

**Bill to:**

5K TRANSPORTATION MANAGEMENT SYSTEMS LLC
101 DOGWOOD DR,
Bardstown,
KY,
40004

Invoice Date: 04/19/2024

Invoice #: 33770

Terms: NET 30

Due Date: 05/19/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/18/2024		3950 Austin Peay Hwy, Memphis, TN 38128 - 1600 N Harrison St, Shawnee, OK 74801			
			1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

PLEASE NOTE

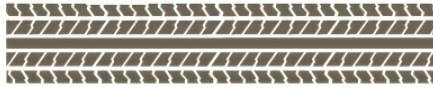
The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS)
and all payments hereunder are to be directed to the assignee at the address noted below.

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**



Transportation Management Systems



101 Buchanan Blvd
Bardstown, KY 40004

Docket: MC005793

Phone: 502-233-8402

Fax: 502-849-0801

LOAD CONFIRMATION

Load #	33770
Date	04/18/2024
Equipment	Van
Equipment Length	53'
Weight	40000 lbs
Commodity	Dry Goods (General)
Distance	430 miles

Carrier Information

ZIGI FREIGHT INC
6850 W 63RD STREET
CHICAGO, IL 60638
(630) 485-7370

MC Number MC00944686
Primary Contact Bonnie
Phone 630-485-7370 ext 114
Fax

Driver *Driver not set*
Phone
Email
Fax

Notes and References

Reference(s) See Justin to get loaded 662-213-6198

Stops / Actions

#	Action	Date/Time	Location	Contact
1	Pickup	04/18/24 09:00	Walmart 1571 Memphis, TN 3950 Austin Peay Hwy Memphis, TN 38128 USA	Primary Contact Phone:
2	Delivery	04/19/24 07:00	Newton Wall 1600 N Harrison St Shawnee, OK 74801	Christina Phone: 405-255-7847 Email: christina.fleming@newtonwall.com
Notes: Must have appointment to get unloaded unless otherwise noted				

Pay Items

Description	Notes	Quantity	Rate	Amount
Flat Rate		1	1400.00	1400.00

Total **1400.00**

****DRIVER MUST CALL IN FOR DISPATCH****

Company Contacts:

JODY / Director of Operations -(24 HOUR CONTACT 502-507-5853)

AMY (502) 233-8008 / Office Manager

KATIE (502) 233-8639 / Carrier Rep

MOLLY (502) 233-8365 / Carrier Rep

BRYCE (502) 233-8361 / Sales

Detention notifications must be sent in via email to billing@5klog.com (MUST NOTIFY 5K TMS AS YOU GO INTO DETENTION AT SHIPPER AND/OR RECEIVER)

CARRIER, (DISPATCHER), AND DRIVER AGREE THAT WEIGHTS COMMUNICATED ON THIS RATE CONFIRMATION ARE ESTIMATES AND DO NOT EFFECT NEGOTIATED, AGREED UPON RATE

ANY DIRECTIONS COMMUNICATED VIA THIS LOAD TENDER, BY A CUSTOMER OR BY 5K TMS ORALLY OR WRITTEN ARE FOR INFORMATIONAL PURPOSES ONLY.

****Send in invoice, legible POD and copy of rate confirmation to BILLING@5KLOG.COM. IF CARRIER SENDS IN PAPERWORK VIA USPS THERE WILL BE A \$25 FEE FOR PROCESSING****

BILLING MAY BE REACHED AT (502) 233-8356 or billing@5klog.com

Driver Name

Driver Cell Phone #

Print Name

Signature

Bonnie Rajkovic

Date

To Reorder Call Toll-Free 1-800-421-1222
or FAX Toll-Free 1-800-762-7329

Shipper's No. 112

Carrier's No. 97032

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.

(M-11 or street address of consignee—For purposes of notification only.)

Delivery Address*

*To be filled in only when shipper desires and governing tariffs provide for delivery thereof

Car or Vehicle InitialsTITLE

Per

LBS

Shipper, Per

Agent, Per

Permanent post office address of shipper

#4

C.O.D. SHIPMENT

C.O.D. Amt

Collection Fee

Total Charges

Shipper

Original-Not Negotiable

Straight Bill of Lading-Short Form

Shipper's No. 772Royal 3 Inc
(Name of Carrier)Carrier's No. 97032

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of the Bill of Lading.

at 3950 Austin Peay Hwy Memphis TN From Wg/Mart

the property described below, in apparent good order, except as noted (contents and condition 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 any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the 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.

Consigned to Newton Wall Co.

(Mail or street address of consignee—For purposes of notification only.)

Destination 1600 N. Harrison Shawnee State OK Zip 74801 County _____

Delivery Address*

*To be filled in only when shipper desires and governing tariffs provide for delivery thereof.

Route _____

Delivering Carrier

Car or Vehicle Initials

No.

NO. PACKAGES	HAZARDOUS MATERIALS	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	*WEIGHT (SUBJECT TO CORR.)	CLASS OR RATE	✓	Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Per _____ (Signature of Consignor) If charges are to be prepaid, write or stamp here, "To be Pre-paid." Received \$ _____ to apply in prepayment of the charges on the property described hereon. Agent or Cashier. Per _____ (The signature here acknowledges only the amounts prepaid.) Charges advanced: \$ _____
		26 pallets	Est 30,000			
			IN-825 OUT-847			
		Seal # 47446				

SHIPPER'S 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.

SIGNATURE

Just B

TITLE

Supervisor

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

** Shipper's imprints in lieu of stamp; not a part of Bill of Lading approved by the Interstate Commerce Commission.

Note-Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____

THIS SHIPMENT IS CORRECTLY DESCRIBED.

CORRECT WEIGHT IS _____

LBS.

** The fibre boxes used for this shipment conform to the specifications set forth in the box makers certificate thereon, and all other requirements of the Consolidated Freight Classification.

Per

4/19/24

Shipper

Shipper, Per _____

Agent, Per _____

Permanent post office address of shipper

#4

1

C.O.D. SHIPMENT

C.O.D. Amt _____

Collection Fee _____

Total Charges _____