



**Bill to:**  
SATURN FREIGHT SYSTEMS  
PO BOX 680308 ,  
Marietta,  
GA,  
30068

Invoice Date: 06/24/2024  
Invoice #: RDU 2162899  
Terms: NET 30  
Due Date: 07/24/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/21/2024		8380 Capital Blvd, Raleigh, NC 27616, USA - 484 Baer Dr, Hudson, WI 54016			
			1	\$2,500.00	\$2,500.00

TOTAL
\$2,500.00

**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**



DATE: 6/20/2024  
HAWB#: RDU 2162899

# LOAD - RATE CONFIRMATION

SATURN (RDU)  
P.O. BOX 680308  
MARIETTA, GA 30068  
Phone: 9193490011 Fax:  
REFERENCE NO: 2162899

CARRIER: ZIGI FREIGHT DBA ROYAL 3 INC

CONTACT: KELLY  
PHONE: 1-630-485-7370  
FAX: 16304856980  
PIECES: 9  
WEIGHT: 14270.  
COMMODITY DESCRIPTION: UPS  
REQUIRED EQUIPMENT: 53 FT DRY VAN  
CUSTOMS BROKER:

## INSTRUCTIONS TO DRIVER

1. MUST PROVIDE DRIVERS CELL PHONE.
2. DRIVER MUST CALL ABOVE NUMBER WHEN ARRIVING AT SHIPPER
3. DRIVER MUST CALL WHEN DEPARTING SHIPPER WITH ETA.
4. DRIVER MUST CALL WITH POD WHEN DELIVERED.
5. FAILURE TO TO ACCEPT MACROPOINT OR PROVIDE UPDATES WILL EFFECT PAYMENT.

FAILURE TO FOLLOW ABOVE INSTRUCTIONS WILL AFFECT PAYMENT

SHIPPER	CONSIGNEE
EATON POWER QUALITY 8380 CAPITAL BLVD DOCKS 1-4 RALEIGH, NC 27616 PHONE: 646-671-9558 FAX: CONTACT: JADA UPPERMAN	HUNT ELECTRIC 484 BAER DR  HUDSON, WI 54016 PHONE: 715-716-0935 FAX: CONTACT: MATT KOENIG
<b>PICK-UP TIME</b> 6/21/2024 8:00 AM - 4:00 PM	<b>DELIVERY TIME</b> by 6/24/2024 by 8:00 AM - 8:00 AM
<b>PICK-UP INSTRUCTIONS</b> PU# 224754249. MUST HAVE E TRACK & 5 STRAPS. IF DRIVER HAS TO USE SHIPPER'S STRAPS, \$25/STRAP WILL BE DEDUCTED FROM RATE CON. SHIPPER DOES NOT LOAD REEFERS. DRIVER IS RESPONSIBLE FOR SECURING FRT. YOU AGREE TO THE TERMS OF THIS RATE CON.	<b>DELIVERY INSTRUCTIONS</b> NEED HARD COPY POD WITHIN 1 HOUR OF DLVY WITHOUT FAIL!

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**AGREED RATE** \$ 2,500.00

By signing below, you are agreeing to the Terms and Conditions of this Load/Rate Confirmation.

FOR PAYMENT: ALL INVOICES AND BACKUP MUST BE SENT TO AP@SATURNFREIGHT.COM

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Carrier Pro#

Fax To: DONNA CHITWOOD

Fax#:

Date: 06/21/2024

## SUPPLEMENT TO THE BILL OF LADING

Page 3 of 3  
Bill Of Lading Number:  
45104307

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# OF PKGS	WEIGHT	PALLET/SLIP (circle one)		ADDITIONAL SHIPPER INFO
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
PAGE SUBTOTAL					

## CARRIER INFORMATION

HANDLING UNIT		EACHES						COMMODITY DESCRIPTION					LTL ONLY	
QTY	TYPE	QTY	TYPE	QTY	H.M.	(UN or NA)	Shipping Name	Hazard Class	Packing Grp	Total Qty	(Wt or Vol)	NMFC#	CLASS	
		2	EA	LB										
		2	EA	LB						0.6				
		2	EA	LB										
		2	EA	LB										
		2	EA	LB										
		2	EA	LB										
		2	EA	LB										
		14		581 LB			PAGE SUBTOTAL							



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Page 2 of 3  
Bill Of Lading Number:  
45104307

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Shipment is made up of:

## CUSTOMER ORDER INFORMATION

## ADDITIONAL SHIPPER INFO

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30T OH Crane, Standard Forklifts, Lull Forklift

Loading dock availability:

Dock height doors and drive in doors

Any special delivery requirements or expectations: Call 24Hrs before delivery

All other Lithium materials ship to:

PROLIFT

6000 Fulton Ave.

Lincoln, NE 68507

James Lamb, Project Manager

Cell: (402) 309-3616

jlamb@proliftrigging.com

## CUSTOMER ORDER INFORMATION

## ADDITIONAL SHIPPER INFO

CUSTOMER ORDER NUMBER	# OF PKGS	WEIGHT	PALLET/SLIP (circle one)	ADDITIONAL SHIPPER INFO
ELN02-000025	9	14270	Y N	8811156823
			Y N	See Attached Supplement BOL
GRAND TOTAL	9	14270		LTL



Date: 06/21/2024

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**BILL OF LADING**  
Freight Forwarder / Intermediary Address

Page : 1 of 3  
Date : 06/21/2024

<b>SHIP FROM</b> PQD Capital Plant Operations CPO Power Quality 8380 Capital Blvd. Raleigh NC 27616 US EFLN PQ1623 FOB <input type="checkbox"/>		<b>Bill of Lading Number: 45104307</b>  (402) 45104307 <b>CARRIER NAME : 122727 TRANSPLACE MEXICO LLC</b> Trailer number: saturn Seal number(s) :  <b>SCAC :</b> Pro number : 2162899 <b>Freight Charges Terms : (freight charges are prepaid unless marked otherwise)</b> Prepaid <u>X</u> Collect <u>  </u> 3rd Party <u>  </u> <b>PP1 FOB DESTINATION</b>  <input checked="" type="checkbox"/> Master Bill of Lading with attached  <b>Emergency Contact 24-Hour Number: 01-760-602-8703 VERISK</b> 3E Contract 2336
<b>SHIP TO</b> HUNT ELECTRIC APLD ELN02 484 BAER DRIVE HUDSON WI 54016-5885 US FOB <input checked="" type="checkbox"/>		
<b>ULTIMATE CONSIGNEE</b> APLD ELN-02 LLC 9663 87th Ave SE Ellendale ND 58436 US		
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>		

Shipment is made up of:  
\*\* SHIP SATURN FREIGHT \*\*

Please ship Saturn Freight

Samsung Lithium requires split shipment, no exceptions.

Empty battery racks (PN P-103003830) and top hats ship (PN P-103003835/36) to:

HUNT ELECTRIC  
484 Baer Drive,  
Hudson WI 54016

Jeff Hoyt jhoit@huntelec.com 612-271-9188  
Matt Koenig mkoenig@huntelec.com 715-716-0935

Site loading and unloading equipment/capabilities:

<small>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 _____</small>		<b>COD Amount: \$</b> <b>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></b> <b>Customer check acceptable: <input type="checkbox"/></b>	
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).</b> <small>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, classification and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the set terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.</small>			
<b>SHIPPER SIGNATURE / DATE</b> <small>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 DOT.</small>  6/21	<b>Trailer Loaded</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<b>Freight Counted</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	<b>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. 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.</small>



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		2	EA	LB						0.6				
		2	EA	LB										
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