

**Bill to:**

7 Star Brokerage

,  
,  
,

Invoice Date: 06/13/2024

Invoice #: 30916

Terms: NET 30

Due Date: 07/13/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/12/2024		511 Wilhite St, Florence, AL 35630 - 3471 Trade Center Ct, North Charleston, SC 29420			
			1	\$1,300.00	\$1,300.00

<b>TOTAL</b>
\$1,300.00

**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**



7 STAR BROKERAGE  
2422 JOLLY ROAD  
STE 400  
OKEMOS MI 48864

PRO # 30916 Rate Confirmation  
06/11/24 11:16:58 (EST)

F R O M	MARCUS MILLER	
	(810) 212-0607 X 1114 (p)	
	(810) 212-0609 (f) (810) 212-2722 (c)	
	marcus.miller@7starbrokerage.com	
C A R R I E R	ZIGI FREIGHT INC	
	(630) 485-7370 (p) Att: BILL CARSON	
	(630) 485-6980 (f)	
	MC # 944686	Truck # 425312
	DOT 2828543	Trailer # PTLZ244737
	Driver ARNOLDO	Cell #

Size & Type: 53' VAN  
Pieces:

Description: BUILDING MATERIAL  
Weight: 43000

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	850.00	DRIVER MUST HAVE & USE LOAD LOCKS OR STRAPS. ALL TRAILERS MUST BE SWEPT CLEAN AND DRY PRIOR TO LOADING. NO GLASS OR METAL SHAVINGS ALLOWED. PLEASE FOLLOW MACROPOINT INSTRUCTIONS, ELSE \$150 DEDUCTION. MUST SEND OVER THE BOL AT PICKUP, ELSE \$150 DEDUCTION. MUST SEND OVER POD AT DELIVERY, ELSE \$150 DEDUCTION. MUST SEND OVER THE LOAD PICTURES, ELSE \$150 DEDUCTION.
MACRO POINT	150.00	
ON TIME PICK UP	150.00	
ON TIME DELIVERY	150.00	
TOTAL RATE	1300.00	

#### PICK 1

SCHONOX HPS NORTH AMER  
511 WILHITE ST FLOREN  
FLORENCE AL 35630

Appointment 06/12/24 @ 13:00  
Appt Notes: FCFS TILL 14:30  
Ref # PO# 051390

#### STOP 1

SHL MEDICAL  
3471 TRADE CENTER CT  
NORTH CHARLESTON SC 29420

Appointment 06/13/24  
Appt Notes: FCFS BY ETA 09-1300  
Ref # PO# 051390

*Deduction will be applied on late deliveries or missing appointments!  
Please send POD within 72 hours of delivery. If the POD is not submitted within this time period, BROKER retains the right to deduct \$100 from the agreed upon contracted rate. If CARRIER does not submit the INVOICE within 30 days, BROKER retains the right to deduct \$300 from the agreed upon contracted rate. Carrier shall submit any accessorial documents or receipts within 48 hours of delivery If these documents are not submitted within 48 hour of delivery BROKER retains the right to deduct \$100 from the agreed upon contracted rate. Temp should be as per the rate confirmation. Driver just have load locks. Load should be secure by driver. Quick Pay available only with prior notice at 3%. Any discrepancies such as overages, shortages, damages, trailer seal discrepancies or detention must be reported immediately. You may be required to pay for a lumpsum. 7 Star Brokerage will reimburse with the receipt. If you request a lumpsum EFScheck from 7 Star Brokerage, there is a \$15 fee. Trailer must be clean, dry, odor free, with no holes & exclusive to this load. Max layover would be \$200/day. TONU is \$100( Depends on Situation) All POD's & Invoices must be emailed at ap@7starbrokerage.com*

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

E-Signed : 06/11/2024 10:18 AM CDT

*Bill Carson*

bill@royal3inc.com  
IP: 50.76.79.115

Sertifi Electronic Signature

DocID: 20240611101649590

# BILL OF LADING

PURCHASE ORDER# 051390-GRE  
HPS ORDER # SX-109501  
SHIP VIA 7-STAR  
CARRIER QUOTE # STEVE  
SHIP DATE 6/12/2024

BILL TO:  
☒ Shipper  
☐ Receiver  
☐ Third Party: \_\_\_\_\_

## DESTINATION ADDRESS:

SHL MEDICAL  
3471 TRADE CENTER CT  
NORTH CHARLESTON, SC 29420  
CONTACT: BRAD 843-708-7774

## ORIGIN ADDRESS

HPS NORTH AMERICA INC.

511 Wilhite Street  
Florence, AL 35630

Phone # 256-246-0345

Fax # 256-246-0346

U/M	TYPE	H/M	DESCRIPTION	ITEM	WT/LBS	CLASS	NMFC#
756	Bag		SELF-LEVELING COMPOUND SHIPPING VIA 7-STAR SEAL # 1883700	SCHONOX US SHIPPING/FREIGHT	43200	50	91860

Total Number of Skids: 18 Buckets: \_\_\_\_\_

Containing 756 Bags \_\_\_\_\_ Pails \_\_\_\_\_ Rolls \_\_\_\_\_

Total Weight: 43200 lbs.

EMERGENCY CONTACT  
CHEMTREC: 1-800-424-9300  
CONTRACT # CCN676260

Carrier hereby declares the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labelled/placarded and are in all respects in proper condition for transport according to applicable national and international government regulations.

CARRIER SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_

HPS NORTH AMERICA  
SHIPPER SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_



# BILL OF LADING

PURCHASE ORDER# 051390-GRE  
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 CARRIER QUOTE # STEVE  
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☐ Receiver  
☐ Third Party: \_\_\_\_\_

## DESTINATION ADDRESS:

SHL MEDICAL  
 3471 TRADE CENTER CT  
 NORTH CHARLESTON, SC 29420  
 CONTACT: BRAD 843-708-7774

## ORIGIN ADDRESS

HPS NORTH AMERICA INC.

511 Wilhite Street  
 Florence, AL 35630

Phone # 256-246-0345

Fax # 256-246-0346

U/M	TYPE	H/M	DESCRIPTION	ITEM	WT/LBS	CLASS	NMFC#
756	Bog		SELF-LEVELING COMPOUND SHIPPING VIA 7-STAR SEAL # 1883700	SCHONOX US SHIPPING/FREIGHT	43200	50	91860

Total Number of Skids: 18 Buckets: \_\_\_\_\_

Containing 756 Bogs \_\_\_\_\_ Pails \_\_\_\_\_ Rolls \_\_\_\_\_

Total Weight: 43200 lbs.

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CARRIER SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_

HPS NORTH AMERICA  
 SHIPPER SIGNATURE: \_\_\_\_\_

DATE \_\_\_\_\_