



**Bill to:**  
DMX LOGISTICS LLC  
140 EPPING ROAD,  
Exeter,  
NH,  
03833

Invoice Date: 04/15/2024  
Invoice #: 112748  
Terms: NET 30  
Due Date: 05/15/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/12/2024		2490 Commerce Dr, Marianna, FL 32448, USA - 9 Batchelder Rd, Seabrook, NH 03874, USA			
			1	\$2,800.00	\$2,800.00

TOTAL
\$2,800.00

**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**



DMX LOGISTICS  
140 EPPING ROAD  
EXETER NH 03833

PRO # 112748

Rate Confirmation

04/11/24 09:38:17 (EST)

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JONATHAN HILL  
(603) 563-0777  
jhill@dmxlogistics.net

BRZ  
(708) 303-5150 (p) Att: CONNOR EXT 117  
MC # 86875 Truck #  
DOT 3119062 Trailer #  
Driver Cell #

Size & Type: 53' VAN  
Pieces: 17

Description: RESIN  
Weight: 44000

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	2800.00	283086
TOTAL RATE	2800.00	

PICK 1

MARIANNA WHSE. C/O  
2940 COMMERCE DRIVE  
MARIANNA FL 32448  
Hours : X 11  
Phone/Contact: (850) 482-2378 STEFANIE

Appointment 04/12/24  
Appt Notes: P/U @ 11:00  
Seal # 708-303-5150  
Ref # 283087

STOP 1

FUNCTIONAL COATINGS  
9 BATCHELDER ROAD  
SEABROOK NH 03874  
Phone/Contact: SHARON

Appointment 04/15/24  
Appt Notes: 08:00 TO 15:00  
Seal # 708-303-5150

OUR DMX LOGISTICS LOAD # MUST APPEAR ON YOUR INVOICE TO RECEIVE PAYMENT  
DETENTION MUST BE NOTIFIED AFTER ONE HOUR VIA EMAIL TO BE PAID  
DRIVER MUST VERIFY ADDRESS ON BOL AND RATE CONFIRMATION AFTER LOADING TO  
ENSURE CORRECT PRODUCT HAS BEEN LOADED. ANY LOADS DELIVERED TO AN INCORRECT  
LOCATION WILL BE AT THE FAULT OF THE CARRIER AND ADDITIONAL COSTS MAY RESULT  
POD + INVOICE MUST BE SUBMITTED VIA EMAIL TO ap@dmxlogistics.net WITHIN  
THIRTY DAYS TO AVOID A \$25 PER DAY DEDUCTION FROM THE ORIGINAL AGREED RATE  
NO DETENTION WILL BE PAID IF AN APPOINTMENT IS MISSED WITHOUT PRIOR NOTICE  
THIS RATE CONFIRMATION CANNOT BE USED AS A PROOF OF DELIVERY (POD)  
PAYMENT TERMS ARE NET 30

Carrier Signature Luke Mische

Date        /        /         
M D

Send Carrier Bills to the Address Above

PRO # 112748

must appear on all Invoices

<b>Bill Of Lading - Short Form - Not Negotiable</b>				<b>BOL Number:</b> 112748																			
<b>Ship From</b>				<b>Pro #</b> : 112748																			
MARIANNA WHSE. C/O 2940 COMMERCE DRIVE  MARIANNA FL 32448 (850) 482-2378 STEFANIE				<b>Ship Date</b> : 04/12/24																			
				<b>Cust Ref #</b> : 283087																			
				<b>PU Ref #</b> : 283087																			
				<b>Del Ref #</b> :																			
				<b>Del Appt</b> : 04/15/24																			
<b>Ship To</b>				<b>Carrier</b> : BRZ																			
FUNCTIONAL COATINGS 9 BATCHELDER ROAD  SEABROOK NH 03874 SHARON				<b>Carrier Pro#:</b>																			
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<b>Bill To</b>				283087																			
DMX LOGISTICS 140 EPPING ROAD EXETER NH 03833																							
<b>Special Instructions:</b>				<b>Freight Terms:</b>																			
283087				Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">QTY</th> <th style="width: 15%;">PKG</th> <th style="width: 10%;">Wgt</th> <th style="width: 5%;">HM</th> <th style="width: 40%;">Item Description</th> <th style="width: 10%;">DIMS</th> <th style="width: 5%;">Cts</th> <th style="width: 10%;">NMFC #</th> </tr> </thead> <tbody> <tr> <td>17</td> <td></td> <td>44000</td> <td></td> <td>RESIN</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>								QTY	PKG	Wgt	HM	Item Description	DIMS	Cts	NMFC #	17		44000		RESIN			
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*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> <b>Freight Counted:</b> _____ By Shipper      _____ By Shipper _____ By Driver      _____ By Driver
<b>Signature of Consignor:</b> _____	<b>Carrier 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.  <b>Carrier:</b> _____ <b>Date:</b> _____
<b>Shipper Signature / Date</b>	
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>Signature of Shipper:</b> <i>Kau Pyshe</i> <b>Date:</b> 4/12/24	
<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> _____	



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Signature of Shipper: <i>Karl Fischer</i> Date: <i>4/12/24</i>	
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: <i>JA</i> Date: <i>4/15/24</i>	