



## INVOICE

**BILL TO:**  
AFN LLC  
2700 COMMERCE ST STE 1500  
DALLAS, TX 75226

**INVOICE DATE:** 05/13/2025  
**INVOICE #:** B90310  
**TERMS:** NET 30  
**DUE DATE:** 06/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/08/2025		1 Merrill St Suite #15, Salisbury, MA 01952 - 2420 N Oxnard Blvd, Oxnard, CA 93036			
		Freight Income	1	\$800.00	\$800.00

TOTAL
\$800.00

**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**

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 4957066**  
**Manifest Number:**  
**Movement Number: 6967952**  
**Contact: Jason Morales**  
**Email: j.morales@wwex.com**  
**Phone: 224-515-7154**

**Page 1**

**THIS RATE CONFIRMATION HAS BEEN TENDERED TO, REVIEWED BY AND RATE APPROVED BY:**

BRZ  
BURBANK IL 60459  
MC#: 086875  
**Phone:** 7083035150  
**Fax:**

**REMIT TO INFO:**

Please have Driver call:

Worldwide Express Globaltranz  
Email Invoice/POD: TLcarrierDOCS@globaltranz.com

**Trailer Type:** Van Airride (DAT) **Weight:** 2500.0 **Temp:**  
**Door Type:** **Pieces:** 1 **Length:** 5  
**Commodity:** UBOX Dimensions 60X96X93 **BOL:** 905430617

**Stop Information**

**PU 1**

**Name:** U-HAUL MOVING & STORAGE OF SALIS **Date:** 05/08/2025 0900  
**Address:** 1 MERRILL ST SUITE #15 05/15/2025 1600  
SALISBURY MA 01952 **Pieces** 1  
**Phone:** **Weight** 2500.0  
**Contact:**

**Reference number:** 11 UHAUL  
**Reference number:** 6Y DRY VAN-AIR RIDE  
**Reference number:** BM 905430617  
**Reference number:** CR 29515819  
**Reference number:** CT 29515819  
**Reference number:** PO CS-609464376  
**Reference number:** SI CS-609464376  
**Reference number:** SI SI

**Stop Information**

**SO 2**

**Name:** U-HAUL MOVING & STORAGE OF NORT **Date:** 05/24/2025 0900  
**Address:** 2420 N OXNARD BLVD 05/24/2025 1600  
OXNARD CA 93036 **Pieces** 1  
**Phone:** **Weight** 2500.0  
**Contact:**

**Reference number:** CT 29515819  
**Reference number:** PO CS-609464376  
**Reference number:** SI CS-609464376  
**Reference number:** SI SI

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**LOAD MONEY**

**Base Rate:** \$800.00  
**Total Pay:**

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**Instructions**

U-HAUL MOVING & STORAGE OF SALISBURY - UHAUPHA1: TONUs for weather related issues will not be approved. Please reach out to confirm location is open if there are any weather concerns.  
U-HAUL MOVING & STORAGE OF SALISBURY - UHAUPHA1: All U-Boxes included in this shipment must pick up and a BOL must be sent by the latest pick-up date displayed on this Rate Confirmation, or carrier may be subject to U-Haul's late pick-up fee being passed through of up to \$200.

U-HAUL MOVING & STORAGE OF SALISBURY - UHAUPHA1: Total length is determined by piece count (1 UBOX = 5 feet in trailer length - 60x96x93). Air ride dry van with swing doors is required; NO REEFERS. Box trucks with air ride are permitted, but need 96" height clearance and each piece will be loaded 8ft in length. Equipment marked with U-Haul competitor's logos may be subject to refusal with no TONU. Loading and unloading hours are 0900-1600 7 days/week. Carrier must provide 2hr pickup and delivery ETA for scheduling purposes. Issues must be communicated while the driver is on site, and drivers must stand by until truck is dismissed by WWEX Group or 2 hrs have passed in order to receive accessorial payment. IN/OUT times must be signed off by shipper or consignee for detention payment. \$250 rate reduction may be applied for late delivery as a pass through. Driver must obtain gypsy moth and spotted lanternfly paperwork from shipper on inbound CA shipments. Reroutes are paid out at \$50 if location changes while driver is on site.

U-HAUL MOVING & STORAGE OF SALISBURY - UHAUPHA1: CT# IS THE PICKUP NUMBER

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**To be eligible for Accessorials / Incidentals, driver must:**

Be checked in to shipper OR receiver by the appointment time.

Submit all proof of detention, accessorial incidentals within 24-48 hours of delivery.

***Carrier must accept location tracking via an approved visibility technology (confirm with broker)***

**Detention:**

Carrier must be on time for pickup/delivery.

Detention accrual begins 2 hours after appointment time at shipper/receiver.

Carrier must notify Broker after 60 minutes of waiting.

Provide time stamped BOL within 48 hours of delivery.

Detention Rate - \$40/hr after 2 hours. Max \$200 detention per stop

**Layover, Truck Order Not Used (TONU):**

Carrier must contact Broker to request.

Delays or cancelations must be confirmed by Broker.

Layovers \$200 Dry Van or \$250 Running Reefers.

TONU \$200.

**Submitting Payments:**

Email invoice, Rate Confirmations, Proof of Delivery and Receipts to TLcarrierDOCS@globaltranz.com.

2.5% Quick Pay available upon request.

For Payments question contact TLcarrierREQUEST@globaltranz.com or by calling 224-515-7250.

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Carrier Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce provision of this agreement, rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement and this Carrier Rate Confirmation, the Agreement shall govern and then any terms set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match this Carrier Rate Confirmation. Broker does not authorize handwritten or verbal changes to this Carrier Rate Confirmation. If this Carrier Rate Confirmation does not accurately reflect the load terms, Carrier must obtain a revised Carrier Rate Confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in line haul deductions.

Kennedy, Bruce  
300 Bridge St  
South Hamilton, MA 01982



GlobalTranz Enterprises  
BILL OF LADING: 29515819



DO NOT RELEASE U-BOX TO CARRIER  
UNLESS DRIVER PROVIDES CORRECT BOL#

Ref # 905430617  
Third Party Freight Charges  
Bill To: GlobalTranz Enterprises  
Address: 7350 N. Dobson Rd  
Suite 130  
Scottsdale, AZ 85256

SHIP FROM

U-HAUL MOVING & STORAGE OF SALISBURY  
798025  
1 MERRILL ST SUITE #15 SALISBURY, MA 01952  
POC-MCO 798 TRAFFIC OFFICE  
(978) 965-2747

SHIP TO

U-HAUL MOVING & STORAGE OF NORTH OXNARD  
711071  
2420 N OXNARD BL OXNARD, CA 93036  
POC-MCO 711 TRAFFIC OFFICE  
(818) 988-7008

CUSTOMER ORDER INFORMATION

# Boxes	Class	Weight	Length	Width	Height	Description of Articles
1 BX	100	2500 LBS	96	60	90	General Commodities

AA2891Z

Required Delivery Date: 5/25/2025

\* Shipment must be delivered on or before this date.

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

Declared value \$10,000.00 per box

ORIGIN SIGNATURES

Step 1 U-HAUL Personnel at Dispatch

Print Name: Chris Moun  
Date: 5/8/25  
Signature: [Signature]

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.

Step 2 Carrier Signature at Pickup

Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

MC # / US DOT #:

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.

DESTINATION SIGNATURES

Step 3 Damage? Y / N

Damaged Box Number(s) \_\_\_\_\_

Details: \_\_\_\_\_  
\_\_\_\_\_

If YES, complete BOL then go to [uhaul.net/rpc](http://uhaul.net/rpc) to report incident and upload photos.

Step 4 U-HAUL Personnel at Receive

Print Name: Jose Gonzalez  
Date: 5/12/25  
Signature: [Signature]

I have walked around each container and noted damage in Step 3.

Step 5 Carrier Signature at Delivery

Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

Carrier acknowledges delivery of packages and required placards. Property described above was delivered in good order except as noted.

\*Both the receiving and dispatching entities must save a signed copy of the BOL in their daily paperwork.



Kennedy, Bruce  
300 Bridge St  
South Hamilton, MA 01982



GlobalTranz Enterprises  
BILL OF LADING: 29515819



DO NOT RELEASE U-BOX TO CARRIER  
UNLESS DRIVER PROVIDES CORRECT BOL#

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798025  
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Declared value \$10,000.00 per box

ORIGIN SIGNATURES

Step 1

U-HAUL Personnel at Dispatch

Print Name: Chris Moore  
Date: 5/18/25  
Signature: [Signature]

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.

Step 2

Carrier Signature at Pickup

Print Name: Bryan Polanco  
Date: 5/18/25  
Signature: [Signature]

MC # / US DOT #:

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.

DESTINATION SIGNATURES

Step 3

Damage? Y / N

Damaged Box Number(s) \_\_\_\_\_

Details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If YES, complete BOL then go to [uhaul.net/rpc](http://uhaul.net/rpc) to report incident and upload photos.

Step 4

U-HAUL Personnel at Receive

Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

I have walked around each container and noted damage in Step 3.

Step 5

Carrier Signature at Delivery

Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Signature: \_\_\_\_\_

Carrier acknowledges delivery of packages and required placards. Property described above was delivered in good order except as noted.

\*Both the receiving and dispatching entities must save a signed copy of the BOL in their daily paperwork.