

TRUCKLOAD RATE CONFIRMATION

120402714

Freight Flex
2437 Ft Worth Dr
Denton, Texas 76205
817-668-0666



Carrier Name: ZIGI FREIGHT INC

Pickup Date: 9/25/2024

Delivery Date: 9/26/2024

Service Level: Normal

Shipper Information:

Name: Spinrite Inc

Address: 190 Plymouth Street
WASHINGTON, NC 27889

Consignee Information:

Name: JO-ANN STORES DC06

Address: 2400 JOANN DRIVE
OPELIKA, AL 36801

Load #: 120402714

Customer PO: OPELIKA59

Shipper Ref:

Trailer Type/Size: Van / Full

Contact:

Phone:

Pick Up Time: 2:00 PM -
3:00 PM

Contact:

Phone:

Delivery Time: 11:00 AM -
12:30 PM

Handling Units	Package Type	Pieces	HAZMAT	List of Items	Total Weight
27	Pallet	27		YARN	8,020

PICKUP INSTRUCTIONS:

PU# OPELIKA59

DELIVERY INSTRUCTIONS:

9/26 @ 11 Confirmation #48088415

Rate: USD \$1,325.00
TOTAL: USD \$1,325.00

***** SIGNED POD IS REQUIRED WITHIN 48 HOURS OF DELIVERY*****

POD's must be signed by the consignee with printed name, date, signature and time of delivery

This confirmation governs the movement of the above-referenced freight as of the specified and hereby amends, is incorporated by reference and becomes a part of the certain transportation contract by and between "Broker" and "Contract carrier". Carrier Agrees to sign the confirmation and return it to the broker via FAX and carrier shall be conclusively presumed and compensatory that the freight would not have been tendered to Carrier at higher rates and that not shipments handled under such rates will subsequently be subject to a later claim for undercharges. IF AGREED SERVICES ARE FULFILLED, RATES ARE NOT NEGOTIABLE. Carrier is responsible for all delivery appointments. LATE DELIVERIES AND RETURN OF PROOF OF DELIVERY ARE SUBJECT TO RATE REDUCTION.

The undersigned accepts the referenced shipment on behalf of the carrier and acknowledge as correct the information contained herein, the carrier agrees to the terms of the Master agreement previously executed between our companies. Invoicing by the carrier and payment by Freight Flex Corporate, constitutes acceptance of this agreement and creates a valid contract for carriage shipment.

When loading, the driver must count and inspect his/ her load. The Driver / Carrier is responsible for piece count and condition of load at time of delivery. All shipments, unless otherwise specified, must be run 100% dedicated. If a carrier is caught combining or consolidating other freight then the load is subject to rate reduction. For payment of freight charges, we must receive signed Bill of landing and Proof of Delivery with a carrier invoice. Payment will be made 30 days after all required paperwork is received at Freight Flex Corporate, facilities. We are not responsible for Overweight. If Dimensions, Weight, Quantity or type of commodity are different than those consigned in our Load Confirmation Agreement, the carrier or Broker contracted MUST notify Freight Flex Corporate Before picking up and request a WRITTEN AUTHORIZATION. Freight Flex Corporate will not pay any extra charges without AUTHORIZATION.

*** FACTORING COMPANIES NEED TO EMAIL NOA TO FREIGHTFLEX@AUDIT.TRIUMHPAY.COM *** Phone: 817-668-0666

Please sign and return email to freightflex@audit.triumphpay.com

Carrier Signature:

MC#:

Jack Jarakovic

Driver Name: _____

Driver Phone#: _____



INVOICE

BILL TO:
FREIGHT FLEX
2437 FORT WORTH DRIVE
DENTON, TX 76205

INVOICE DATE: 09/26/2024
INVOICE #: 120402714
TERMS: NET 30
DUE DATE: 10/26/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/25/2024		190 Plymouth Street, Washington, NC 27889 - 2400 Joanne Drive, Opelika, AL 36801			
		Freight Income	1	\$1,325.00	\$1,325.00

TOTAL
\$1,325.00

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: 9/25/2024		BILL OF LADING		Page 1	
SHIP FROM		Bill of Lading Number		6924668	
Name: SPINRITE LP		CARRIER NAME: FRT FLEX			
Address: 190 PLYMOUTH STREET		Trailer number: PTL-24U-777			
City/State/Zip: WASHINGTON, NC 27889		Seal Number(s): 55369830			
SID #		SCAC:			
SHIP TO		Pro number:			
Name: JO ANN STORES INC DCO6		Packing list attached to B/L & Freight		XXX	
Address: 2400 JO ANN DRIVE		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)			
City/State/Zip: OPELIKA, AL 36801-9740		Prepaid <input type="checkbox"/> Collect XX 3rd Party <input type="checkbox"/>			
CIS#		Master bill of Lading: with attached			
THIRD PARTY FREIGHT CHARGES BILL TO:		(check box)			
Name: JO-ANN STORES, LLC C/O INTUNE LOGISTICS		underlying Bills of Lading			
Address: PO BOX 27152					
City/State/Zip: GREENVILLE, SC 29616					
Special Instructions:					
REF # OPELIKA59					
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		#CTNS		WEIGHT	
0174726107 Jo Ann Stores, LLC		PALLETS		PALLET/SUP	
0174726108		14		281	
Shipment must be received as listed on freight bill		13		234	
Received <u>Carbons</u> <u>Pallets</u>		YES		YES	
Carbons/Pallets Short		6924668		6924662	
Carbons/Pallets Refused					
Carbons/Pallets Not Used					
Signature: <u>[Signature]</u>					
Grand Total: 27		515		10451	
CARRIER INFORMATION		H.M.		COMMODITY DESCRIPTION	
HANDLING UNIT: Multiple cartons		(X)		YARN/KITS	
QTY 515		TYPE CTNS		10451	
PACKING LIST ATTACHED					
GRAND TOTAL				GRAND TOTAL	
Where the value is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, as follows:		Free Terms: <input type="checkbox"/> Collect: <input type="checkbox"/>		Prepaid: <input type="checkbox"/>	
The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \$100,000		Customer check acceptable:			
NOTE Liability Limitation for loss or damage in this shipment may be applicable, See 49 U.S.C. 14706 (Y) and (B).		The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		Shipper	
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,		Freight Counted:		CARRIER SIGNATURE/PICKUP DATE	
SHIPPER SIGNATURE / DATE		By Shipper <input type="checkbox"/>		Signature	
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		By Driver <input type="checkbox"/>		Signature	
According to the applicable regulations of the DOT		By Driver / Pieces <input checked="" type="checkbox"/>		Signature	
9/25/2024		LOADED BY:		Signature	
Ann Ange					

DRIVER LOADED:

DRIVER ARRIVED:

DRIVER APPT TIME: - 2:30 PM