



# INVOICE

**BILL TO:**  
FREIGHT PLUS LLC  
6830 MARTINA RD  
MINNESOTA CITY, MN 55959

**INVOICE DATE:** 04/18/2025  
**INVOICE #:** B86779  
**TERMS:** NET 30  
**DUE DATE:** 05/18/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
04/17/2025		133 Suprior DR, Moselle, MS 39459 - 12656 Uline Way, Kenosha, WI 53144			
		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**

## Freight Plus Load Tender

Reference: LD25584JR ( Load ID )

Carrier: Brz ( RIKN )

Tender: 04/16/2025 03:19

Origin: **Notrax**  
**133 Suppor DR**

Pickup: **Moselle, MS 39459**  
Location Comments:  
Quishe Magee phone:+16015448119 fax:  
**Appointment Number :**  
**Appointment Date : 04/17/2025 08:00 AM - 04/17/2025 12:00 PM**  
Target Range If **NO** Appointment:  
04/16/2025 12:00 PM - 04/16/2025 12:00 PM

Destination: **Uline**  
**12656 Uline Way**

Delivery: **Kenosha, WI 53144**  
Location Comments:  
phone: fax:  
**Appointment Number:**  
**Appointment Date : 04/18/2025 08:00 AM - 04/18/2025 08:00 AM**  
Target Range If **NO** Appointment  
04/18/2025 08:00 AM - 04/18/2025 05:00 PM

Bill To: **Justrite C/O FreightPlus 108 Myrtle Street Suite 601 Quincy, MA 02171**  
phone: fax:

### Comments

Contact Information: Sam Folse

Food grade trailer- if applicable. Load Bars/Straps req. Dedicated Load- require exclusive use of the trailer. Carrier responsible for securing shipment prior to departure. Accessorials must be reported at time of occurrence.

Trailers must be sealed and broken in presence of shipper and receiver. Shipments w/ a seal that is broken, altered, or tampered w/ prior to del. shall be deemed total loss and carrier shall be liable for full value of the shipment without inspection or testing of the cargo by the shipper or consignee.

### Equipment & Services

Equipment: Dry Van (TV)

Required Services: Delivery Appointment, Pickup Appointment

### Items

Item ID	HM	Description	Weight	Class	NMFC	Dimensions
GNRH2411YB		GNRH2411YB	33837.0	70.0		

## Freight Plus Load Tender

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Tender: 04/16/2025 03:19

### Stop 1 (pickup)

04/17/2025 08:00 AM - 04/17/2025 12:00 PM

Notrax,

133 Suppor DR,

Moselle, MS 39459

Quishe Magee Phone: +16015448119 Fax:

SN619319 (BOL)

33,837 lb

1663.0 PCS

3856899 (PO Number)

19.0 PLTS

ORD127702 (Order Number)

LD25584JR (Load ID)

LD25584JR (PRO)

RIKN (SCAC)

TL (Mode)

### Stop 2 (drop)

04/18/2025 08:00 AM - 04/18/2025 08:00 AM

Uline,

12656 Uline Way,

Kenosha, WI 53144

Phone: Fax:

SN619319 (BOL)

33,837 lb

1663.0 PCS

3856899 (PO Number)

19.0 PLTS

ORD127702 (Order Number)

LD25584JR (Load ID)

LD25584JR (PRO)

RIKN (SCAC)

TL (Mode)

### Freight Terms

#### Charge Details

Description	Rate	Quantity	Charge
Total Line Haul	1500.0 Flat Rate		\$1500.0
		Total:	\$1500.0

Freight Terms: 1500.0, Prepaid (33837.0 lb) (899.05 miles)

### References

Reference Type	Reference
Transport Match	LD25584JR
BOL	SN619319
PO Number	3856899
Order Number	ORD127702
Delivery Appointment	04/18/2025 08:00
PRO	LD25584JR
Mode	TL
SCAC	RIKN
Pickup Appointment	04/17/2025 08:00
Booking Rep	SFolse

### Special Instructions



FORMERLY ABORN & CO.

## Freight Plus Load Tender

**Reference:** LD25584JR ( Load ID )

**Carrier:** Brz ( RIKN )

**Tender:** 04/16/2025 03:19

Any questions or issues please call 781-659-1321 x 6003 or email [carrieroperations@freightplus.io](mailto:carrieroperations@freightplus.io)  
Please send electronic pod and invoices to [GetPaid@freightplus.io](mailto:GetPaid@freightplus.io)

*Luke Miche*

Ship Date: 16 Apr 2025

## BILL OF LADING

Page 1

SHIP FROM				SHIP TO			
Name: Notrax Address: 133 Suppor DR City/State/Zip: Moselle, MS 39459 Location Instructions:				Bill of Lading Number: LD25584JR Pro Number: LD25584JR Quote Number:			
Name: Uline Address: 12656 Uline Way Address2: City/State/Zip: Kenosha, WI 53144 Location Contact: Phone: Email:				CARRIER NAME: Brz Trailer Number: P5260126 Seal Number(s): 0000516			
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Justrite C/O FreightPlus Address: 108 Myrtle Street City/State/Zip: Quincy, MA 02171 Special Instructions:				SCAC: RIKN Order Number: ORD127702, PO Number: 3856899, Customer Reference:			
Services Required: Pickup Appointment, Delivery Appointment,				Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid X Collect 3rd Party <input type="checkbox"/> (check box) Master Bill of Lading: with attached Underlying Bills of Lading			
ITEM INFORMATION							
ITEM ID	# PIECES	WEIGHT	ITEM DESCRIPTION	DIMENSIONS	NMFC	CLASS	
GNRH2411YB	1663.0	33837.0	GNRH2411YB			70.0	
GRAND TOTAL	1663.0	33837.0					
SHIP UNIT INFORMATION							
HANDLING UNIT	PIECES		COMMODITY DESCRIPTION				
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)		
19.0	PLT	1663.0	PCS	33837.0	LBS		
19.0		1663.0		33837.0			
				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 is 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 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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.							
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.  Quishen 4/16/25				Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		CARRIER SIGNATURE / PICKUP 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.  C. 4/17	

STC  
LECVB 19 STOPS  
16. BELONG JA  
04-19-2025