Payne Trucking Co. 10411 Hall Industrial Drive Fredericksburg, VA 22408

Phone 540-898-0045 540-898-2313 Fax 540-898-0192 0537825

Carrier: ZIGI FREIGHT INC

**CHICAGO** 

IL

Contact:

DISPATCH

09/26/2024

60638

Phone: Fax:

Order Order:

Date:

0537825

Commodity:

Miles:

Phone:

Phone:

895.0

Weight: Trailer:

Temp: BOL:

100001491155 540-898-1346

Reference: 100001491155

Contact:

**BROKERAGE DISPATCH** 

FOOD CONTAINERS

**PU 1** 

**Phone** 

Name: Address:

**PACTIV** 2769 ROUSE RD EXD

Date: 09/26/2024 1200

09/26/2024 1200

KINSTON

NC 28504

Driver Load: N

Driver Load: N

Reference number:

PO 5502477104

**SO 2** Name: **PACTIV** 

Date:

09/27/2024 1000

Address:

1 EARL CT

WOODRIDGE 60517

09/27/2024 1000

**Payment** 

**Carrier Freight Pay:** 

\$1,400.00

**Total Carrier Pay:** 

\$1,400.00

Instructions

Special instructions here

Marisa S.

Agreement

Please sign and fax back to

**Bart Weil** 

Driver MUST check in under Payne Trucking at both the Shipper and Receiver

\*\*\*\*\*\*MUST DELIVER AT TIME/DATE STATED ON RATE CON \$250.00 FINE FOR EARLY OR LATE DELIVERY\*\*\*\*\*

\*\*NO DETENTION OR LAYOVER WILL BE APPROVED IF LOAD IS NOT TRACKED FOR THE DURATION\*\* \*Detention Must be reposted via email to brokerage@paynetrucking.com at least 30 minutes before detention begins or it will be denied\*

\* Driver Must report any overages, shortages of damaged product immediately\*. \*\*\*DRIVER MUST ACCEPT TRACKING OR \$100 WILL BE DEDUCTED FROM RATE\*\*\*

\*\*\*POD MUST BE EMAILED WITHIN 48 HRS TO AP@PAYNETRUCKING.COM OR THERE WILL BE A 10% REDUCTION OF RATE\*\*\*

Page

1



## **INVOICE**

BILL TO: PAYNE TRUCKING CO 1002 FERN CT WARREN, OH 44484-5600 INVOICE DATE: 09/30/2024 INVOICE #: 0537825 TERMS: NET 30 DUE DATE: 10/30/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/26/2024		2769 Rouse Rd Exd, Kinston, NC 28504 - 6850 W 63rd St, Chicago, IL 60638, USA			
		Freight Income	1	\$1,400.00	\$1,400.00

TOTAL	
\$1,400.00	

## 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

## LOT Manifest Report

Delivery: 0020935811/ Port Count: 31 Carrier:PAYE Trailer:H03262

Plant:: 9208 Whse: KNS Total Cube:2283,930 Total Weight:18013

Page:1 of 1 Date:09/26/2024 Time:12:15:05 User:MDW9439

"Pactiv certifies that the item(s) supplied in this order, and listed below, were manufactured & Manufacturing Practices" specifications, food safety standards and produced using Good Food contact materials supplied comply with FDA (USDA) regulation (FDA 21 CFR)

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		1146007459	CS	18.000	20033
09/7/1001		1146007460	CS	18.000	20002
		1146007481	CS	18.000	76635
		1146007482	CS	18.000	26635
09/20/2024 103772862		1146007468	3	10,000	26635
09/20/2024 103772862		1146007467	60	18 000	26635
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09/20/2024 103772862		1146007466	Ce	18.000	26635
09/20/2024 103772862		114000/403	Co	18.000	26635
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		114600	CS	18.000	20033
		1146007477	CS	18.000	D6606
		1146007475	CS	18.000	06635
-		1146007476	CS	000.81	26635
Prod Date Lot/Batch		Pall Number	MOD	VI)	26635

SEND PREPA	ID ERFICI	TT BILLS	s Tvo		AIGHT BILL OF	MD#			SB#	PACKE	NG LIST SH
C/O PACTIV	LLC-CASS	INFORM/	ATION	SYSTEMS			014911.		01000	01491	155
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					FCL CLASS NA	AFC NUMBER	CASES PER CLS				
PAYNE INC manent Post Off TIV / KINSTO	ice Address	of Shippe	ERENO T	CE 10000	1491155 FOR 1	BILL PAYMI	ENT**	TRAILER H03262		SEAL NO. 8484794	
ROUSE RD E STON, NC 285 NESS HOURS:	XT. 04				201-6	40-759		PRO#			
ER HOURS:252					SL+C \( \times \) DA O9 CL+C \( \times \)	/26/2024	CHECKED	all other require	s used for this shipm forth in the box ma ments of Uniform For if stamp, not a part of	kers certification	
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