

WEL LOGISTICS, INC
1625 S BROADWAY
DE PERE WI 54115

PRO # 180727

Rate Confirmation

10/07/24 16:37:07 (EST)

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M

TONY THORNSBURG
(920) 241-8228
(888) 555-2222 (f)
tracking72@welcompanies.com

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ZIGI FREIGHT INC
(630) 485-7370 (p)
(630) 485-6980 (f)
MC # 944686 Truck # 768
DOT 2828543 Trailer # W94946
Driver HERIBERTO Cell # (980) 946-0633

Size & Type: VAN
Pieces:

Description: PAPER
Weight: 23879

Miles: 289

CHARGES		DISPATCH NOTES
LINE HAUL RATE	650.00	
TOTAL RATE	650.00	

PICK 1

DC COPPELL
4255 PATRIOT DR STE 20
GRAPEVINE TX 76051
Phone/Contact: (817) 527-0659

Appointment 10/07/24 @ 12:00
Ref # 106880191

STOP 1

SCF AUSTIN ANNEX 786
9001 TUSCANY WAY
AUSTIN TX 73301
Phone/Contact: (512) 670-9000

Appt Notes: FCFS

STOP 2

SCF AUSTIN ANNEX 786
8225 CROSS PARK DR
AUSTIN TX 73301

Appt Notes: FCFS

STOP 3

SCF SAN ANTONIO 780
10410 PERRIN BEITEL RD
SAN ANTONIO TX 78284

Appointment 10/08/24
Appt Notes: FCFS

PLEASE, REPLY- ALL ON THIS EMAIL CHAIN WITH LOAD # AND TRACKING TEAM ATTACH
DRIVERS MUST CHECK IN AS WEL COMPANIES OR YOU WILL BE DELAYED LOADING
ALL DETENTION MUST BE REPORTED 24 HOURS AFTER DELIVERY WITH TIMES ON BOL
POD MUST BE SUBMITTED 24 HOURS AFTER DELIVERY
**YOUR DRIVER MAY NEED TO INFORM SHIPPER THE LOAD IS ASSIGNED TO WEL LOGISTICS
**BY ACCEPTANCE OF SHIPMENT, CARRIER GUARANTEES THAT IT IS MANAGING ITS
DRIVER(S) AND OPERATIONS IN ACCORD WITH THE CARRIER AGREEMENT AND ALL STATE
AND FEDERAL REQUIREMENTS FOR AUTHORIZED MOTOR CARRIERS.
**MANY SHIPPERS AND CONSIGNORS REQUIRE A TRAILER NO OLDER THAN 10 YEARS. YOU
MAY BE TURNED AWAY AT THE PICK-UP LOCATION IF YOUR TRAILER IS OLDER THAN 10
YEARS.
**TO COMPLY WITH REGULATORY AND CUSTOMER REQUIREMENTS, CARRIER AGREES TO THE
EXCLUSIVE USE OF ITS TRAILER FOR THE DURATION OF THE TRANSPORT OF THE FREIGHT
IDENTIFIED ON THE RATE CONFIRMATION.
**YOUR DRIVER IS RESPONSIBLE FOR COUNT. ANY TYPE OF DISCREPANCY REGARDING
SHIPMENT MUST BE IMMEDIATELY REPORTED TO AVOID POSSIBLE FREIGHT CLAIM.

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date ____/____/____
M D

Doc ID: 262410072935645901
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 180727

must appear on all Invoices



WEL LOGISTICS, INC
1625 S BROADWAY
DE PERE WI 54115

PRO # 180727

Rate Confirmation

10/07/24 16:37:07 (EST)

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TONY THORNSBURG
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MC # 944686
DOT 2828543
Driver HERIBERTO

Truck # 768
Trailer # W94946
Cell # (980) 946-0633

**** AFTER 3 HRS OF WAITING AT SHIPPER, PLEASE CALL THE NUMBER ON THIS RATE CONFIRMATION TO REPORT ANY DETENTION.**

**** PLEASE SEE YOUR CONTRACT REGARDING CARGO CLAIMS AND INCIDENT REPORTING. IF INCIDENTS OR ACCIDENTS OCCUR RELATING TO A DELAY OF DELIVERY OR DAMAGE TO THE CARGO. IF YOU REQUIRE A RESET ON DELIVERY DATE AND TIME, CALL THE NUMBER ON THIS RATE CONFIRMATION FOR ASSISTANCE.**

**** TO AVOID QUESTIONS REGARDING LOAD SECURITY, THE SHIPPER SHOULD SEAL THE LOAD AND NOTE THE SEAL NUMBER, THE DOCUMENTATION MATCHES THE SEAL NUMBER ON THE TRAILER; AND YOUR DRIVER SHOULD ALWAYS BREAK A SEAL IN THE PRESCENCE OF A RECEIVER AND HAVE THE RECEIVER NOTE THE SEAL WAS INTACT AT THE TIME ON THE BILL OF LADING.**

****NO DOUBLE BROKERING- BROKER HAS NO DUTY TO PAY FOR TRANSPORTATION COMPLETED BY ANY INDIVIDUAL OR CARRIER OTHER THAN AS LISTED IN THE CARRIER SECTION ABOVE. YOUR AGREEMENT HAS MORE DETAIL ON THIS PROHIBITION.**

****LATE PICKUP OR DELIVER AT THE SET DATE AND TIME, CARRIER WILL BE SUBJECT TO A \$300 CHARGE PER STOP AND ANY OTHER ASSOCIATED FEES IMPOSED BY THE CUSTOMER.. YOUR DRIVERS(S) MUST GET A CLEAR SIGNATURE AND TOTAL COUNT ON DELIVERY RECIEPTS. IF DELIVERY RECEIPT INDICATES OTHER SPECIAL INSTRUCTIONS, PLEASE ADHERE TO THEM AND CALL WITH ANY QUESTIONS. A \$50 FEE WILL BE CHARGED TO THE CARRIER FOR LOST PAPERWORK.**

****CARB NOTICE- TO THE EXTENT ANY SHIPMENTS SUBJECT TO THIS AGREEMENT ARE TRANSPORTED WITHIN THE STATE OF CALIFORNIA, CARRIER SHALL ONLY UTILIZE EQUIPMENT WHICH IS IN FULL COMPLIANCE WITH THE CALIFORNIA AIR RESOURCES BOARD ** (ARB) TRU ACTM IN-USE REGULATIONS. CARRIER SHALL BE LIABLE FOR ITS OWN PENALTIES OR OTHER LIABILITIES, COSTS OR DAMGES ASSESSED AGAINST IT OR PAID BY BROKER OR BROKER'S CUSTOMER, OR AY OTHER THIRD PARTY, BECAUSE OF CARRIER'S USE OF NON-COMPLIANT EQUIPMENT.**

****THIS IS CONFIRMATION OF A VERBAL LOAD/RATE BETWEEN CARRIER AND THIS RATE CONFIRMATION SERVES AS AN ADDENDUM TO THE OUTSOURCED CARRIAGE AGREEMENT AS IT RELATES TO THIS SINGLE SHIPMENT. ALL LOADS TENDERED PURSUANT TO THIS RATE CONFIRMATION SHALL BE SUBJECT AND SUBORDINATE TO THE CURRENT TERMS, CONDITIONS AND PROVISION OF WEL LOGISTICS. OUR SOURCED CARRIAGE AGREEMENT AND ANY APPLICABLE AMENDMENTS THERETO. THE TERMS AND CONDITIONS OF THE OCA ARE HEREBY INCORPORATED BY REFERENCE. CARRIER'S SIGNATURE AND RETURN OF THE TENDER OF BY THE ACTUAL ACCEPTANCE/CONTINUATION OF THE TENDERED SHIPMENTS.**

****PLEASE SIGN AND EMAIL BACK TO THE EMAIL ABOVE.**

****PLEASE EMAIL WEL-LOGISTICSAP@WELCOMPANIES.COM FOR PAYMENT STATUS**

****SEND ALL DELIVERY RECEIPTS WITH SIGNATURES ALONG WITH YOUR INVOICE, SIGNED RATE CONFIRMATION TO LOGISTICS-PAPERWORK@WELCOMPANIES.COM**

****QUICKPAY- NEED TO BE EMAIL TO WEL-LOGISTICSAP@WELCOMPANIES.COM PLEASE PUT YOUR LOAD NUMBER IN THE SUBJECT LINE ALONG WITH 'QUICK PAY'**

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 262410072935645901
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 180727

must appear on all Invoices

E-Signed : 10/07/2024 03:38 PM CDT

Sterling Medica

sterling@royal3inc.com
IP: 50.76.79.115

Sertifi Electronic Signature
DocID: 20241007153634990



INVOICE

BILL TO:
WEL LOGISTICS INC
1625 S. BROADWAY
DE PERE, WI 54115

INVOICE DATE: 10/09/2024
INVOICE #: 180727
TERMS: NET 30
DUE DATE: 11/09/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/07/2024		4255 Patriot Dr Ste 20, Grapevine, TX 76051 - 10410 Perrin Beitel, San Antonio, TX 78284, USA			
		Freight Income	1	\$650.00	\$650.00

TOTAL
\$650.00

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

BILL OF LADING

SHIP FROM		Bill of Lading Number: 0000000000402859	
Name: LSC Logistics			
Address: 4255 PATRIOT DR STE 200		Manifest ID: 106880191	
City/State/Zip: GRAPEVINE TX 76051	FOB: <input checked="" type="checkbox"/>	Carrier Name: WEL COMPANIES, INC.	
Shipper ID: DALLAS		Trailer Number: W94946	
		Seal number(s): 60585571 60585572 60585573	
SHIP TO		SCAC: WEIL	
Name: SCF AUSTIN 786	Location #: _____	Pro Number: _____	
Address: 8225 CROSS PARK DR			
City/State/Zip: AUSTIN TX 78710-9998	FOB: <input type="checkbox"/>		
Consignee ID: LM159126		Freight Charge Terms: Prepaid	
THIRD PARTY FREIGHT CHARGES BILL TO		<input checked="" type="checkbox"/> Master Bill of Lading: With attached underlying Bills of Lading	
Name: LSC COMMUNICATIONS MCL LLC		SPECIAL INSTRUCTIONS: Appointment Number : 130458987	
Address: 1000 WINDHAM PKWY		Appointment Date : 10/08/2024	
City/State/Zip: BOLINGBROOK IL 60490-3507		Appointment Time : 0900	

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO
CUSTOMER ORDER NUMBER	QTY	WEIGHT	PALLET/SKIP		
1001	12,323	804	Y		
15	1	873	Y		
21332	60,777	1,662	Y		
5	2	2,940	Y		
7	3	4,158	Y		
76603	19,765	1,866	Y		
	34,335	2,150	Y		

CARRIER INFORMATION					LTL ONLY
SKU	HANDLING UNIT PACKAGE		WEIGHT	H.M. (X)	
	QTY	TYPE	QTY	TYPE	NMFC #CLASS
MAIL	16	CONT	127,206	EACH	14,454
	16		127,206		14,454
					Grand Total

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value to the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"

COD Amount: \$ _____
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C - 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

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

Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, package, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Luiz Paetz 10-7-24

Trailer Loaded:

- ☐ By Shipper
☐ By Driver

Freight Counted:

- ☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of package and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as

Date: 10/7/2024 4:46:10PM

BILL OF LADING

Page: 3

SHIP FROM

Name: LSC Logistics
Address: 4255 PATRIOT DR STE 200

City/State/Zip: GRAPEVINE TX 76051

Shipper ID: DALLAS

FOB: ☒

SHIP TO

Name: SCF SAN ANTONIO 780
Address: 10410 PERRIN BEITEL RD

Location #: _____

City/State/Zip: SAN ANTONIO TX 782849991

Consignee ID: LM4342

FOB: ☐

THIRD PARTY FREIGHT CHARGES BILL TO

Name: LSC COMMUNICATIONS MCL LLC

Address: 1000 WINDHAM PKWY
1-833-744-7572

City/State/Zip: BOLINGBROOK IL 60490-3507

Bill of Lading Number: 00000000000402859



Manifest ID: 106880191

Carrier Name: WEL COMPANIES, INC.

Trailer Number: W94946

Seal number(s): 60585571 60585572 60585573

SCAC: WEIL

Pro Number: _____

Freight Charge Terms: Prepaid

☒ Master Bill of Lading: With attached
underlying Bills of LadingSPECIAL INSTRUCTIONS: Appointment Number: 130458992
Appointment Date: 10/08/2024
Appointment Time: 1200

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	QTY	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
21332	76,613	2,082	Y	
5	3	3,702	Y	
7	4	3,874	Y	
76603	19,369	1,805	Y	
ALL MAIL FROM COMAIL ARE	16,273	4,909	Y	
	21,454	1,364	Y	

CARRIER INFORMATION

SKU	HANDLING UNIT PACKAGE				WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
	QTY	TYPE	QTY	TYPE				NMFC #	CLASS
MAILD	4	CONT	16,273	EACH	4,909		Mail	161700	55
MAILT	15	CONT	117,443	EACH	12,826		Mail	161700	55
	19		133,716		17,735		Grand Total		

E. Gonzales 10/8/24

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value to the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C - 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

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

LSC Logistics Shipper

Signature _____

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Luis Paez 10-7-24

Trailer Loaded:

☐ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ By Driver/pallets said to contain☐ By Driver/pieces

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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as

(15)

1210

Date: 10/7/2024 4:46:10PM

BILL OF LADING

Page: 1

SHIP FROM		SHIP TO	
Name:	LSC Logistics	Name:	SCF AUSTIN ANNEX 786PM
Address:	4255 PATRIOT DR STE 200	Address:	9001 TUSCANY WAY
City/State/Zip:	GRAPEVINE TX 76051	City/State/Zip:	AUSTIN TX 78710-0002
Shipper ID:	DALLAS	Consignee ID:	LM3859
FOB:	<input checked="" type="checkbox"/>	FOB:	<input type="checkbox"/>
THIRD PARTY FREIGHT CHARGES BILL TO		Freight Charge Terms: Prepaid	
Name:	LSC COMMUNICATIONS MCL LLC	<input checked="" type="checkbox"/> Master Bill of Lading: With attached underlying Bills of Lading	
Address:	1000 WINDHAM PKWY	SPECIAL INSTRUCTIONS: Appointment Number : 130459682	
	1-833-744-7572	Appointment Date : 10/08/2024	
City/State/Zip:	BOLINGBROOK IL 60490-3507	Appointment Time : 0800	

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	QTY	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
4097116-2 LOT 1	495	276	Y	
Grand Total	495	276		

CARRIER INFORMATION

SKU	HANDLING UNIT PACKAGE				WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary See Section 2(e) to NMFC Item 360)</small>	LTL ONLY	
	QTY	TYPE	QTY	TYPE				NMFC #	CLASS
MAILD	1	CONT	495	EACH	276		Mail	161700	55
	1		495		276		Grand Total		

980
946
0633

SIGNATURE

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value for the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C - 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

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

LSC Logistics
Signature _____ Shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Luis Perez 10-7-24

Trailer Loaded:

- ☐ By Shipper
☐ By Driver

Freight Counted:

- ☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/pieces

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