



**Bill to:**  
GLOBALTRANZ ENTERPRISES  
7350 N DOBSON RD STE 130,  
Scottsdale,  
AZ,  
85250

Invoice Date: 05/20/2024  
Invoice #: 29019736  
Terms: NET 30  
Due Date: 06/20/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/17/2024		660 Old Caroleen Rd, Forest City, NC 28043 - 14770 EAST AVENUE, Albion, NY, 14411			
			1	\$1,950.00	\$1,950.00

<b>TOTAL</b>
\$1,950.00

**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 RATE  
CONFIRMATION

Load Number: 29019736



GENERAL CONTACT

GTZ CONTACT: (888) 720-2739 mateo.m@globaltranz.com

GTZ FAX:

CARRIER PAYMENTS:

INVOICE/POD/RATE CON submit to: TLINVOICES@globaltranz.com

NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

PO#:  
REF#:  
PRO#:  
CARRIER QUOTE:

<b>SERVICE:</b>  SERVICE TYPE: Full TRAILER TYPE: Van SIZE: 53	<b>ACCESSORIAL(S):</b>	<b>COMMODITY:</b> DESCRIPTION: WEIGHT: 44000 lbs PALLETS:36 PIECES:0
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<b>CARRIER INFORMATION:</b> CARRIER NAME: BRZ LEGAL NAME:RIKI TRANSPORTATION INC. MC#:086875 [CA458]	DISPATCHER: Linda PHONE: (708) 852-5654 FAX: EMAIL: linda@rtbrz.com	DRIVER: John DRIVER PHONE: (520) 499-9166 TRAILER NUMBER:232153
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IMPORTANT LOAD NOTES:

<b>ORIGIN:</b> FACILITY: B&W Fiberglass STREET: 660 Old Caroleen Rd CITY/STATE/ZIP: Forest City, NC 28043 FAX:	PICKUP DATE: 05-17-2024 REF #: HOURS: 08:00 - 15:00 CONTACT: Jennifer Hoyle  PHONE:	PICKUP #: SO# 51206,SO# 51206 APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
PICKUP NOTES:		

<b>DESTINATION:</b> FACILITY: Saint Gobain Technical Fabrics STREET: 14770 EAST AVENUE CITY/STATE/ZIP: Albion, NY 14411 FAX:	DELIVERY DATE: 05-20-2024 HOURS: 08:00 - 14:00 CONTACT: Rodney Lund  PHONE:	REF #:  DELIVERY#: APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
DELIVERY NOTES:		



**RATE INFORMATION:**  
BASE RATE:\$1,950.00  
TOTAL RATE: \$1,950.00

GTZ SIGNATURE : Mateo Martinez (888) 720-2739

CARRIER SIGNATURE : *Linda Ferrer*

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce provision of this agreement, rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement or the Carrier's Carrier Rate Confirmation, the Agreement shall govern and then any terms as set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match the Rate Confirmation. Broker does not authorize hand written or verbal changes to the rate confirmation. If this rate confirmation does not accurately reflect the load terms, carrier must obtain a revised rate confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in additional line haul deductions.



**CARRIER RATE  
CONFIRMATION**

**Load Number: 29019736**



**GENERAL CONTACT**

GTZ CONTACT: (888) 720-2739 [mateo.m@globaltranz.com](mailto:mateo.m@globaltranz.com)

GTZ FAX:

**CARRIER PAYMENTS:**

INVOICE/POD/RATE CON submit to: [TLINVOICES@globaltranz.com](mailto:TLINVOICES@globaltranz.com)

NOA and PAYMENT INQUIRIES: [APTLREQUESTS@globaltranz.com](mailto:APTLREQUESTS@globaltranz.com)

**To be eligible for Accessorials / Incidentals, Carrier must:**

- Be checked in to shipper **OR** receiver by the appointment time.
- Submit all proof of detention, accessorial, incidentals within 24-48 hours of delivery.

**Detention:**

- Carrier must be on time for pickup/delivery.
- Detention accrual begins 2 hours after appointment time at shipper/receiver IF:
  - Carrier must notify Broker after **60** minutes of waiting.
  - Provide time stamped BOL within 48 hours of delivery.
- Detention Rate - **\$40/hr** after **2** hours. Max \$200 detention per stop.

**Layover, Truck Order Not Used (TONU):**

- Carrier must contact Broker to request
- Delays or cancellations must be confirmed by Broker
- Layovers: \$200 Dry Van or \$250 Running Reefers.
- TONU: \$200

**Submitting Payments:**


- Email Invoice, Rate Confirmation, Proof of Delivery & Receipts to [TLinvoices@globaltranz.com](mailto:TLinvoices@globaltranz.com)
- 3% / 3-Day Quick Pay available upon request
- For Payments question contact [aptrrequests@globaltranz.com](mailto:aptrrequests@globaltranz.com) or by calling 866-275-1407 ext. 72597



**GLOBALTRANZ**

Straight Bill of Lading - Short Form - Original - Not Negotiable

GTZ BOL NO : 29019736

<b>Shipper</b>	B&W Fiberglass	<b>Carrier</b> :BRZ
<b>Address</b>	660 Old Caroleen Rd	<b>Shipment Date</b> :05/17/24
	Forest City, NC 28043	<b>Carrier Pro#</b> :
<b>Country</b>	USA	<b>Ref #</b> :
<b>Contact Name</b>	Jennifer Hoyle	<b>Carrier Quote #</b> :
<b>Phone Number</b>	(704) 434-8005x110	<b>P/O #</b> :
<b>Contact Email</b>		<b>Customer BOL NO</b> :
<b>Fax Number</b>		

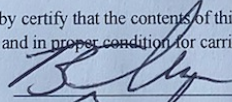
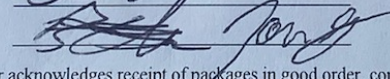
<b>Consignee</b>	Saint Gobain Technical Fabrics	<b>Third Party Billing Information:</b>
<b>Address</b>	14770 EAST AVENUE	All charges are prepaid to:
	Albion, NY 14411	<b>GlobalTranz</b>
<b>Country</b>	USA	<b>PO Box</b> 6348
<b>Contact Name</b>	Rodney Lund	<b>Scottsdale AZ</b> 85261
<b>Phone Number</b>	(585) 589-4401	<b>Direct billing inquiries to</b> : (866) 275-1407
<b>Contact Email</b>		<b>GTZ BOL NO</b> : 29019736
<b>Fax Number</b>		

**Comments/Special Instructions:****Pickup Remarks :****Delivery Remarks :**

Pallets	Pieces	IsHazmat	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
35	0		fiberglass yarn	41607	0	0	0	0		false

The authorized signatories signing this document on behalf of its company consents and bind its company to the terms and conditions found on [www.carrierrate.com](http://www.carrierrate.com).

**Shipper Certification** : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

**Shipper's Signature:** **Date:** 5-17-24 **Trailer#:** \_\_\_\_\_**Driver's Signature:** **Date:** 5-17-24 **Trailer#:** \_\_\_\_\_

**Drivers Certification** : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

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.

**Consignor's Signature:** \_\_\_\_\_**Consignee Signature:** \_\_\_\_\_**Print Name:** \_\_\_\_\_**Company Name:** \_\_\_\_\_**Date:** \_\_\_\_\_

Permanent post-office address of the Shipper:

\* Mark with "X" to designate material as defined in Title 49 CFR






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<b>Contact Name</b>	Jennifer Hoyle	<b>Ref #</b> :
<b>Phone Number</b>	(704) 434-8005x110	<b>Carrier Quote #</b> :
<b>Contact Email</b>		<b>P/O #</b> :
<b>Fax Number</b>		<b>Customer BOL NO</b> :
		

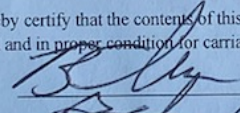
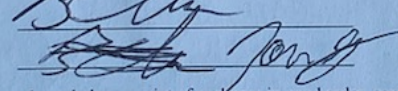
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<b>Contact Name</b>	Rodney Lund	<b>PO Box 6348</b>
<b>Phone Number</b>	(585) 589-4401	<b>Scottsdale AZ 85261</b>
<b>Contact Email</b>		<b>Direct billing inquiries to : (866) 275-1407</b>
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