
<b>Signature of Consignor:</b> _____	<b>Carrier Signature / Date</b>
<b>Shipper Signature / Date</b>	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.
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.	<b>Carrier:</b> <i>Armando Acosta</i> <sup>AMB</sup> <b>Date:</b> 4/1/24
<b>Signature of Shipper:</b> _____ <b>Date:</b> _____	<i>Royal3</i>
<b>Consignee/Receiver Signature / Date</b>	
This is to certify that the above named materials were received in apparent good order (except as noted).	
<b>Signature of Consignee:</b> _____ <b>Date:</b> _____	

<b>Bill Of Lading - Short Form - Not Negotiable</b>		<b>BOL Number:</b> 34831	
<b>Ship From</b>		<b>Pro #</b> : 34831	
PICK SITE - COLUMBIA		<b>Ship Date</b> : 04/01/24	
3212 LEMONE INDUSTRIAL		<b>Cust Ref #</b> :	
SUITE A		<b>PU Ref #</b> : SMART METALS	
COLUMBIA MO 65201		<b>Del Ref #</b> :	
		<b>Del Appt</b> :	
		<b>Carrier</b> : ZIGI FREIGHT INC	
		<b>Carrier Pro#</b> : ARMANDO	
<b>Ship To</b>		<b>References</b>	
SPROUT			
1801 S SHILOH RD			
GARLAND TX 75042			
(682) 227-8305			
<b>Bill To</b>			
ARMSTRONG TRANSPORTATION MANAGEMENT			
3952 WILLOW LAKE BLVD			
MEMPHIS TN 38118			
<b>Special Instructions:</b>		<b>Freight Terms:</b>	
SPROUT LOAD TX-67668		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
<b>QTY</b>	<b>PKG</b>	<b>Wgt</b>	<b>HM</b>
		15000	
<b>Item Description</b>		<b>DIMS</b>	<b>Cls</b>
PALLETIZED GOODS			<b>NMFC#</b>

\*Mark with an X to designate hazardous materials as defined in title 49 of the code of Federal Regulations.

Haz Mat emergency Contact #

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COD Amount: \$

Fee Terms: Collect ☐ Prepaid ☐ Check Acceptable ☐

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)

For Freight Collect Shipments:

If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor: \_\_\_\_\_

Shipper Signature / Date

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.

Signature of Shipper: \_\_\_\_\_ Date: \_\_\_\_\_

Consignee/Receiver Signature / Date

This is to certify that the above named materials were received in apparent good order (except as noted).

Signature of Consignee: ABJ Date: 04.02.24

Trailer Loaded: Freight Counted:

By Shipper By Shipper  
By Driver By Driver

Carrier 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.

Carrier: Armando Acosta Date: 4/1/24

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