



INVOICE

BILL TO:
HOT SHOT LOGISTICS
696 VERDI STREET
WOODSTOCK, IL 60098

INVOICE DATE: 11/01/2024
INVOICE #: R63622
TERMS: NET 30
DUE DATE: 12/01/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/30/2024		485 5700 W suite 100, Salt Lake City, UT 84104, USA - 541 Perkins Jones Rd NE, Warren, OH 44483, USA			
		Freight Income	1	\$3,450.00	\$3,450.00

TOTAL
\$3,450.00

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

CARRIER RATE CONFIRMATION

ORDER ID: E5527427



A Bridgeway Company

To ensure TIMELY payment, please **EMAIL** your invoice, signed load paperwork and rate confirmation in a single PDF file (one load per email) to LoadDocs@bridgeway.io. When sending the file, you must reference our Order ID# in either the email subject line OR the body of the email. Your invoice should also reference our Order ID#.

Load Code: **VAMZSSVE**

Please Download Tilt Tracker Android/iOS App And Enter Load Code

For a full list of our available loads visit availablefreight.bridgeway.io**SHIPPER**

Name: HEMASOURCE
Address: 485 South 5700 West
City/State: SALT LAKE CITY,UT 84104
Phone: () -
Reference #: Bill of Lading # - 60324617
Pickup Date/Time: 10/30/2024 08:00 AM - 01:00 PM

CONSIGNEE

Name: Hemasource Inc
Address: 541 PERKINS JONES RD NE STE 200
City/State: WARREN,OH 44481
Phone: () -
Delivery Date/Time: 11/01/2024 08:00 AM - 08:00 AM

STOPS INFORMATION

Event	Company	Address 1	City, St.	Arr/Dep Date And Time
Live Load	HEMASOURCE	485 South 5700 West	SALT LAKE CITY,UT 84104	10/30/2024 08:00 AM - 01:00 PM
Live Unload	Hemasource Inc	541 PERKINS JONES RD NE STE 200	WARREN,OH 44481	11/01/2024 08:00 AM - 08:00 AM

CARRIER PAY DETAILS

Type	Pay
Line Haul:	\$3450.00
Total Carrier Pay:	\$3450.00

CARRIER DETAILS

Carrier: ROYAL3 INC
Carrier Phone#: (630) 485-7370
Carrier Fax#: (630) 485-6980
MC#: 944686
Driver Name: Heriberto
Driver Cell: (980) 946-0633

LOAD DETAILS

Commodity: Medical Supplies
Approx. Weight: 10000
Dimensions: L: 53'-0" W: 0'-0" H: 0'-0"
Trailer Type: Van
Tarp: No
Load Note:

1. **DRIVER MUST TO ACCAPT TRUCKING AND BE TRUCKING ALL THE WAY DOWN TO THE DELVIERY or \$250 rate fine ! Driver must send a phottos of the freight and BOL once loaded and once unloaded or \$150 rate fine**

CARRIER PAYMENT INSTRUCTIONS

All Carrier Payments now processed through **TriumphPay.com**
Please register online in order to receive payments:
1. Go to <https://secure.triumphtpay.com/>
2. Register your company
3. Connect with Hot Shot Express, Inc
4. Add your payment information / banking instructions

ADDITIONAL INFORMATION

1. Charges may be assessed to carrier for late pickup or delivery. Carrier must adhere to all hours of service regulations.
2. **ABSOLUTELY NO DOUBLE BROKERING!**
It is agreed that any re-brokering of this load will result in non-payment to Carrier, in addition to any other penalties by contract or Law.
3. **FOOD SAFETY MODERNIZATION ACT (FSMA)-** IF CARRIER IS TRANSPORTING CARGO THAT IS SUBJECT TO THE FSMA, CARRIER MUST PROVIDE TRANSPORTATION IN COMPLIANCE WITH THIS ACT. SHIPMENTS OF FOOD THAT WILL ULTIMATELY BE CONSUMED BY HUMANS OR ANIMALS THAT HAVE NOT BEEN TRANSPORTED IN COMPLIANCE WITH FMSA MAY BE CONSIDERED ADULTERATED BY THE SHIPPER, RECEIVER, OR OWNER OF THE GOODS AND REJECTED FOR DELIVERY. ANY SUCH REJECTIONS, AT THE SOLE DISCRETION OF ANY OF THOSE PARTIES, WILL BECOME THE SOLE LIABILITY OF CARRIER. CARRIER AGREES TO DEFEND, INDEMNIFY AND HOLD BROKER HARMLESS FOR CARRIER'S FAILURE TO ADHERE TO THE REQUIREMENTS OF THE FSMA OR FOR THE REJECTION OF ANY ADULTERATED SHIPMENTS.
4. **NATIONAL DEFENSE AUTHORIZATION ACT (NDAA)-** SHIPMENTS FOR THE DEPT. OF DEFENSE, SUPPLIERS FOR THE DEPT. OF DEFENSE, AND OTHER GOVERNMENTAL AGENCIES AND CONTRACTORS SUBJECT TO THE NDAA REQUIRE THAT CARRIER BE IN COMPLIANCE WITH THE ACT. BY ACCEPTING THE CARGO, CARRIER HEREBY CERTIFIES THAT CERTAIN CHINESE TELECOMMUNICATIONS AND VIDEO SURVEILLANCE EQUIPMENT AND SERVICES ARE NOT USED IN THE PERFORMANCE OF SERVICES BY CARRIER AND IN COMPLIANCE WITH NDAA. FOR MORE INFORMATION ON THE NDAA AND CARRIER COMPLIANCE SEE: <https://www.sddc.army.mil/pubs/Shared%20Documents/MFTRUP-1.pdf>
5. No detention or truck ordered not used charges will be paid to the Carrier unless Broker receives payment from its customer for such time claimed by Carrier. Carrier specifically acknowledges and agrees that Broker's receipt of payment from its customer is a condition precedent to Broker's payment obligations to the Agreement.
6. If this shipment will be transported within or through the State of California, Carrier certifies that it will only use equipment that is compliant under current CARB regulations and agrees to hold Broker harmless and reimburse Broker for any fines, penalties or losses Broker may incur as a result of the use of non-compliant equipment.
7. MAKE SURE THAT YOU WRITE THE LOAD NUMBER WE GIVE YOU ON EVERY DOCUMENT YOU SEND

DISPATCH DETAILS

Company: HotShot Express Terminal Information
Terminal Phone: (551) 213-2998
Terminal Email: slitt@hotshot-express.com
Terminal Contact: Stan Litt

PLEASE REMIT INVOICE TO:

200 Airside Drive
Suite 260
Moon Township, PA 15108
Date: 10/30/2024
Or Email To **loaddocs@bridgeway.io**

***** YOU MUST INCLUDE AN INVOICE ALONG WITH THE LOAD PAPERWORK *****

BILL OF LADING

BOL Number: 60324617

SHIP FROM

Name: HEMASOURCE
Address: 485 S 5700 W, Ste 400,
City/State/Zip: SALT LAKE CITY, UT, 84104
ALAN/NORMA/ANA P: 8016133550 Ext.
Stop Notes:

Carrier: HOT SHOT EXPRESS, INC
Pro #:

BAR CODE SPACE

Pick up date: 10/30/2024
Trailer #:

Seal #:

58538354

SHIP TO

Name: Hemasource Inc
Address: 541 PERKINS JONES RD NE STE 200
City/State/Zip: WARREN, OH, 44483
Mike O'Keefe P: 330-501-2664 Ext.
Stop Notes: FCFS

REFERENCE INFORMATION

Reference Name Value
Load PO# PO912329

THIRD PARTY FREIGHT CHARGES BILL TO

Echo Global Logistics
600 W. Chicago, Suite 725
Chicago, IL 60654 UNITED STATES

Freight Charge Terms:

Prepaid ☒
Collect ☐
3rd Party ☒

Carrier Acct #:
Quote ID:

Special Instructions:

CONSIGNEE WORKS BY STRICT APPT. \$250 FINE IF LATE FOR APPOINTMENT

ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.

LTL or Partial Only:

of Pallets: 0 Pallet Type: Skid Spots: Stackable: No
Pallet Dimensions: L: W: H:

Shipper Instructions

Pickup #: PO912329
Loc Type:
Special Services:

Consignee Instructions

Delivery #
Loc Type:
Special Services:

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL Only	
QTY	TYPE	QTY	TYPE	WEIGHT	HM (X)	OD (X)	NMFC# CLASS
26	Pallets	39		7488 lb			
26		39		7488 lb			
				GRAND TOTAL			

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 _____."

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 regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7)

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 Department of Transportation.

Shipper: *Alan Norma* Date: 10/30/24

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 documents. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

Carrier: *Joe Vasykko* Date: