

**B2B TRANSPORTATION**

PO Box 3670
Central Point, OR 97502

AP Phone: 888-809-6022 x142**AP Email:** ap@b2btranserv.com**Carrier Rate Confirmation**
LOAD #: GAM104282**DATE SENT:** 08/14/2024 12:43PM

CARRIER NAME: ZIGI FREIGHT INC
MC NUMBER: 944686
CONTACT: ASTA MIJAC
PHONE: 630-485-7370
EMAIL: dispatch@royal3inc.com

EQUIPMENT
REQUESTED: VA
DECLARED
VALUE: \$99,000.00

LOAD TYPE: TL**PICK UP: 08/14/2024 00:00**

LOCATION
AMERIKOOLER LLC
405 E 10 CT
HIALEAH, FL 33010
CONTACT: MANNY

INFODESCRIPTION / INSTRUCTIONSPCSPLTSWGTTEMP

WALK-INS
PU Num: 242818-19

1

0

14,000

SEAL NUMBER _____

DELIVER: 08/16/2024 09:00 to 08/16/2024 10:00

LOCATION
K-POT
8502 N JEFFERSON ST
KANSAS CITY, MO 64155

INFODESCRIPTION / INSTRUCTIONSPCSPLTSWGTTEMP

WALK-INS

1

0

14,000

SEAL NUMBER _____

AGREED RATES

Our Reference	Rate Type	Amount
GAM104282	BASE	\$1,600.00
Declared Value: \$99,000.00		TOTAL: \$ USD <u>\$1,600.00</u>

SPECIAL BILLING NOTES

* 'Load Number' and 'Our Reference Number(s)' must be referenced on your invoice.
* A copy of the Original Bills must be provided with your invoice.
* Rates include all Add-on and Surcharges.
* Any Freight Claims will be deducted from the agreed rates.

CONTACT
MASVIDAL, GABE

PHONE
305-582-2458

FAX

EMAIL
gabemasvidal@b2btranserv.com

Special Instructions:

This is a dedicated load. Failure to deliver on time or partial the load out will result in a rate reduction.

Customer Notes:



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1. This rate includes all stop-off charges, fuel surcharges, loading and unloading, out of route, tolls, detention, storage, and/or all arbitrary charges etc.
2. Deviation from these rates must be approved in writing and signed by both carrier and broker and a copy of signed approval must accompany the freight bill presented to B2B TRANSPORTATION SERVICES, INC.
3. All drivers must call B2B TRANSPORTATION SERVICES, INC. for dispatch, loaded and empty.
4. This rate agreement & current insurance must be on file, plus the ORIGINAL Bill of Lading & Proof of Delivery with freight bill for payment to be made.
5. Driver is responsible for weighing after being loaded.
6. Driver is required to enter Shipper and Consignee locations with standard OSHA P.P.E.
7. Any delays loading or unloading must be reported to B2B TRANSPORTATION SERVICES, INC. immediately. Legibly signed documents from Shipper and Consignee with arrival and departure times must be provided for all Detention requests.
8. Late pickup or late delivery may result in a rate reduction.
9. If the routing of this shipment includes California, the Carrier certifies that they are compliant with California ARB regulations (CARB) and indemnifies broker for any liability the broker incurs due to the Carriers non-compliance with California ARB regulations.
10. Double brokering is not allowed and may result in delayed or non-payment.
11. Driver must have adequate eligible Hours of Service (HOS) to meet the pickup and delivery schedule for this shipment.
12. Driver or Dispatcher must immediately call the contact listed below if the product(s) or destination(s) on the bill of lading are not the same as on this carrier confirmation.
13. Carrier must immediately notify B2B TRANSPORTATION SERVICES, INC. with questions, problems, or delays that pertain to this shipment.
14. This confirmation is to remain confidential between B2B TRANSPORTATION SERVICES, INC. and Carrier. In the event this is presented as a Bill of Lading to the shipper or consignee, rate reductions may apply.
15. Your signature indicates approval of all rates and terms listed above.

(SIGNATURE)

(PRINTED NAME)

(DATE)



INVOICE

BILL TO:

B2B TRANSPORTATION SERVICES INC
3512 EXCEL DR SUITE 101
MEDFORD, OR 97504

INVOICE DATE: 08/18/2024**INVOICE #:** GAM104282**TERMS:** NET 30**DUE DATE:** 09/18/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/14/2024		405 E 10 CT, HIALEAH, FL 33010 - 8502 N JEFFERSON ST, KANSAS CITY, MO 64155			
		Freight Income	1	\$1,600.00	\$1,600.00

TOTAL

\$1,600.00

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.

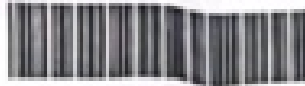
COMPASS FUNDING SOLUTIONS LLC**P.O.BOX 205154****DALLAS, TX 75320-5154****Tel: 844-899-8092**

AmeriKooler, Inc

575 East 10th Ave, Hialeah, FL 33010
Phone: (800) 627-5665
Fax: (305) 884-8330

STRAIGHT BILL OF LADING - ORIGINAL - NOT NEGOTIABLE

Pro #: 242818-19



Page:	1 of 1
B/L Number:	242818
PO Number:	KS-Frank - KPOT

Cosignee:

K-POT
Frank 704-699-6562
8502 N Jefferson St
Kansas City, MO 64155
US

Ship Date:	8/14/2024
Pay Terms:	Pre-Paid
Trailer:	

FRAGILE - HANDLE WITH CARE
DO NOT DROP
DO NOT USE FORKLIFT

SHIPPER:

AMERIKOOLER, INC.
575 EAST 10TH AVE
HIALEAH, FL, 33010
(305) 884-8384

BILL TO:

AMERIKOOLER, INC.
575 EAST 10TH AVE
HIALEAH, FL, 33010
(305) 884-8384



Collect on Delivery \$ _____ and remit to: _____

Street _____ City _____ State _____ Country _____

Carrier must collect cash or certified check unless shipper signs here to accept company check Zip Code _____

C.O.D. Charge Shipper ☐
to be paid by: Consignee ☐

Signed: _____

Help Units No. Type	Packages No. Type	Commodity Description	Weight	Ref #	NMFC	Class
	2	Pallets w/ 38 pcs PANELS	2700	242818		
	2	PLTS REF 4 PCS(2- condensing unit 2- evaporator)	700	242818	114125 3	125
	1	Pallet w/ 14 pcs PANELS	1150	242818		
	1	PLT REF 2 PCS(1- condensing unit 1- evaporator)	350	242818	114125 3	125
	6	TOTAL PALLETS W/ 58 PCS	4955			
		PO Number:KS-Frank - KPOT				
		SEAL # 44699705				

IR# HT-367112

* Mark "X" to designate Hazardous Materials as defined in DOT Regulations.

NOTE (1) 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 _____

NOTE (2) Liability Limitation for loss or damage on this shipment may be applicable. See U.S.C. 14706(c)(1)(A)(B).

NOTE (3) Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Sec. (2) of NMFC item 300.

Freight charges are PREPAID
unless marked collect.
CHECK BOX IF COLLECT ☐

FOR FREIGHT COLLECT SHIPMENTS:

If this shipment is to be delivered to the consignee, without recourse to the consignee, the consignee shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignee)

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, the property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, signed, and destined as shown above, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including the conditions on the back hereof, which are hereby agreed to by shipper and accepted for himself and his assigns.

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition, according to the applicable regulations of the Department of Transportation.

Shipper: AMERIKOOLER, INC

Carrier: To Be Determined

Per: *MF*

Per: