



INVOICE

BILL TO:
SIMPLE LOGISTICS SOLUTIONS
414 UNION ST, STE 1005
NASHVILLE, TN 37219

INVOICE DATE: 12/06/2024
INVOICE #: R68290
TERMS: NET 30
DUE DATE: 01/06/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/05/2024		400 Perimeter Park Dri, Morrisville, NC 27560 - 7911 Reycan Road, Richmond, VA 23237			
		Freight Income	1	\$950.00	\$950.00

TOTAL
\$950.00

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



SIMPLE LOGISTICS SOLUTIONS
PO BOX 198686
AP@SHIPSILLO.COM
NASHVILLE TN 37219

PRO # 135250

Rate Confirmation

12/05/24 10:57:29 (EST)

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HALEY RHOADS
(615) 208-3122
Haley@shipsilo.com

ZIGI FREIGHT INC
(630) 485-7370 (p) Att: JOEY
(630) 485-6980 (f)
MC # 944686 Truck # 79
DOT 2828543 Trailer #
Driver JAMES Cell # (727) 470-5191

Size & Type: 53' VAN
Pieces: 3

Description: WATER TREATMENT PA
Weight: 11500

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	950.00	LOAD ID: // DRIVER MUST ACCEPT MACROPOINT -- DEDICATED SHIPMENT -- MUST HAVE STRAPS TO SECURE THE LOAD. DRIVER MUST WEAR PANTS, HAVE STEEL TOES SHOES, SAFETY GLASSES, HARD HAT, SAFETY VEST. ***MUST CALL HAYDEN (704-433-3265) BEFORE GETTING ONSITE - NEEDS TO BE ESCORTED TO LOADING SITE***
TOTAL RATE	950.00	

PICK 1

EVOQUA MORRISVILLE
400 PERIMETER PARK DRI
MORRISVILLE NC 27560
Hours : 0600-1500
Phone/Contact: (919) 632-3546 WAYNE

Appointment 12/05/24
Pallets: 0
Seal # 3214655667

STOP 1

WOLFSPEED
1000 CAROLINA CORE PKWY #9436
SILER CITY NC 27344
Hours : 0800-1600
Phone/Contact: (615) 556-5259
PETER

Pallets: 0

PICK 2

WOLFSPEED
1000 CAROLINA CORE PKWY #9436
SILER CITY NC 27344
Hours : 0800-1600
Phone/Contact: (615) 556-5259
PETER

Pallets: 0

STOP 2

EVOQUA RICHMOND
7911 REYCAN ROAD
RICHMOND VA 23237
Hours : 0801-1500
Phone/Contact: (804) 928-8463 DWAYNE

Appointment 12/06/24
Pallets: 0
Seal # 3214655667

DJM TRANSPORT LLC - DBA SIMPLE LOGISTICS SOLUTIONS
MC 979146 DOT 2908033

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 135250

must appear on all Invoices



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PO BOX 198686
AP@SHIPSILLO.COM
NASHVILLE TN 37219

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MC # 944686 Truck # 79
DOT 2828543 Trailer #
Driver JAMES Cell # (727) 470-5191

MACROPOINT TRACKING REQUIRED ON ALL LOADS

-
DRIVER NAME & PHONE # REQUIRED FOR ALL LOADS - NO EXCEPTIONS!
DRIVER MUST CALL CARRIER REP FOR PICK-UP AND DELIVERY INFO

-
RECEIVE SILO LOAD AVAILABILITY BY SENDING TRUCK LIST TO CAPACITY@SHIPSILLO.COM

-
ALL SERVICES SUBJECT TO THE BROKER/CARRIER AGREEMENT IN EFFECT
BETWEEN CARRIER AND BROKER.

-
Net 30 day payment terms via ACH or Check, 2% 48 hr QP - all thru TRIUMPH PAY.
For payment status questions, email support@triumphpay.freshdesk.com
or call 866-912-2763

You also can send to AP@shipsilo.com within 48 hrs
Accessorials and any supporting docs must be included with the invoice.
If you need to speak directly to SiLo AP you can call 615-265-9182

-
Carrier shall be liable for cargo lost, damaged, delayed, or destroyed,
as well as any additional costs or fees imposed on the Broker
by cargo claimant.

-
As a courtesy for POD submission you can expect a text from (615) 808-8537
to allow you to immediately submit photo of POD invoiced paperwork
POD'S MUST HAVE SIGNATURE, DATE AND PRINTED NAME ON ALL COPIES

-
Broker requires exclusive equipment use unless explicitly stated partial on the
rate confirmation. Non-compliance will result in a 50% rate reduction.

-
The carrier picking up and delivering must be the carrier listed on this rate
confirmation and covered on the insurance policy in order to receive payment.
Broker, Shipper, Receiver, and their affiliates will NOT be responsible for
freight charges if the hired motor carrier identified herein subcontracts,
transloads, double brokers, or otherwise subcontracts transportation of the
shipment.

-
DO NOT POST PHOTOS OF FREIGHT ON ANY SOCIAL MEDIA SITES OR LOADBOARDS

Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 135250

must appear on all Invoices

Bill Of Lading - Short Form - Not Negotiable				BOL Number: 135250	
Ship From				Pro # : 135250	
EVOQUA MORRISVILLE 400 PERIMETER PARK DRI				Ship Date : 12/05/24	
MORRISVILLE NC 27560 (919) 632-3546 WAYNE				Cust Ref # :	
Ship To				PU Ref # :	
WOLFSPEED 1000 CAROLINA CORE PKWY #9436				Del Ref # :	
SILER CITY NC 27344 (615) 556-5259				Del Appt : 12/06/24	
Bill To				Carrier :	
SIMPLE LOGISTICS SOLUTIONS PO BOX 198686 AP@SHIPSILLO.COM NASHVILLE TN 37219				Carrier Pro#:	
Special Instructions:				References	
DELIVERING (2) TANKS TO SILER CITY, NC DELIVERING (3) TANKS TO RICHMOND, VA					
Freight Terms:				Prepaid XXX Collect ___ 3rd Party ___	
QTY	PKG	Wgt	HM	Item Description	DIMS
2		11500		SUPER 42 TANKS	44x44x90

*Mark with an X to designate hazardous materials as defined in title 49 of the code of Federal Regulations.

Haz Mat emergency Contact #

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 not to exceed _____ per _____"

COD Amount: \$ _____
 Fee Terms: Collect ____, Prepaid ____, Check Acceptable ____

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)

For Freight Collect Shipments:

If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

Trailer Loaded: Freight Counted:
☒ By Shipper ☒ By Shipper
☐ By Driver ☐ By Driver

Signature of Consignor: _____

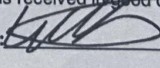
Carrier Signature / Date

Shipper Signature / Date

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

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

Signature of Shipper: _____ Date _____

Carrier:  Date: 12/5/24

Consignee/Receiver Signature / Date

This is to certify that the above named materials were received in apparent good order (except as noted).

Signature of Consignee: _____ Date _____

Shedley Billing

Bill Of Lading - Short Form - Not Negotiable		BOL Number: 135250	
Ship From		Pro # : 135250	
WOLFSPEED		Ship Date : 12/05/24	
1000 CAROLINA CORE PKW		Cust Ref # :	
SILER CITY NC 27344		PU Ref # :	
(615) 556-5259		Del Ref # :	
		Del Appt : 12/06/24	
		Carrier :	
		Carrier Pro# :	
Ship To		References	
EVOQUA RICHMOND			
7911 REYCAN ROAD			
RICHMOND VA 23237			
(804) 928-8463			
Bill To			
SIMPLE LOGISTICS SOLUTIONS			
PO BOX 198686			
AP@SHIPSILLO.COM			
NASHVILLE TN 37219			
Special Instructions:		Freight Terms:	
DELIVERING (2) TANKS TO SILER CITY, NC DELIVERING (3) TANKS TO RICHMOND, VA		Prepaid XXX Collect ___ 3rd Party ___	
QTY	PKG	Wgt	HM
3		11500	
Item Description		DIMS	Cl
SUPER 42 TANKS		44x44x90	
		NMFC #	

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COD Amount: \$ _____
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For Freight Collect Shipments:

If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor: _____

Shipper Signature / Date

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

Signature of Shipper: _____ Date _____

Consignee/Receiver Signature / Date

This is to certify that the above named materials were received in apparent good order (except as noted)

Signature of Consignee: Kelly Date: 12/6/24

Trailer Loaded: Freight Counted:

☒ By Shipper ☒ By Shipper
☐ By Driver ☐ By Driver

Carrier Signature / Date

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Carrier: [Signature] Date: 12-6-24

1- TANK Damaged on The Bottom Frame. Could not use Pallet Jack. Unit is know more Transferable