



BILL TO: ASSOCIATED LOGISTICS GROUP 2550 UNIVERSITY AVE W STE 224-N SAINT PAUL, MN 55114 INVOICE DATE: 11/18/2024 INVOICE #: R65794 TERMS: NET 30 DUE DATE: 12/18/2024

| DATE       | CUSTOMER REF# | ORIGIN - DESTINATION                                                            | QUANTITY | RATE       | AMOUNT     |
|------------|---------------|---------------------------------------------------------------------------------|----------|------------|------------|
| 11/15/2024 |               | 1 Memorial Dr, Richford, VT 05476, USA - 820 MS-7, Holly Springs, MS 38635, USA |          |            |            |
|            |               | Freight Income                                                                  | 1        | \$2,100.00 | \$2,100.00 |

| TOTAL      |  |
|------------|--|
| \$2,100.00 |  |

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



Please email your carrier invoice to:

AP@associatedlogistics.com

Dispatcher: Work Phone: Mailing Address 2550 University Ave W, STE 224-Ν Saint Paul. MN 55114 Phone: (877) 744-7254 Fax: (651) 340-6916

## Load: 64951910

**Carrier Information** ZIGI FREIGHT INC Phone: (630) 485-7370 Fax: Contact: dispatch@royal3inc.com MC #: 944686 DOT #: 2828543

## **Shipper Information**

Kaytec 1 Memorial Dr, Richford, VT 05476 Phone: (828) 358-6800 Fax: Contact: Email: Notes:

# **Dispatch Information**

Pickup #: N/A Ship Date: 11/15/2024 Ready: 7:00 AM Close: 3:00 PM Delivery Window: 11/18/2024 7:00 AM - 11/18/2024 2:30 PM

**Consignee Information KP Building Products** 820 Hwy 7 Holly Springs, MS 38635 Phone: (417) 291-2837 Fax: n/a Contact: Email: Notes:

| BOL #:<br>Shipper No: Empty R<br>PO Ref: Empty Racks<br>Pro No: N/A<br>Equipment: Van |           |                                                                             | <b>3RD PARTY BILL FRE</b><br>Associated Log<br>2550 University Ave<br>Saint Paul, | gistics Group<br>e W,STE 224-N |
|---------------------------------------------------------------------------------------|-----------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------|
| Shipping Units                                                                        | HM*       | Kinds of Packaging, Description of Articles<br>Special Marks and Exceptions | WEIGHT                                                                            |                                |
| 1 Truckloads                                                                          |           | Empty Racks                                                                 | 21000.00 LB                                                                       |                                |
| 1 Truckloads                                                                          |           |                                                                             | Linear Feet: 53.00                                                                | Miles: 1355.28                 |
| Released Value: 100                                                                   | 000.00 (4 | Total Weight: 21000.00                                                      |                                                                                   |                                |

\* HM indicates Hazardous Material

**Carrier Charges:** Shipping Charges \$2100.00

Total: \$2100.00

Payable in USD

# \*PLEASE SEND YOUR CARRIER INVOICE TO AP@ASSOCIATEDLOGISTICS.COM\* \*ALL LOADS MUST BE TRACKED WITH TRUCKERTOOLS UNLESS AUTHORIZATION FOR

Additional Notes:

#### **EXCLUSION IS GRANTED\***

Exerclusion is compared as the compared as the compared of the compar

12. The venue and junsaiction for any dispute ansing from this agreement and/or relationship between Associa brought in the courts in the local jurisdiction of Associated Logistics Group's location. Other conditions for supplemental insurance: Excluding electrical and mechanical derangement unless caused by an insured peril Excluding damage due to mst, oxidation and discoloration, bruising and denting unless due to an insured peril. Excluding damage due to unst, oxidation and discoloration, bruising and denting unless due to an insured peril. Excluding damage due to unprotected or unpacked goods. Subject to institute replacement clause. Printed on Thursday, November 14, 2024.

Accepted: Load #: 64951910

Date:

| SHIP FROM                                                          |                                                         |               |                  |                   | 1            | Bill of Lading Number RACKS-1115 |                                   |                            |                                                         |                                                                                      |                         |                           |
|--------------------------------------------------------------------|---------------------------------------------------------|---------------|------------------|-------------------|--------------|----------------------------------|-----------------------------------|----------------------------|---------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------|---------------------------|
|                                                                    | TEC INC<br>Memori                                       |               |                  |                   |              | 1                                |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    | nford, VT                                               |               | 6                |                   |              |                                  |                                   |                            |                                                         | BAR CODE S                                                                           | PACE                    |                           |
|                                                                    |                                                         | -             |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
| SHIP TO<br>St. Gobain<br>820 HWY 7 NORTH<br>HOLLY SPRINGS MS 38634 |                                                         |               |                  |                   |              | Carrier Name:                    |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   | 231          | TRAILER:                         |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  | SEAL #                            |                            |                                                         |                                                                                      |                         |                           |
| 2.828                                                              | TUTOD D                                                 |               | FICUT OF         |                   | - Louis      | C. Hard Street                   |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    | THIRD P                                                 | AKITEK        | EIGHT CH         | ARGES BI          | LL TO        | State State State                | SCAC:<br>Pro Number               |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  | -TO Number                        |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
| Spec                                                               | ial Instruc                                             | tions:        |                  |                   |              |                                  | Freight Ch                        | arge Te                    | rms /Fre                                                | ight charges are prepaid u                                                           | nless marked other      | vise):                    |
| Tel:                                                               | 62-252-9                                                | 001 4         | TTN:             |                   |              |                                  | Prepaid 🖾                         |                            |                                                         |                                                                                      |                         |                           |
| 1-01                                                               | 52-252-9                                                | 391 A         | IIN: HI          | ELEN              | Constant and | CERENT PUR                       | -                                 |                            | -                                                       | ttached underlying bill                                                              | s of lading.            |                           |
| 200                                                                |                                                         | 10000         |                  |                   |              | CUST                             | OMER OR                           | DER INF                    | ORMAT                                                   | TON                                                                                  |                         | -704 M                    |
| Custo                                                              | omer Orde                                               | r No.         |                  | #                 | of Pa        | kages                            | Weight                            | Pallet,<br>(circle         |                                                         |                                                                                      |                         |                           |
|                                                                    | -                                                       |               |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
| Grand                                                              | d Total                                                 |               |                  | CALE DA LOS       | 1.1212       |                                  | ARRIER I                          | NFORM                      | ATION                                                   | And the second second                                                                |                         |                           |
| Hand                                                               | lling Unit                                              | Pad           | kage             |                   |              | THE PROPERTY                     |                                   |                            |                                                         |                                                                                      | L                       | LTL Only                  |
| Qty                                                                | Туре                                                    | Qty           | Туре             | Weight            | HM           |                                  | odity Desc                        |                            | litional car                                            | e or attention in handling or                                                        | NMFC No.                | Class                     |
|                                                                    |                                                         |               |                  |                   | (X)          | stowing m                        | ust be so mark<br>ary care. See S | ed and pack                | kaged as to                                             | ensure safe transportation                                                           |                         |                           |
|                                                                    |                                                         | 30            | EA               | 21000             |              | METAL                            | RACKS                             |                            |                                                         | -                                                                                    |                         |                           |
|                                                                    |                                                         | 50            | En               |                   |              | 50                               |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    | -                                                       |               |                  | -                 |              | 2                                |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  | -                 |              |                                  |                                   |                            |                                                         |                                                                                      | 2                       |                           |
| ere the                                                            | rate is depende                                         | ant on value  | shippers are a   | 21000             | e specific   | ally in writing                  | the                               |                            |                                                         |                                                                                      |                         |                           |
| reed or                                                            | declared value of<br>specifically stat                  | of the proper | ty as follows: ' | The agreed or     | declared     | value of the per                 | CODI                              | Amount:<br>rms: Coll       |                                                         |                                                                                      | ner check accepta       | able 🗆                    |
|                                                                    | Note:                                                   | Liability     | limitation       | for loss o        | r dam        | age in ti                        | 1                                 |                            |                                                         | licable. See 49 USC                                                                  |                         |                           |
| eceived                                                            | , subject to indi                                       | vidually dete | ermined rates of | or contracts that | t have be    | en agreed                        |                                   |                            |                                                         | nature/Date Rec                                                                      |                         |                           |
| lassifica                                                          | writing between<br>tions, and rules<br>per, on request, | that have b   | een establisher  | by the carrier    | and are      | the rates,<br>available to       | 10-1                              |                            |                                                         |                                                                                      |                         |                           |
|                                                                    | er Signatu                                              |               |                  |                   |              | Loaded:                          |                                   | Counte                     | d:                                                      | Carrier Signature                                                                    | /Pickup Date            |                           |
| IERROD JEWETT 11/15/24 By Shipper                                  |                                                         |               |                  |                   | By shipper   |                                  |                                   | Carrier acknowledges recei | eipt of packages and required placards. Carrier certifi |                                                                                      |                         |                           |
| vhenor                                                             | certify that the<br>classified, pack                    | aged, marke   | d, and labeled.  | e<br>and are      |              |                                  | to conta                          | in<br>iver/piece           | es                                                      | emergency response inform<br>emergency response guide<br>Property described above is | book or equivalent doci | umentation in the vehicle |
| proper                                                             | condition for the regulations of                        | the DOT.      | according to     | une               |              |                                  |                                   |                            |                                                         |                                                                                      |                         |                           |
|                                                                    |                                                         |               |                  |                   |              |                                  | 1                                 |                            |                                                         | 16                                                                                   | INCO                    | anbers<br>-18-20          |