



Bill to:
National Parcel Logistics INC
,
,
,

Invoice Date: 06/12/2024
Invoice #: 35MIA061024SDF
Terms: NET 30
Due Date: 07/12/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/10/2024		1620 SW 5th Court Pompano Beach FL 33069 - 4603 Allmond Ave STE 2 Louisville KY 40209			
			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



Pickup/Load Number 35MIA061024SDF

Carrier Name	RIKI TRANSPORTATION INC.	Drivers Name	FELIX
Pickup Date	6/10/2024 5:00 PM	Drivers Phone	786-794-5030
Special Instructions		Driver2 Name	
		Driver2 Phone	
Pickup Name and Address	NPL Miami, ,1620 SW 5th Court Pompano Beach FL 33069 -Phone# 954-633-298	Pickup Date	6/10/2024 5:00 PM
Stop 1	*NPL Louisville ,4603 Allmond Ave STE 2 Louisville KY 40209 -Phone#	DTStop 1	6/12/2024 8:00 AM
Stop 2		DTStop 2	
Stop 3		DTStop 3	
Stop 4		DTStop 4	
Stop 5		DTStop 5	
Stop 6		DTStop 6	

Motor Carrier certifies that it has obtained, and will maintain for the duration of this shipment, the following insurance coverages and that any driver or equipment furnished, dispatched, or operated by or on behalf of motor carrier in connection with the transportation of this shipment shall be covered under the below referenced policies.

(a) Automobile Liability Coverage of \$1MM per occurrence with no annual aggregate

(b) Occupational accident for owner-operators or Workers' Compensation for all employees of owner-operator/fleet drivers (in limits set forth by applicable statute); and

(c) Cargo coverage for property damage of not less than \$100,000 per occurrence with no annual aggregate, and with no exceptions for theft or mysterious disappearance.

Motor carrier further certifies that: (i) its motor vehicle liability insurance shall be procured from an insurance carrier accepted by the Federal Motor Carrier Safety Administration ("FMCSA"), or alternatively, that it has been approved by the FMCSA as a self-insurer under the provisions of 49 C.F.R. § 387.309; and (ii) its remaining coverages shall be procured from an insurance carrier acceptable to NPL. The undersigned has full authority of the motor carrier to certify the insurance requirements set forth herein.

Carrier's invoice must be accompanied by all original paperwork including Bills Of Lading, Delivery Receipts and signed Rate Confirmation Sheet for each load. Carrier's invoice must also reference National Parcel Logistics, Inc.'s assigned load number in order for invoice to be processed. Submit all invoices to : National Parcel Logistics, Inc.

5415 West Sligh Ave, STE 110, Tampa, FL 33634; AP@NationalParcel.com, 813.886.4220. By accepting this load, carrier agrees to all terms and conditions in the Transportation contract made between Carrier and National Parcel Logistics, Inc. Cancellations must be received 24 hours prior to loading. Notification failure will result in a \$250.00 chargeback.

PLEASE INVOICE NPL WITHIN 10 DAYS OF COMPLETING THIS LOAD

Please have driver review BOL for actual drop order and delivery times. Load Locks Required RESET AFTER EACH DROP

Team Loads: Both Drivers Are Required to Show CDL's at Time of Pick Up

***Drivers are responsible for scaling their loads.**

NPL Signer	Jotanna Williams <input type="checkbox"/>	Carrier Signature	
NPL Signed On	Monday, June 10, 2024	Carrier Signed On	
NPL Signer Phone	678.712.4471	Truck Type	53' Dry Van
Rate Inclusive of Accessorials	\$1,400.00	Driver Type	Solo

Please sign and fax back along with carrier pack to 404-418-7183. Load not locked in until this rate sheet is signed and returned.

Luke Mische

BILL OF LADING



LOAD # 35MIA061024SDF

June 10, 2024

DEPARTING FACILITY:

NPL Miami,
1620 SW 5th Court
Pompano Beach, FL 33069
954-633-298

LOAD LOCKS
REQUIRED

Date: _____ Time: _____
Received By: (PRINT CLEARLY PLEASE)

Stop 1:

NPL Louisville
4603 Allmond Ave STE 2
Louisville, KY 40209

Appt:
USPS Date:
USPS Time:

Pallets 8125: 89
Pallets elnd 89
Weight: 39,748

SHIPPER LOADED/COUNTED/VERIFIED:

Employee Name:

Ron Johnson

Grand Totals:

Pallets 8125 89
Pallets elnd 89
Weight: 39,748

LOAD ACCEPTED IN GOOD ORDER UNLESS OTHERWISE STATED HEREIN

By Accepting this load, carrier agrees to all terms and conditions in the Transportation contract made between Carrier and National Parcel Logistics, Inc.

Driver: If you cannot accomplish the delivery appointment dates and/or times stated above in a manner compliant with FMCSA regulations, or if you experience a delay while delivering this load, or you have a concern call 678-712-4471 and we will adjust the appointment dates and/or times based on your estimated arrival.

Driver #1 Name:
Driver #2 Name:
Driver #1 License No.
Driver #2 License No.
Tractor No.
Trailer No.
Carrier:

Tractor Tag #
Trailer Tag #

Cell: _____
Cell: _____
State: _____
State: _____
State: _____
State: _____
State: _____
Time Out: 9:10 pm

Check in 3:40 pm

It is the Carrier's responsibility to ensure estimated weights are accurate. PLEASE SCALE YOUR LOAD.



LOAD # 35MIA061024SDF

June 10, 2024

DEPARTING FACILITY:

NPL Miami,
1620 SW 5th Court
Pompano Beach, FL 33069
954-633-298

LOAD LOCKS
REQUIRED

Date: _____ Time: _____
Received By: (PRINT CLEARLY PLEASE)

Stop 1:

NPL Louisville
4603 Allmond Ave STE 2
Louisville, KY 40209

Appt:

USPS Date:
USPS Time:

Pallets 8125: 89
Pallets eInd 89
59
Weight: 39,748

SHIPPER LOADED/COUNTED/VERIFIED:

Employee Name:

Ron Johnson

Grand Totals:

Pallets 8125 89
Pallets eInd 89
59
Weight: 39,748

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Driver #1 Name: _____
Driver #2 Name: _____
Driver # 1 License No. _____
Driver # 2 License No. _____
Tractor No. _____
Trailer No. _____
Carrier: _____

Cell: _____

Cell: _____

State: _____

State: _____

Tractor Tag # _____

State: _____

Trailer Tag # _____

State: _____

check in 3:45 PM Time Out: 9:40 PM

It is the Carrier's responsibility to ensure estimated weights are accurate. PLEASE SCALE YOUR LOAD.

BILL OF LADING



LOAD # 35MIA061024SDF

June 10, 2024

DEPARTING FACILITY:

NPL Miami,
1620 SW 5th Court
Pompano Beach, FL 33069
954-633-298

LOAD LOCKS
REQUIRED

Date: 6-12-24 Time 10:00 AM
Received By: (PRINT CLEARLY PLEASE)

Rigo

Stop 1:

NPL Louisville
4603 Allmond Ave STE 2
Louisville, KY 40209

Appt:

USPS Date:
USPS Time:

Pallets 8125: 89
Pallets eInd 89
Weight: 39,748

SHIPPER LOADED/COUNTED/VERIFIED:

Employee Name:

Ron Johnson

Grand Totals:

Pallets 8125 89
Pallets eInd 89
Weight: 39,748

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Driver #1 Name:
Driver #2 Name:
Driver #1 License No.
Driver #2 License No.
Tractor No.
Trailer No.
Carrier:

Tractor Tag #
Trailer Tag #

Cell: _____
Cell: _____
State: _____
State: _____

State: _____
State: _____

check in 3:40 pm Time Out: 9:40 pm

It is the Carrier's responsibility to ensure estimated weights are accurate. PLEASE SCALE YOUR LOAD.

in - 10:00 AM

Rigoberto Guerra

out - 11:00 AM

Rigo