

## **INVOICE**

BILL TO: WEST MOTOR FREIGHT 100-110 W COLUMBIA ST SCHUYLKILL HAVEN, PA 17972 INVOICE DATE: 02/27/2025 INVOICE #: R79249 TERMS: NET 30 DUE DATE: 03/27/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/26/2025		6115 FM 1405, BAYTOWN, TX 77522 - 422 HIGHWAY 51 N, HERNANDO, MS 38632			
		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



## CONFIRMATION OF CONTRACT CARRIER VERBAL AGREEMENT

Pursuant to our verbal agreement between WEST MOTOR FREIGHT OF PA, MC#21866. (Broker) and the carrier named below (Carrier), the parties agree that Broker's shipment will move at the rate(s) and charges listed below.

To check on status of payment please go to. Carrier Portal

Carrier	ZIGI FREIGHT DBA ROYAL 3 INC	Pro No.	PGW11	1886	Date	2/26/2025				
Code	V18517	Equipme	nt 53\	/AN						
Phone	6304857370	PCS	1	wr	40000	Rat	e \$ 1300.0	0		
	6304856980	Total Ag	reed and	d Final Paymen	nt to Carrie	r <b>\$</b> 13	300.00			
Name										
				WEST MOTOR WEST MOTOR				73-7040		
Email		1		WEST MOTOR	TICLIOITI	OTTA Pho	one 229-3	3-7040		
Shipper	THE HOME DEPOT	Consig	nee 🗆	HE WHOLESAL	LE GROUP	LLC				
Address	6115 FM 1405	Address	s 2	122 HIGHWAY 5	51 N					
City	BAYTOWN State TX Zip 77522	City	F	IERNANDO		State MS	Zip [	38632		
Contact		Contact	t N	IARK TIDWELL						
Phone		Phone	9	016062237						
Pickup I	Date 02/26/2025 Time 1700	Deliver	y Date	2/27/2025		Т	ime 0800			
Consig	Consignee Stop Off# 1 Consignee Stop Off# 2  Address									
Addres	Address Address									
City	Address  State Zip City State Zip Zip									
			_							
Deliver	y Date Time		Deli	very Date			Time			
Notes :										
RIVEF	R TO CHECK IN AT GUARD SHACK AND TELL THEM THEY O EXPORTING / PU BY APPT 1700-2100 / DEL M-F FCFS 0	)700-1500 / ****BLIN	ND SHIP	MENT*** HOME						
DRIVE	R TO PRINT WEST MOTOR BLIND BOL AND USE WITH OF	RIGINAL BOL AS P	ODAIL	DELIVERY.						
Please send all Freight Bills & Invoice to : WEST MOTOR FREIGHT OF PA										
Addr	ess 665 Highway 74 Suite 600	<b>City</b> Peachtree	City		State	GA	Zip	30269		
Phor	<b>678-379-2620</b>	Fax								
Pleas	e sign & fax form to:		or ema	ail to: carrierp	ay@evanso	delivery.com				
Carrie	zr Name ZIGI FREIGHT DBA ROYAL 3 INC	Carrier Title					Date			
Ca	Carrier Signature ASIA MAG									
		Vest Motor	_		D	2/26/2	025			

This confirmation governs the movement of the above referenced shipment and hereby amends and is incorporated by reference and becomes part of the Transportation Contract by and between Broker and Carrier. Carrier agrees to sign this confirmation and return it to Broker via fax before sending Carrier's truck to pick up the shipment. Carrier shall be conclusively presumed to have agreed to the rates set forth herein. By its signature, Carrier further represents and warrants that the rates are reasonable and compensatory and that the shipment would not have been tendered to Carrier at higher rates. Carrier agrees and understands that this is not a "Trip Lease" and that Carrier is an Independent Contractor with its own U.S. DOT Contract Operating Authority. Carrier understands that all permits and operating taxes are its sole responsibility. Carrier agrees to handle this shipment exclusively on Carrier's owned or leased equipment. Should Carrier "Broker" this shipment to an unrelated third party, this Confirmation of Contract Carrier Verbal Agreement is null and void. Carrier must advise Broker of any and all accessorial charges and or other charges within twenty-four (24) hours after delivery of this shipment. Failure to provide such notification, to Broker, could result in the inability of Broker to bill and collect such chargesand therefore payment to Carrier shall be at the sole discretion of Broker.

Date: 2/26/25		BI	LL OF	LA	DII	NG	F	Page 1 of <u>1</u>			
Name: RIVERO EXPORTING Address: 9935 NW 88TH AVE City/State/Zip: MIAMI, FL 33178 SID#:	ROM	The state of the s	FOB: I			of Lading	Number: HDTX-10	ACE			
SHIP TO						RRIER NAME					
Name: TWG Location #:						Trailer number: Seal number(s):					
Address: 422 HIGHWAY 51 N City/State/Zip: HERNANDO, MS 38632						SCAC:					
CID#:		Pro number: PGW111886									
Name: WEST MOTOR FREIGHT Address: JAYME.NEAL@WESTMOTOR City/State/Zip:	F. 14 (1989)				3		BAR CODE SE				
					mar	ked otherwis	e Terms: (freight charges)				
SPECIAL INSTRUCTIONS:	Maria Maria				Pre	paid X	Collect				
					,	abook book	Master Bill of Lading:	with attached un	nderlying		
CUSTOMER ORDER NUMBER	# DICOO		OMER ORDE		ORM	check box)			SURFE IN		
OGSTOMER ORDER NUMBER	# PKGS	WEIG	(CIR	CLE ON	=)		ADDITIONAL SHIP	PER INFO			
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			Y		V						
GRAND TOTAL			Y		V						
			CARRIER IN	FORM.	ATIC	N					
HANDLING UNIT PACKAGE  QTY TYPE QTY TYPE	WEIGHT	CO				DITY DES	CRIPTION ntion in handling or stowing must be so	LTL O	NLY		
arr Tipe Qii Tipe	WEIGHT	H.M. (X)	marke	d and pack	UBCOOCL BY	s to ensure safe trans ection 2(e) of NMFC	portation with ordinary own	NMFC#	CLASS		
			- 25/01/3								
								RECEIVI			
								STAMP S	SPACE		
		1301117									
Where the rate is dependent on value, shippers are requ	ired to etate as				G	RAND TO			10000		
declared value of the property as follows:  "The agreed or declared value of the property is specific					COD Amount: \$						
per						C	rms: Collect:  Customer check accepta	Prepaid:			
NOTE Liability Limitation for loss or damage in this shipment may be app						le. See 49 l	U.S.C. = 14706(c)(1)(A) a	and (B).			
between the carrier and shipper, if applicable, otherwise established by the carrier and ere available to the shipper.	to the rates, classi	fications an	d rules that have	been	The	a carrier shall no I all other lawful	of make delivery of this shipme	ent without payment			
SHIPPER SIGNATURE / DATE			CARRIER SIGNATUR	Shipper S							
This is to certify that the above named materials are properly classi packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT,	fied, By	Shipper Driver		ver/pall	Carrier acknowledges receipt of packages and required placars. Carrier certifies emergency response information was made available and/or center has the amergency response guidebook or equivalent documentation in the vehicle.  Property described above is received in good order, except as neted.				Carrier certifies or has the DOT to vehicle.		
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