



BILL TO: BEST LOGISTIC SERVICES 829 GRAVES STREET KERNERSVILLE, NC 27284 INVOICE DATE: 01/16/2025 INVOICE #: R73138 TERMS: NET 30 DUE DATE: 02/16/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/15/2025		1401 Finley Island Rd, Decatur, AL 35601, USA - 901 E 16th Ave, North Kansas City, MO 64116			
		Freight Income	1	\$1,300.00	\$1,300.00

TOTAL

\$1,300.00

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

Load Confirmation
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		au cu			P	age 1
TEAM: P	urple Team					
Best Logi				• •		
P.O. Box				Order:	1672369	
	ille, NC 27285	DEE	•		UST APPEAR ON ALL E	
Р	HONE: (336) 515-9003 * FAX: (844) 301-4234 *	LOGISTI			ST CALL IN FOR DISPA	
Ca	rrier: ZIGI FREIGHT INC			Contact: P	urple Team	
	er ID: ZIGLOM	*PLE	ASE NOTE (	OUR NEW CONTACT N	UMBERS BELOW:	
Phone: 630-566-1257				Phone: (3	36) 515-9003 *	
	Fax:			Fax: (8-	44) 301-4234 *	
[	Date: 01/15/2025			Reference:		
		Instruction	is / Comm	ents:		
Order	Miles: 634.0			Weight: 43	000.0	
	<b>PU #</b> 6100558944				' Van Only	
	BOL: 30706778			Commodity: P/	ACKAGING MATERIALS	
PU 1	Name: INDORAMA VENTURES	XYLENES		Da	te: 01/15/2025 0730	
	Address: 1401 FINLEY ISLAND R	OAD		01/15/2025 1500		
					ct: (336) 515-9003	
	DECATUR	AL 3	5601	Driver Assi	st: N	
SO 2	Name: ARKEMA INC			Da	te: 01/16/2025 0800	
	Address: 901 E 16th AVE				01/16/2025 1400	
					ct: (336) 515-9003	
	NORTH KANSAS CITY	MO 64	4116	Driver Assi	st: N	
Paymer	nt Total Carrier Pay: \$	1,300.00				
	D HAUL FOR BEST, ALL CARRIERS MUST INFORM DR	IVERS OF MACE		KING BEOLUBEMENT AT TH		BS

'OINT TRACKING REQUIREMENT. AT THE TIME OF BOOKING, ALL CARRIERS MUST PROVIDE VALID DRIVER PHONE NUMBER. DRIVERS MUST ACCEPT AND DOWNLOAD MACROPOINT APP BEFORE ARRIVING TO SHIPPER. SHOULD CARRIER/DRIVER NOT COMPLY, A \$100 FINE WILL BE IMPOSED. SUBMISSION OF SIGNED RATE CONFIRMATION VALIDATES THIS AGREEMENT. ELD COMPLIANCE VIA MACROPOINT IS ALSO ACCEPTABLE. NOTE:

## Agreement Please sign below

STANDARD TERMS ARE PAYMENT MADE 28 DAYS FROM RECEIPT OF LEGIBLE SIGNED BILL OF LADING, INVOICE, AND LUMPER RECEIPT (IF APPLICABLE). ALL EXTRA CHARGES MUST BE PRE-APPROVED BY BEST REPRESENTATIVE THAT BOOKED LOAD. ALL EXTRA CHARGES MUST BE BILLED WITH RECEIPT & BOL. DRIVER MUST REPORT ANY OVERAGES, SHORTAGES, OR DAMAGED PRODUCT IMMEDIATELY.

CARRIER CERTIFIES THAT THEY HOLD THE APPROPRIATE LISCENCES AND AUTHORITIES AND MAINTAIN THE APPROPRIATE INSURANCE COVERAGES AS REQUIRED BY REGULATION TO PERFORM THIS TRANSPORTATION ON BEHALF OF BEST LOGISTICS.

ANY DOUBLE BROKERAGE WILL RESULT IN NON-PAYMENT. CONFIRMATION OF THE ACTUAL CARRIER OF THIS LOAD WILL BE MADE BEFORE PAYMENT IS RELEASED. FINES IMPOSED FOR LATE PICKS AND LATE DELIVERIES.

CARRIER ACKNOWLEDGES AND AGREES THAT BROKER HAS THE EXCLUSIVE OBLIGATION TO PAY FREIGHT CHARGES TO CARRIER.

CARRIER HEREBY WAIVES AND AGREES TO REFRAIN FROM ALL COLLECTION EFFORTS AGAINST BROKER'S CUSTOMER, SUPPLIER, RECEIVER, CONSIGNOR, OR CONSIGNEE AND ONLY SEEK PAYMENT FROM BROKER.

## To Expedite Payment: Email All invoices and Signed POD as attachments to: CarrierAP@shipwithbest.com (PICTURES IN EMAIL BODY WILL NOT BE ACCEPTED)

In the SUBJECT LINE Reference ORDER NUMBER 1672369

678 3-31-16

Bill Carson

01/15/2025

Elizander 702-980-6369 736 H03262



(X) Accept () Decline

V Xylenes & PTA I I G 401 Finley Island Hoad Decalur AL 35601-7810 JBA		ĮNDORAI		
		Bill of Ladir	ng	
Freight Ord	'/'	mg Order No	Gustomer PO No	
610055884	A	20262931	Statumer PO No	Container No.
ahip-To Addres				1+03262
ARKEMA INO 201 E 16th Ave NORTH KANSA JBA HM Item N	GITY MO 64116	Del	very time: 00	1/16/2025 0:00:00 Collect
10	2402002070	Packaging Information		Weight
Totais	Batch No: VKD-3006 HS Code: Item Text: PRODUCT CODE: 5	afaranca: 4501229416-59538-10 9538 -	Net wt.;	44,092
Totals	Total no. of Packager	:20 Bag	Total Net:	44.000
DITIONAL INF	ORMATION		Total Gross:	44,092   45,092,488
AL NO:	ves in other than shippers	1-15-25 vehicle it shall be governed by (a) blicable uniform bill of lading form rovided that if this is an intrastate	the contract between st	hipper and carrier if carrier national motor freight mer in a state where bills f lading. Received subject

kylenes & PTA LLC				E	Page No. 2 / Bill of Lading No.	
catur AL 35601-7910 A		INDORAN			30706778	
		INDUKAN	<b>NA</b>	Date	01/15/2025	
		VENTUR	ES	Time	00:00:00	
		Bill of Ladir	g			
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		505				
Freight Order	Freight Bookir	ng Order No	Custon	ner PO No	Container No.	
6100558944		20262931	6		TRL	
The Fiber Barrels or Drums or Boxes used for this shipment conform to the specifications set forth in the Box, Barrel or Drum Maker's Certificate there on and all the requirements of Rule 41 of the Uniform Freight Classification.		materials are properly classified described, packaged, marked, a labeled, and are in proper condi transportation. According to the regulations of the department of transportation.	nd tion for applicable	Goods] Incident Spill, Leak, Fire, Exposure, or Acciden Call CHEMTREC +1 703-741-5970 / 1-800-424-9300		
NCOTERM		CARRIER BILL TO ADDRESS		CONSIGNOR SIG	NATURE SECTION	
FOB NORTH KANSAS CITY (MO)				Subject to Section 7 of Conditions of applicable bill of lading if this shipment is be delivered to the consignee without recourse on the consignor, the consignor shall sign th following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
				the consignor, the following statemen The carrier shall n shipment without freight and all othe	nt. ot make delivery of this payment of er lawful charges.	
				the consignor, the following statemen The carrier shall n shipment without freight and all othe	nt. ot make delivery of this payment of er lawful charges.	