

Rate & Load Confirmation

New England Expeditors

9725 Woods Dr
Skokie, IL, USA 60077
Phone: 630-568-6714
Fax:

Dispatcher:	Nelly M	LOAD #	5284
Phone #:	630-568-6714	Ship Date:	2024-10-10
Fax #:		Today's Date:	2024-10-09
Email:	nelly@newengexp.com		
W/O:	91446		

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
Zigi Freight Inc. dba Royal3	630-485-7370		53' Van	\$1,600.00 USD	Open

Shipper 1 Edenton, NC, 27932	Date: 2024-10-10 Time: Type: Pallets Quantity: Weight: 43100 lbs	Purchase Order #: Major Intersection: Shipping Hours: 7am-3pm Appointment: No Description: FAK
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Consignee 1 4108 Warehouse 4108 W 52nd St Chicago, IL, 60632	Date: 2024-10-11 Time: Type: Pallets Quantity: Weight: 43100 lbs Notes: can DEL 8am-10pm	Purchase Order #: 91446 Major Intersection: Receiving Hours: M-F 8am-10pm Sat-Sun 7am- Appointment: No Description: FAK
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Dispatch Notes:

Driver can't show RC to the shipper/ receiver. Driver can't call/email any of the contacts mentioned on the BOL, otherwise rate deduction will apply

Please confirm if the freight is on pallets before loading. Please report us immediately if it's floor loaded

CARRIER MUST SEND PICTURES OF BOL, FREIGHT AND SEAL IMMEDIATELY AFTER PICK UP/ POD AFTER DELIVERY OTHERWISE \$100 CHARGE WILL BE APPLIED

Detention policy:

1 – detention \$30 per hour after 2 hours of loading/unloading, \$150 max (we require BOL with in and out times and shipper's/ receiver's signature)

2 - \$150 TONU (only if the driver was onsite for the pickup when the load was cancelled)

3 - \$150 layover

*Fees up to \$250 apply if not connected to Trucker Tools

*NEX will pay all Load and Unload events directly to the Load or Unload service.

*Do not pay out of pocket as you will not be reimbursed for Load or Unload costs.

* Send a copy of the lump sum receipt with BOL upon load completion.

*Late fees will be added on for missed appt. Late fee is \$200 per day if not otherwise specified.

ALL BILLS MUST BE SENT TO accounting@freight-lab.net

Carrier Pay: Line Haul: \$1600.00, **TOTAL: \$1600.00 USD**

TRUCKSTOP
ITS Dispatch

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Accepted By: _____ Date: _____ Signature: Asta Mijat

Driver Name: _____ Cell #: _____ Truck #: _____ Trailer #: _____



INVOICE

BILL TO:
NEW ENGLAND EXPEDITORS
725 LINCOLN AVE
PARK RIDGE, IL 60068

INVOICE DATE: 10/11/2024
INVOICE #: 5284
TERMS: NET 30
DUE DATE: 11/11/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/10/2024		185 Peanut Dr, Edenton, NC 27932, USA - 4108 Warehouse, 4108 W 52nd St, Chicago, IL, 60632			
		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

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Bill Of Lading

New England Expeditors
9725 Woods Dr
Skokie, IL 60077
USA
Tel: 630-568-6714

Load Number	5284
BOL Number	91446
Ship Date	2024-10-10
Delivery Date	2024-10-11
P.O. Number	
Freight Charges	Third Party

Shipper	Consignee
J.HORROCKS DESIGN, LLC 185 PEANUT DRIVE, Edenton, N.C. 27932 Tel:	4108 Warehouse 4108 W 52nd St Chicago, IL, 60632 Tel:

3rd Party Billing	Transportation Company
	Zigi Freight Inc. dba Royal3 6850 W 63rd St, Chicago, IL 60638, United States Chicago, IL, 60638 Tel: 630-485-7370

# of pieces	Description of the goods, marks, exceptions	Weight in LBS.	Type	NMFC	HM	Class
0	FAK	43100	Pallets			
	RECEIVED BY					
	SL # 91446					
	Print <i>Car F. gree</i>					
	Sign <i>[Signature]</i>					
	Date 10/11/2024					
	Seal <i>[Signature]</i>					
Total Pieces 0	shipper count and secure	Total Weight 43100 LBS.	Emergency Response Phone			

Notes:	C.O.D. Amount: \$0.00
	C.O.D. Fee: Prepaid
	Declared Value: \$0.00
	If at consignor's risk, write or stamp here

Shipper	Carrier	Date	Number Of Pieces Received
Per	Per	Time	

Consignee Name	Date	Signature	Number Of Pieces Received
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