



Bill to:
DIRECT CONNECT LOGISTIX INC.
212 West 10th Street / Suite D405,
Indianapolis,
IN,
46202

Invoice Date: 05/26/2024
Invoice #: 6196885
Terms: NET 30
Due Date: 06/26/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/25/2024		126 1ST ST, CORDOVA, NC 28330 - 6395 SR 103N BLDG 5, LEWISTOWN, PA 17044			
			1	\$1,800.00	\$1,800.00

TOTAL
\$1,800.00

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



DIRECT CONNECT LOGISTIX, INC.
130 S MERIDIAN ST, 3RD FLOOR
INDIANAPOLIS, IN 46225
(317) 218-7777

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Load Confirmation

6196885

Carrier:	BRZ	Contact:	Sara Vukic
	BURBANK IL 604592734	Phone:	(708) 303-5150
Date:	05/24/2024	Fax:	

Order	Order:	6196885	Commodity:	PAPER ROLLS
	Miles:	496.0	Weight:	40500.0
	Temp:	Continuous Mode	Trailer:	Van (DAT)
	BOL:	PZ96VN	Reference:	1119248

PU 1	Name:	MARCEL - CORDOVA	Date:	05/25/2024 1200
	Address:	126 1ST ST CORDOVA NC 28330	Contact:	
	Phone:		Driver Load:	N
	Reference number:	PO 9707-NIT G		
	Reference number:	SI 13750973		

SO 2	Name:	NITTANY PAPER MILLS INC	Date:	05/26/2024 0800
	Address:	6395 SR 103N BLDG 5 LEWISTOWN PA 17044	Contact:	rec
	Phone:	717-247-2787	Driver Load:	N

Payment	Carrier Freight Pay:	\$1,700.00
	Macropoint Tracking	100.00
	Total Carrier Pay:	\$1,800.00

For quick pay (2% fee applies) please contact qp@directconnectlogistix.com.
For general questions regarding payment, please contact payables@directconnectlogistix.com.

(317) 218-7777

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

MARCEL - CORDOVA - LITHININ: Detention pay is \$35/hour after 3 hours free, capped at \$150/day for Dry Van shipments and \$250/day for Refrigerated shipments.

****Produce Shipments - No detention is paid at shipping locations (sheds). Detention at delivery is paid after 5 hours free at \$35/hour, capped at \$250 per 24 hours.

FCFS facilities do not pay detention unless specified in writing with your broker.

Layovers are paid at \$150/day for Dry Van, and \$250/day for Refrigerated shipments.

Carriers are NOT to arrange for any rejected product or full loads to be dropped at a 3rd party warehouses or taken back to shippers without broker's authorization. These actions can result in nonpayment for the load or full truckload claims. Any additional miles incurred to carrier for rejected product needing taken back to a shipping location or 3rd party location are paid at \$1.50/mile + FSC to carrier.

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(317) 218-7777

BILL OF LADING

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SHIPPER MARCAL SOUTH CORDOVA PM PARENT ROLLS 126 FIRST STREET CORDOVA, NC 28330 28330		PHONE # 910-410-9131	BOL #1119248 CARRIER: BRZ
CONSIGNEE NITTANY PAPER 6395 SR 103 N BLDG 60 LEWISTOWN, PA 17044 17044		PHONE # 717-994-5406	CUSTOMER PO #: 9707NITG SALES ORDER: 1119248 PICKUP DATE 5/1/2024 12:00:00AM PLANT REQ SHIP DATE TRAILER NUMBER: SEAL NUMBER: 4645408 PRO NUMBER:
BILL TO		FREIGHT TERMS Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> Third Party <input checked="" type="checkbox"/>	
SPECIAL INSTRUCTIONS TRAILER: 97971			

Number of Pieces	UoM	Number of Pallets	Description	Weight (Subject to Correction)	Class (Actual Class)	NMFC
			NOTES ON ORDER: PRIOR TO INVOICING SHIPPING MUST SEND			
			PO#9707-NITG			
			FOR CUSTOMER PICK UP - EMAIL JENNA SPADE jspade@marcal			
			PRIOR TO INVOICING			
			AND PRODUCTS & QUANTITIES MUST BE COMPARED AND CH			
			NO BACKORDERS FOR NITTANY ORDERS PER CHRIS D			
9	LB	0	1902-BRWN-1-XXXXXX - MARCAL 19LB KRAFT TOWEL	40,438		
Total:				40,438		

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 to be not exceeding _____ per _____."

Remit COD to :	COD Amount:			
COD Type:				
Note: Liability limitation for loss or damage in their shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).				
Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	<table style="width:100%;"> <tr> <td style="width:33%;"> Trailer Loaded: _____ by Shipper _____ by Driver </td> <td style="width:33%;"> Freight Counted: _____ by Shipper _____ by Driver </td> <td style="width:33%;"> _____ Freight Pulled _____ Freight Checked _____ Freight Loaded </td> </tr> </table>	Trailer Loaded: _____ by Shipper _____ by Driver	Freight Counted: _____ by Shipper _____ by Driver	_____ Freight Pulled _____ Freight Checked _____ Freight Loaded
Trailer Loaded: _____ by Shipper _____ by Driver	Freight Counted: _____ by Shipper _____ by Driver	_____ Freight Pulled _____ Freight Checked _____ Freight Loaded		

Shipper Date: <u>5-25-24</u> Time in: _____ Time out: _____ 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 Department of Transportation.	Carrier Date: <u>5-25-24</u> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted. Carrier Signature: <u>[Signature]</u>
Shipper Signature: <u>[Signature]</u>	



BILL OF LADING

Page 1 of 1

SHIPPER		PHONE #	BOL #1119248			
MARCAL SOUTH CORDOVA PM PARENT ROLLS 126 FIRST STREET CORDOVA, NC 28330 28330		910-410-9131	CARRIER: BRZ			
CONSIGNEE		PHONE #	CUSTOMER PO #: 9707NITG			
NITTANY PAPER 6395 SR 103 N BLDG 60 LEWISTOWN, PA 17044 17044		717-994-5406	SALES ORDER: 1119248			
BILL TO		FREIGHT TERMS	PICKUP DATE 5/1/2024 12:00:00AM			
		Prepaid <input type="checkbox"/>	PLANT REQ SHIP DATE			
		Collect <input type="checkbox"/>	TRAILER NUMBER:			
		Third Party <input checked="" type="checkbox"/>	SEAL NUMBER: 4645408			
SPECIAL INSTRUCTIONS		PRO NUMBER:				
TRAILER: 97971						

Number of Pieces	UoM	Number of Pallets	Description	Weight (Subject to Correction)	Class (Actual Class)	NMFC
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			AND PRODUCTS & QUANTITIES MUST BE COMPARED AND CHECKED			
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9	LB	0	1902-BRWN-1-XXXXXX - MARCAL 19LB KRAFT TOWEL	40,438		
Total:				40,438		

Stan Mait
5-26-24
Rec'd 9 rolls

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Remit COD to : _____

COD Type: _____ **COD Amount:** _____

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

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.	Trailer Loaded:	Freight Counted:	Freight Pulled
	____ by Shipper	____ by Shipper	____ Freight Checked
	____ by Driver	____ by Driver	____ Freight Loaded

Shipper Date: 5-25-24

Carrier Date: 5-25-24

Time in: _____ **Time out:** _____

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 Department of Transportation.

Shipper Signature: *Sam Wald*

Carrier Signature: *MCN...*