



INVOICE

BILL TO:

QUALITY FREIGHT LOGISTICS INC
48797 ALPHA DRIVE, SUITE 120
WIXOM, MI 48393

INVOICE DATE: 03/12/2025**INVOICE #:** R81005**TERMS:** NET 30**DUE DATE:** 04/12/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
03/11/2025		160 N High St, Hebron, OH 43025 - 805 Shamrock Ln, Sauk Centre, MN 56378			
		Freight Income	1	\$1,500.00	\$1,500.00

TOTAL

\$1,500.00

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

PRO # 72312

Rate Confirmation

03/11/25 13:43:35 (EST)



QUALITY FREIGHT LOGISTICS
48797 ALPHA DR. STE 120
WIXOM MI 48393

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M

RAYDEN GALLOWAY
(248) 313-9196 (p)
ray@qflteam.com

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ZIGI FREIGHT INC DBA
Att: KELLY

MC # 944686
DOT 2828543
Driver ALFREDO

Truck # 764
Trailer # W97038
Cell # (786) 614-5456

Size & Type: 53' VAN
Pieces:

Description: PARTS
Weight: 21000

Miles: 907

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1500.00	
FUEL SURCHARGE	.00	
TOTAL RATE	1500.00	

PICK 1

HENDRICKSON AUX AXLE WAREHOUSE
160 N HIGH ST
HEBRON OH 43025

Appointment 03/11/25 @ 08:00
Appt Notes: 0800-1600
Ref # 86842784

STOP 1

RHM KENWORTH
805 SHAMROCK LN
SAUK CENTRE MN 56378

Appointment 03/13/25 @ 07:00
Appt Notes: 0700-1700

PODS MUST BE PROVIDED WITHIN 24 HOURS OF DELIVERY OR YOU MAY BE SUBJECT TO
A DEDUCTION OF UP TO 20%

*
*

BY SIGNING THIS CONFIRMATION, THE ABOVE LISTED CARRIER REPRESENTS AND AGREES TO
THE FOLLOWING:

ALL POD's and paperwork are due within 48 hours of delivery and emailed to
info@qflteam.com Loads must be invoiced to QFL within 60 days of delivery or
payment will NOT be issued.

** Detention will not be approved if the IN/OUT times are not on BOL with
shipper/consignee signature **

1) Carrier has all liability & cargo insurances required for this shipment.

2) Driver must call QFL for verbal dispatch at 248-313-9196.

Accessorial Charges such as detention, cancellation or layovers will not apply

3) If this shipment is marked 'EXPEDITE' QFL must have visibility throughout
the transit via Macropoint Tracking and direct contact to the truck via cell
phone or text message. In the case that driver is unable to perform during a
shipment marked 'EXPEDITE' or a breakdown occurs, carrier must agree to
release freight and/or trailer to a power unit of carrier or QFL's choosing in
to meet delivery time.

4) For standard shipments QFL must have confirmation of arrival at shipper,
departure from shipper, arrival at consignee, and completion of delivery,
along with any other tracking requests made by QFL during transit. Our team is
available 24 / 7 at 248-313-9196 or by email at dispatch@qflteam.com.

5) Notice of detention (two hours free time then \$35/hr. will be paid to the
Carrier, max 6 hours) must be communicated via email to QFL prior to the onset
of detention or charges will not be approved.

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 72312

must appear on all Invoices

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Rate Confirmation

03/11/25 13:43:35 (EST)



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Cell # (786) 614-5456

6) QFL reserves the right to cancel a shipment at any time. Cancellation charge of \$100 will be issued to carrier only if QFL has verbally dispatched the driver and it is less than 4 hours to assigned pickup time. Layovers will be paid in the amount of \$150 per day unless it is a drop trailer for delivery which would be \$25 a day for trailer detention, weekends do not apply. Stop-offs will be issued in the amount of \$25.

8) Carrier agrees that QFL is not responsible for the potential improper loading or securing of freight, and carrier assumes responsibility for damage incurred during transit due to improper loading.

9) Any alteration to this confirmation must be made by or signed off by a QFL

10) This is a brokered load and shipper/receiver shall be responsible for payment only to QFL. By accepting this load, carrier releases shipper/receiver from any liability for payment of transportation charges.

11) A fine of \$200.00 or 10% (whichever is greater) will be deducted from load if not delivered on time or without notification. Failure to communicate regular updates stated above that result in late delivery will also result in a fine. Any rate reductions or charges implemented by QFL's customer resulting from late delivery will also be honored by carrier. Exceptions such as breakdowns, unusual traffic or weather delays will be honored only if communication is provided to QFL at time of occurrence with proof provided.

12) Load weights may vary from approximated weight on rate confirmation on full truckloads. All truckloads with QFL may weigh up to 44,500 regardless of weight approximated on load confirmation. Loads above 44,500 may be subject to additional compensation, but only if communicated to QFL before departing the shipper.

13) *All lumper receipts are due within 8 days of completion of the load*** Failure to do so will result in deduction of lumper amount*

14) If at anytime there is unauthorized seal tampering, transloading or partialing of freight without QFL consent, carriers will automatically forfeit payment for the shipment, you will be liable for all charges and claims regarding the shipment.

Carrier Signature _____

Date _____ / _____ / _____
M D

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Date: 03/11/2025

HENDRICKSON BILL OF LADING

Page 2 of 2

** Critical Manufacturer – Transportation Equipment**

SHIP FROM				Bill of Lading Number: 86842784							
Ship From Code:	WHSHEBOH										
Name:	HENDRICKSON AUX AXLE WAREHOUSE										
Address:	160 N HIGH ST										
Address 2:											
City/State/Zip:	HEBRON, OH 43025										
Contact Name:	LLOYD SIMCOX			CARRIER NAME: QUALITY FREIGHT LOGISTICS							
Contact Number:	740-929-5667			Equipment Type: DV00							
SHIP TO				SCAC: QFLN							
Ship To Code:	GENERICDIST			Pro Number: 72312							
Name:	RHM KENWORTH			Freight Charge Terms:							
Address:	805 SHAMROCK LN			(freight charges are Collect unless marked otherwise)							
Address 2:				<input checked="" type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party							
City/State/Zip:	SAUK CENTRE, MN 56378			<input type="checkbox"/> Master Bill of Lading: with attached							
Contact Name:	HIN CSR			(check box) underlying Bills of Lading							
Contact Number:	888-888-8888										
INVOICE REMIT TO:											
Name:	Hendrickson c/o Ryder Integrated Logistics										
Address:	39550 Thirteen Mile Rd, Suite 101										
City/State/Zip:	Novi, MI 48377										
Special Instructions: PICKUP BY 4PM EST TODAY Will be available for pick up after 202503110001 Must be delivered by 202503132359											
CUSTOMER ORDER INFORMATION											
ROL Unique Number	Pro Number	Route Number	PO #	UNC	Pallet Count	Pallet Spaces	# Pkgs	Weight	Cube	Additional Shipper Info	
R2511790916			S0261145		10	20	10	21000	0		
Grand Total							10	21000			
CARRIER INFORMATION											
HANDLING UNIT			COMMODITY DESCRIPTION (Freight Class, Stackable, Part No, NMFC No, Desc.)								
QTY	TYPE	WEIGHT	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360								
10.0	Skid	21000.0	50, N, AXLE, , AXLE								
10		21000	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 _____ per _____.							COD Amount: \$ _____				
							Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>				
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 the 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 the freight and all other lawful charges.				
							Shipper Signature _____				
SHIPPER SIGNATURE / DATE		Trailer Loaded:		Freight Counted:		CARRIER SIGNATURE / PICKUP 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 DOT.		<input type="checkbox"/> By Shipper		<input type="checkbox"/> By Shipper		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. X _____					
		<input type="checkbox"/> By Driver		<input type="checkbox"/> By Driver/pallets said to contain							
		<input type="checkbox"/> By Driver/Pieces									

Ryder 03-12-25