



**Bill to:**  
EXXACT EXPRESS  
P.O BOX 95545,  
Lakeland,  
FL,  
33804

Invoice Date: 06/19/2024  
Invoice #: 0737109  
Terms: NET 30  
Due Date: 07/19/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		300 EXECUTIVE PKW, NEW BERN NC 28562 - 1000 Bilter Rd, Aurora, IL 60502, USA			
			1	\$2,000.00	\$2,000.00
		other	1	\$-150.00	\$-150.00

<b>TOTAL</b>
\$1,850.00

**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**



EXXACT  
PO BOX 95545  
LAKELAND, FL 33804  
863-682-4101 863-688-7660

Page 1

Load Confirmation

0737109

Carrier: BRZ  
BURBANK IL 60459  
Date: 06/13/2024

Contact: Shawn Popovic  
Phone: 708-303-5150  
Fax:

Order Order: 0737109  
Miles: 911.0  
Temp:  
BOL: 2506317729

Commodity: HOUSEHOLD GOODS  
Weight: 20000.0  
Trailer: 53' DRY VAN  
Reference: 8672159146

PU 1 Name: BSH  
Address: 300 EXECUTIVE PKWY  
NEW BERN NC 28562  
Phone: 252-639-2138

Date: 06/13/2024 1600  
06/13/2024 1600  
Contact: SHIPPER  
Driver Load: No driver loading or unload

SO 2 Name: NSH HOME APPLIANCES CORP/DART WAREHOUSE  
Address: 300 N MITCELL RD  
NORTH AURORA IL 60542  
Phone:

06/17/2024 0600  
06/17/2024 0600  
Contact:  
Driver Load: No driver loading or unload

Payment Carrier Freight Pay: \$2,000.00

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

Please Sign: *Smith Dabic*

(X) Accept

( ) Decline

Driver Name: Phillip  
Driver Cell: 509-919-1507  
Driver Email:  
Tractor #: 850  
Trailer #: 289472

Attention: Jamie Martinez  
863-577-0634

# ***EXXACT EXPRESS***

## **Rate Confirmation Agreement for EXXACT**

- **\*\*LOAD SUBJECT TO TERMS AND CONDITIONS OF CONFIRMATION PAGE\*\***
- **\*\*\*THIS RATE CONFIRMATION SUPERSEDES ANY AND ALL PREVIOUS RATE SCHEDULES\*\*\***
- **\*\*\*BY SIGNING THIS RATE CONFIRMATION, YOU AGREE TO THE TERMS BELOW\*\***
- **EXXACT 24 HOUR DISPATCH 1-800-443-3798**

### **\*\*CARRIER REQUIREMENTS\*\***

- Report all accessorial charges at time of occurrence.
- Call 1 hour PRIOR to incurring detention.
- Report Overages, Shortages, Damages BEFORE leaving consignee.
- Submit all carrier invoices and supporting documentation to [invoices@exxact.net](mailto:invoices@exxact.net).
- Send all payment inquiries and notices of assignment (NOA) to [paymentinquiry@exxact.net](mailto:paymentinquiry@exxact.net).
- **ALL OF THE FOLLOWING ARE DUE WITHIN 48 HOURS OR SOONER AS REQUIRED BY CUSTOMER: BOL/POD/LUMPER RECEIPTS**

### **\*\*DETENTION REQUIREMENTS\*\***

- Must be checked in PRIOR to appointment.
- Must e-mail [Detention@exxact.net](mailto:Detention@exxact.net) no later than 1 hour after the appointment to apply for detention.
- **POD must have in and out times listed on it and have a valid signature.**
- **POD must be submitted to [detention@exxact.net](mailto:detention@exxact.net) within 2 hours of detention ending.**
- All Detention requests must be confirmed by Customer before payment is approved.

**DETENTION REQUESTS WILL BE DENIED IF NOT SUBMITTED USING THE GUIDELINES ABOVE**

### **\*\*ACCESSORIAL SCHEDULE\*\***

- Detention: \$40/hour, 2 hours free, Max \$160
- Layover: \$160/Day, Max \$160 (Detention plus Layover will NOT be approved)
- TONU: \$150.00, only paid if the carrier arrived to pick up on time and was not loaded.
- Late assessment up to \$200.00 per stop may be applied.
- Check Call: A missed check call fee of \$25/load may be assessed.
  - o Check calls must be made by 1000 EST daily.
  - o Driver/Dispatcher must call when driver arrives/departs each stop.
- Lumper/Unloading - A \$10 processing fee will be assessed if Broker issues T-Check.
- POD's not received within 48 hours of delivery will result in a fine up to \$150.00.
- **Tracking - Carrier will incur a \$150.00 fine per load which is not accepted via Fourkites Tracking or another form of Tracking such as driver's cell phone GPS.**

**FAILURE TO COMPLY WITH TERMS AND CONDITIONS OF CARRIER CONTRACT OR RATE CONFIRMATION MAY RESULT IN NON-PAYMENT OF THE ASSOCIATED FEES OR THE ASSESSMENT OF FINES AS DESCRIBED IN THIS RATE CONFIRMATION**



Ship Date: 06/13/2024

## MASTER BILL OF LADING

Page: 1/1

## SHIP FROM

CDC New Bern  
Central Distribution Center  
BSH Home Appliances Corp  
300 Executive Parkway  
New Bern NC 28562

Master Bill of Lading Number: 2506317728

## SHIP TO

BSH Home Appliances Corporation  
C/O Dart Warehouse Corporation  
300 NORTH MITCHELL ROAD  
NORTH AURORA IL 60542

CARRIER NAME: Exxact Transport inc  
Trailer number: EXXACT: 289472  
Seal number(s): C600406

SCAC: ETIS  
Pro number:

TIME IN: 15:59  
TIME OUT: 20:24  
DRIVER: F2  
BSH EMPLOYEE:

SPECIAL INSTRUCTIONS:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid Collect 3<sup>rd</sup> Party

☒ (check box)

Master Bill of Lading: with attached underlying Bills of Lading

## CUSTOMER ORDER INFORMATION

DELIVERY #	CUSTOMER ORDER #	QUANTITY	Volume	WEIGHT		ADDITIONAL SHIPPER INFO
8672159135		65	1,570.77 3 FT3	12765 LB		
8672159138		25	111.709 FT3	831 LB		
8672159145		3	103.800 FT3	984 LB		
PALLET COUNT				LB		
GRAND TOTAL		93	1786.282 FT3	14580 LB		

Where the rate is dependent of 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 \_\_\_\_\_"

SWP LBS PCS

RECEIVED in apparent good order (condition of contents of packages unknown) except as noted by carrier at the time of pickup, 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 been established by the carrier and are available to the shipper, on request; all the terms and conditions of the NMFC Straight Bill of Lading; and all applicable state and federal regulations.

## SHIPPER SIGNATURE / DATE

This is to certify that above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to any applicable transportation regulations.

## CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placecards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Trailer Loaded: Freight Counted

☐ By Shipper ☐ By Shipper  
☐ By Driver ☐ By Driver/pallets said to contain  
☐ By Driver Pieces

Third Party Freight Charges Bill To: BSH Home Appliances C/O CASS INFORMATION SYSTEMS PO BOX 17604 ST LOUIS, MO 63133

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. \* 14706(c)(1)(A) and (B)

Receiving Date: Time In Time Out

Consignee Appt date / Time:

Signature:

Printed Name:



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Ship Date: 06/13/2024

## MASTER BILL OF LADING

Page: 1/1

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*Morgan L. 6/19/24*

## SHIPPER SIGNATURE / DATE

This is to certify that above named materials are property classified, packaged, marked and labeled, and are in proper condition for transportation according to any applicable transportation regulations.

*Thomas 6/13/24*

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*F2 06/13/24*

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☐ By Driver Pieces

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Receiving Date: Time In Time Out  
Consignee Appt date / Time:  
Signature:  
Printed Name:



Scanned with CamScanner