



LOAD # 52963312LN

Rate Confirmation

09-10-2024 15:13:06 UTC

DYNAMIC LOGISTIX
6800 W. 115th ST, STE 2601
OVERLAND PARK, KS 66211

F
R
O
M
Kennedy McGrath
913-904-5156
kmcgrath@shipdlx.com
kgp.ops@shipdlx.com

C
A
R
R
I
E
R
Brz
MC #: 086875 Truck #:
DOT: 3119062 Trailer #:
Driver: Gustavo Driver Cell #: 305-926-4858

Type: 53' Dry Van

Miles: 1529.43

Pickup 1

CORNING OPTICAL / EXPEDITORS
300 EAST OLMOS DR. SUITE B

HIDALGO, TX 78557

Phone/Contact: 956-283-5580/EDSON VILLARREAL

Ready: 09-11-2024

Hours:

Appt:

Appt #: 7:00-17:00

ORDER NUMBER	# PCS	# PKGS	WEIGHT	PO #	REFERENCE NUMBERS
52963312LN	10592	448	29254.00		KGP4426848 KGP4411478
GRAND TOTAL	10592	448	29254.00		

Delivery 2

KGP WARSAW-DC
2000 W WINONA AVENUE

WARSAW, IN 46580

Phone/Contact: /

Ready: 09-13-2024

Hours:

Appt: 09-13-2024 11:30

Appt #:

ORDER NUMBER	# PCS	# PKGS	WEIGHT	PO #	REFERENCE NUMBERS
52963312LN	10592	448	29254.00		KGP4426848 KGP4411478
GRAND TOTAL	10592	448	29254.00		

(Rate Confirmation Details on Next Page)

Carrier Signature: Luke MischeDate: / /

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Charges		Dispatch Notes
Freight -	\$2,800.00	DELIVERY APPOINTMENT REQUIRED.;
TOTAL RATE	\$2,800.00	

ANY EARLY, LATE OR MISSED APPOINTMENTS MAY RESULT IN FINES

To Confirm Load Acceptance, Carrier Must Sign and Return to csr@shipdlx.com or fax to 913-904-5138

Carrier's signature below constitutes certification that:

- This Confirmation is subject to and governed by the terms and conditions of the Carrier's contract with Dynamic Logistix and together they constitute the complete contract of carriage for this shipment.
- Carrier, its drivers, and its equipment, are and will remain in compliance with all FMSCA/DOT requirements.
- Carrier is aware of all special requirements pertaining to this load.
- Carrier understands that Dynamic Logistix is a licensed transportation broker and not a shipper, freight forwarder, or carrier.
- Carrier acknowledges its legal responsibility for loss, damage, or delay in delivery of this load.

- Driver Name: _____
- Driver Cell: _____
- Truck #: _____
- Trailer #: _____
- Equipment Type: _____
- Previous Delivery Location: _____
- Previous Delivery Time: _____
- Pick-up ETA: _____

• Please contact DLX to confirm temperature before leaving the shipper

- Driver information is required, and driver must accept Chain tracking. If the driver fails to do so and/or fails to notify DLX of a delay, there will be a fee of 10% of the freight up to \$300.
- Clean, odorless, food-grade trailer required.
- Carriers are responsible for submitting POD within 12 hours of the final delivery and notifying immediately of any overages, shortages, or damages.
- Driver is required to properly secure and seal shipments at origin and after every stop off until completion of shipment. Failure to comply may lead to rejection of shipments and carrier will be responsible for all losses or damages.

***** ATTENTION ACCOUNTING *****

- For QUICK PAY: email quickpay@shipdlx.com

Carriers are responsible for submitting POD within 24 hours of the final delivery and notifying DLX of any requested detention. Detention will not be paid outside of the 24-hour window.

- For STANDARD PAYMENT: email ap@shipdlx.com

- ALL PAGES OF THE POD FOR EACH ORDER MUST BE SUBMITTED BACK TO DLX FOR PAYMENT.

THANK YOU FOR WORKING WITH DYNAMIC LOGISTIX!

Carrier Signature: _____

Date: ____ / ____ / ____

Name:

Date:



INVOICE

BILL TO:
DYNAMIC LOGISTIX LLC
6800 W. 115TH ST, SUITE 2601
OVERLAND PARK, KS 66211

INVOICE DATE: 09/13/2024
INVOICE #: #52963312LN
TERMS: NET 30
DUE DATE: 10/13/2024

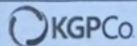
DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/11/2024		300 E Olmos Blvd, Hidalgo, TX 78557, USA - 2000 W WINONA AVENUE, WARSAW, IN 46580			
		Freight Income	1	\$2,800.00	\$2,800.00

TOTAL
\$2,800.00

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



Page 1 of 1

BOL NO: 52963312LN

BILL OF LADING

Carrier : DLX/Flopath Supply Chain Solutions

Shipper

Trailer Number:

Coming Optical / Expeditors
300 East Olmos Dr. Suite B
HIDALGO, TX 78557
Edson Villarreal, P: 956-283-5580

Seal Number:

Pickup Date: 09/06/2024

INBOUND	
DATE: 9-12-24	
RECEIVED NAME: <u>DLX/Flopath</u>	
488 PIECES ON	56 PALLETS
DRIVER SIGNATURE: _____	
DRIVER PRINTED NAME: _____	
SHORT _____	DAMAGED _____
OVERAGE _____	

PRO LABEL HERE

KGP WARSAW-DC
2000 W WINONA AVENUE
WARSAW, IN 46580

References

Customer PO Number: 3001979153
Pallets Stackable?: YES
PO Number: KGP4411478
PO Number: KGP4426848

Bill To

KGP TELECOMMUNICATIONS
C/O TRANSPORTATION INSIGHT
PO BOX 23000
HICKORY, NC 28603

Freight Terms

Prepaid: _____

Collect: ☒ X

3rd Party: _____

Special Instructions

Accessories

Notification Prior to Delivery

Qty	Type	Weight	Unit	HM (X)	NMFC	Item Description	LTL Class
56	PALLET	29254	lb			EVOLV 6F DIEL, A00F	85
						Dimensions: 42.0 X 42.0 X 45.0	
56		29,254				TOTAL PALLET: 56	
						GRAND TOTALS	

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 _____."

Remit COD to:

COD Type:

COD Amount:

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).

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, and to all applicable state and federal regulations.

Trailer

Loaded:

by Shipper

by Driver

Freight

Counted:

by Shipper

by Driver

The carrier shall not make delivery of this shipment without payment of and all other lawful charges.

Shipper: _____

Shipper Signature/Date:

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 Department of Transportation.

Shipper: Sofia Perez

Carrier Signature/Pickup Date:

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

Carrier: _____

9/11/24

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