



INVOICE

BILL TO:
MOLO SOLUTIONS LLC
167 N GREEN ST SUITE 1400
CHICAGO, IL 60607

INVOICE DATE: 05/19/2025
INVOICE #: B91279
TERMS: NET 30
DUE DATE: 06/19/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/15/2025		14800 Blue Mound Rd, Haslet, TX 76052 - 739 W 6th St, Papillion, NE 68046, USA			
		Freight Income	1	\$2,450.00	\$2,450.00

TOTAL
\$2,450.00

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

Molo Solutions, LLC
Attn: Purch Trans A/P
PO Box 100048
Fort Smith, AR 72917-0048



Send tracking updates by email:
tracking@shipmolo.com
Call or Text:
+1 (847) 306-3557

Contact your MoLo Rep, Garin Morris
Email: garin.morris@shipmolo.com
Phone: +14794349170
Questions? Call Molo at: +1 (847) 306-3557.

Rate Confirmation

Route # 2002055219

Mode: Truck

Size: FTL

Route Type: OTR

Distance: 726 Miles

of Stops: 4

Origin

Haslet, TX 76052

Destination

Omaha, NE 68118

Date: 5/15/2025

Equipment: Van 53

Expected Min Temp:

Expected Max Temp:

Temp Setting:

Carrier: Riki Transportation Inc.

MC#: 086875

DOT#: 3119062

Contact: John Djordjevic

Phone:

Email: john@rtbrz.com

Total Rate: \$2,450.00 USD

Notes:

Route Refs:

Vendor Refs:

If this is a Temperature Controlled Shipment Please Follow These Guidelines:

Run all reefers on continuous unless specific written instructions are given to do otherwise. Run reefer at the temperature on BOL. If no temperature on BOL, please call +1 (847) 306-3557 for instructions.

Stop 1 - Pick Up

SOUTHWIRE DFW CSC
14800 Blue Mound Rd,
Haslet, TX 76052

Date/Time: 5/15/2025 08:00 - 19:00

Scheduling: Appointment

Loading Type: Live

Special Reqs: Electronic Tracking; HRHV; Dedicated Sealed;

Pallet Count:	
PU #: 0004201252	
Pick Up Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
	Pieces			No	Copper Wire Reels	0 L x 0 W x 0 H ft	No	No					26,142 lb
Total HU: 0				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 26142 lb			

Stop 2 - Delivery	
VAN METER INC-KANSAS CITY 1403 Fairfax Trafficway Ste 200, KANSAS CITY, KS 66115 Date/Time: 5/16/2025 07:00 - 5/19/2025 14:00 Scheduling: Open Loading Type: Live Pallet Count:	Special Reqs: Electronic Tracking; HRHV; Dedicated Sealed;
Delivery Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
	Pieces			No	Copper Wire Reels	0 L x 0 W x 0 H ft	No	No					26,142 lb
Total HU: 0				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 26142 lb			

Stop 3 - Delivery	
OPPD - Papillion Service Center 1210 W 6th St, Papillion, NE 68046 Date/Time: 5/19/2025 08:00 - 15:00 Scheduling: Open Loading Type: Live	Special Reqs: Electronic Tracking; HRHV; Dedicated Sealed;

Pallet Count:	
Delivery Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
	Pieces			No	Copper Wire Reels	0 L x 0 W x 0 H ft	No	No					26,142 lb
Total HU: 0				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 26142 lb			

Stop 4 - Delivery	
FACILITY 180th St. Trail, Omaha, NE 68118 Date/Time: 5/16/2025 13:00 - 14:00 Scheduling: Open Loading Type: Live Pallet Count:	Special Reqs: Electronic Tracking; HRHV; Dedicated Sealed;
Delivery Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
	Pieces			No	Copper Wire Reels	0 L x 0 W x 0 H ft	No	No					26,142 lb
Total HU: 0				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 26142 lb			

Carrier Cost Date: 05/16/2025 12:52 CST				
Cost Type	Currency	Cost Per	Units	Total Cost
Flat Rate	USD	\$2,400.00	1	\$2,400.00
Stop Off Charge	USD	\$50.00	1	\$50.00

Total Cost	\$2,450.00
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THIS LOAD CONFIRMATION IS SUBJECT TO THE TERMS OF THE AGREEMENT FOR MOTOR CONTRACT CARRIER SERVICES ("AGREEMENT") PREVIOUSLY EXECUTED BETWEEN OUR COMPANIES AND THIS CONSTITUTES AN ADDENDUM TO THE TERMS OF THAT AGREEMENT. WE AGREE TO PAY THE RATES AND CHARGES SHOWN ABOVE AND NO DIFFERENT TARIFF RATE OR SCHEDULE OF RATES APPLY. THIS LOAD CONFIRMATION IS INCLUSIVE OF ALL CHARGES. UNLESS ORAL AND WRITTEN FAX OBJECTIONS ARE MADE TO ITS TERMS, AT THE EARLIER OF WITHIN TWENTYFOURS (24) HOURS OF RECEIPT OR PRIOR TO WORK BEING INITIATED, YOU HAVE AGREED TO THESE TERMS.

Signed in/out times and all accessorial or lumper receipts must be submitted within 24 hours to be eligible for reimbursement. SEAL MUST BE INTACT AT DELIVERY, DRIVER MUST RESEAL TRAILER AFTER EACH STOP OR LOAD MAY BE REJECTED. Unless MoLo Solutions) provides written notice that this term does not apply to this shipment,

Carrier's motor vehicle equipment shall be dedicated to Broker's exclusive use while transporting the freight tendered pursuant to MoLo Solutions's Broker Carrier Agreement and this Load Confirmation. Carrier's violation of this requirement shall result in Carrier's forfeiting its right to be paid for the transportation services contemplated by this Load Confirmation as liquidated damages, and may result in a claim.

Pursuant to MoLo Solutions' Broker Carrier Agreement, Carrier will provide an amount of cargo insurance coverage sufficient to cover the loss or damage of any commodities and cargo carried. Carrier's cargo insurance policy must not exclude from coverage any commodities or cargo carried on this order. If Carrier's cargo insurance policy contains a schedule of covered vehicles, Carrier will not transport any cargo on this shipment using a vehicle that is not listed as a scheduled vehicle on Carrier's cargo insurance policy. Trailer must be clean, dry and odor free. Food grade trailer is required for all food shipments and Carrier must be in full compliance with the Food Safety Modernization Act (FSMA) if applicable. Driver must make sure trailer is sealed and document seal number. Carrier agrees that in transportation the shipment described above, it will comply with all U.S. DOT regulations applicable to its operations while transporting said shipment, including but not limited to, drivers' hours of service.

Signed POD, invoice and all accessorial receipts must be submitted for payment.

MoLo does not require you to mail in physical copies of your paperwork as long as you email a complete and legible copy.

Payment Information	
For standard pay (30 days from receipt of invoice): Please send invoices to: carrierinvoices@shipmolo.com MoLo Solutions, LLC Attn: Purch Trans A/P PO Box 10048 Fort Smith, AR 72917-0048 Signed POD, invoice and all accessorial receipts must be submitted for payment.	For Quick Pay 3% fee (2-4 business days from receipt of invoice): MoLo Solutions, LLC Attn: Purch Trans A/P PO Box 10048 Fort Smith, AR 72917-0048 Signed POD, invoice and all accessorial receipts must be submitted for payment. If invoices are sent to an email address other than quickpay@shipmolo.com, they will still be processed for QuickPay but payment may be delayed

Contact Us:

Phone: +1 (847)306-3557

Please use the following guidelines to avoid delays in processing your invoice:

1. The subject line of your email as well as your invoice should contain the MoLo Load Number as printed on the Rate Confirmation you received for the load.
2. Please make sure your paperwork is complete and legible
3. We do NOT accept OneDrive links at this time. Please send your invoice as an email attachment.

Please call your representative listed above or +1 (847) 306-3557 for all questions.

Please sign and return to MoLo

Date: 05/15/2025

BILL OF LADING

Page 7 of 8

This Bill of Lading is hereby incorporated by reference into the Transportation Agreement by and between Southwire Company, LLC and Carrier (the "Transportation Agreement") and shall be governed and construed in accordance with the terms set forth therein.

SHIP FROM

Name : Southwire DFW CSC
Address : 14800 Blue Mound Rd.
City/State/Zip : Haslet TX 76052
Phone : 469-942-8920
Email : dfwcustomerservice@southwire.com

Bill of Lading : 00328860072135092-2



SID# : 7213509
TMS ID : 0004201252

SHIP TO

Name : OMAHA PUBLIC POWER DIST
Address : PAPILLION EO CENTER
1210 W 6TH STREET
City/State/Zip : PAPILLION, NE, 68046

Carrier Name : ARCBEST
Trailer Number : W94943
Seal Number : 2079953/54

SCAC : ACBH
Pro Number :

THIRD PARTY FREIGHT CHARGES BILL TO:

Name :
Address :

City/State/Zip :

SPECIAL INSTRUCTIONS: Master Bill of Lading:
00328860072135092

Freight Charge Term: Prepaid: ☒
(freight charges are prepaid unless marked otherwise)

Collect: ☐3rd Party: ☐

☐
(checkbox)

Master Bill of Lading: with attached
underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
			Y	N	
			Y	N	
See Attached			Y	N	
Bill of Lading Supplement			Y	N	
			Y	N	
GRAND TOTAL					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE				COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350		NMFC #	CLASS
						See Attached Bill of Lading Supplement			
6		6		18202 LB		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 _____"

NOTE Liability Limitaion for loss or damage in this shipment may be applicable. See 49 U.S.C 14706(c)(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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE/ 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 Department of Transportation

Trailer Loaded: Freight Counter:

☒ By Shipper
☐ By Driver

☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

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.

R. Shogel

BILL OF LADING

Page 2 of 8

Date: 05/15/2025

This Bill of Lading is hereby incorporated by reference into the Transportation Agreement by and between Southwire Company, LLC and Carrier (the "Transportation Agreement") and shall be governed and construed in accordance with the terms set forth therein.

SHIP FROM

Name : Southwire DFW CSC
Address : 14800 Blue Mound Rd.
City/State/Zip : Haslet TX 76052
Phone : 469-942-8920
Email : dfwcustomerservice@southwire.com

SHIP TO

Name : VAN METER INC-KANSAS CITY
Address : 1403 FAIRFAX TRAFFICWAY STE 200
City/State/Zip : KANSAS CITY, KS, 66115

THIRD PARTY FREIGHT CHARGES BILL TO:

Name : *Subject to inspection*
Address : *[Signature]*
City/State/Zip : *[Signature]*

SPECIAL INSTRUCTIONS: Master Bill of Lading:
00328860072135092

Bill of Lading : 00328860072135092-1



SID# : 7213509
TMS ID : 0004201252

Carrier Name : ARCBEST
Trailer Number : W94943
Seal Number : 2079953/54

SCAC : ACBH
Pro Number :

Freight Charge Term: Prepaid: ☒
(freight charges are prepaid unless marked otherwise) Collect: ☐
3rd Party: ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading
(checkbox)

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
			Y N	
			Y N	
See Attached			Y N	
Bill of Lading Supplement			Y N	
			Y N	
GRAND TOTAL				

CARRIER INFORMATION

HANDLING UNIT		PACKAGE				COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350		NMFC #	CLASS
						See Attached Bill of Lading Supplement			
11		18		13670 LB		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 _____."

NOTE Liability Limitaion for loss or damage in this shipment may be applicable. See 49 U.S.C 14706(c)(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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE/ 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 Department of Transportation

Trailer Loaded: Freight Counter:

☒ By Shipper
☐ By Driver
☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE/ PICKUP DATE

Carrier acknowledges receipt of packages and required placecards. 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.

[Signature]

Date: 05/15/2025

BILL OF LADING

Page 7 of 8

This Bill of Lading is hereby incorporated by reference into the Transportation Agreement by and between Southwire Company, LLC and Carrier (the "Transportation Agreement") and shall be governed and construed in accordance with the terms set forth therein.

SHIP FROM

Name : Southwire DFW CSC
Address : 14800 Blue Mound Rd.
City/State/Zip : Haslet TX 76052
Phone : 469-942-8920
Email : dfwcustomerservice@southwire.com

Bill of Lading : 00328860072135092-2



SID# : 7213509
TMS ID : 0004201252

SHIP TO

Name : OMAHA PUBLIC POWER DIST
Address : PAPILLION EO CENTER
1210 W 6TH STREET
City/State/Zip : PAPILLION, NE, 68046

Carrier Name : ARCBEST
Trailer Number : W94943
Seal Number : 2079953/54

SCAC : ACBH
Pro Number :

THIRD PARTY FREIGHT CHARGES BILL TO:

Name :
Address :

City/State/Zip :

SPECIAL INSTRUCTIONS: Master Bill of Lading:
00328860072135092

Freight Charge Term: Prepaid: ☒

(freight charges are prepaid unless marked otherwise)

Collect: ☐3rd Party: ☐

☐ Master Bill of Lading: with attached
(checkbox) underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
			Y N	
			Y N	
See Attached			Y N	
Bill of Lading Supplement			Y N	
			Y N	
GRAND TOTAL				

CARRIER INFORMATION

HANDLING UNIT		PACKAGE				COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350		NMFC #	CLASS
						See Attached Bill of Lading Supplement			
6		6		18202 LB		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 _____."

NOTE Liability Limitaion for loss or damage in this shipment may be applicable. See 49 U.S.C 14706(c)(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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE/ 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 Department of Transportation

Trailer Loaded: Freight Counter:

☒ By Shipper
☐ By Driver
☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

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.

R. Shedd

Date: 05/15/2025

BILL OF LADING

Page 1 of 8

This Bill of Lading is hereby incorporated by reference into the Transportation Agreement by and between Southwire Company, LLC and Carrier (the "Transportation Agreement") and shall be governed and construed in accordance with the terms set forth therein.

SHIP FROM

Name : Southwire DFW CSC
Address : 14800 Blue Mound Rd.
City/State/Zip : Haslet TX 76052
Phone : 469-942-8920
Email : dfwcustomerservice@southwire.com

Bill of Lading : 00328860072135092



SID# : 7213509
TMS ID : 0004201252

SHIP TO

Name :
Address :

Carrier Name : ARCBEST II INC
Trailer Number : W94943
Seal Number : 2079953/54

City/State/Zip : , , ,

SCAC : ACBH
Pro Number :

THIRD PARTY FREIGHT CHARGES BILL TO:

Name :
Address :

City/State/Zip : , , ,

SPECIAL INSTRUCTIONS: Underlying Bill of Lading Numbers:
00328860072135092-1, 00328860072135092-2

Freight Charge Term: Prepaid: ☒
(freight charges are prepaid unless marked otherwise) Collect: ☐
3rd Party: ☐

☒
(checkbox)

Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
			Y	N	
See Attached Underlying			Y	N	
Bill of Lading			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE				COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350		NMFC #	CLASS
						See Attached Underlying			
						Bill of Lading			
17		24		31872 LB		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 _____.

NOTE Liability Limitaion for loss or damage in this shipment may be applicable. See 49 U.S.C 14706(c)(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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE/ 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 Department of Transportation

Trailer Loaded: Freight Counter:

☒ By Shipper
☐ By Driver

☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE/ PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier the DOT emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order except as noted.

R. Shiga

Date: 05/15/2025

BILL OF LADING

Page 2 of 8

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SHIP FROM

Name : Southwire DFW CSC
Address : 14800 Blue Mound Rd.
City/State/Zip : Haslet TX 76052
Phone : 469-942-8920
Email : dfwcustomerservice@southwire.com

Bill of Lading : 00328860072135092-1



SID# : 7213509
TMS ID : 0004201252

SHIP TO

Name : VAN METER INC-KANSAS CITY
Address : 1403 FAIRFAX TRAFFICWAY STE 200
City/State/Zip : KANSAS CITY, KS, 66115

Carrier Name : ARCBEST
Trailer Number : W94943
Seal Number : 2079953/54
SCAC : ACBH
Pro Number :

THIRD PARTY FREIGHT CHARGES BILL TO:

Name : Subject to inspection
Address :
City/State/Zip :

SPECIAL INSTRUCTIONS: Master Bill of Lading:
00328860072135092

Freight Charge Term: Prepaid: ☒
(freight charges are prepaid unless marked otherwise) Collect: ☐
3rd Party: ☐

☐
(checkbox)

Master Bill of Lading: with attached
underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
			Y	N	
			Y	N	
See Attached			Y	N	
Bill of Lading Supplement			Y	N	
			Y	N	
GRAND TOTAL					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE					COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)		Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350		NMFC #	CLASS
							See Attached Bill of Lading Supplement			
11		18		13670 LB			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 _____."

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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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature _____ Shipper

SHIPPER SIGNATURE/ 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 Department of Transportation

Trailer Loaded: Freight Counter:

☒ By Shipper
☐ By Driver
☒ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

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.

R. Shyja

Date: 05/15/2025

SUPPLEMENT TO THE BILL OF LADING

Page 3 of 8

Bill of Lading Number : 00328860072135092-1

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
P002151451			Y	N	PL# 881268133
			Y	N	Contact Phone: 913-298-7142
			Y	N	Appointment/Delivery Times: M-F
			Y	N	8A-1P Pre-call/Delivery
			Y	N	Information: CALL 24 HOURS AHEAD
			Y	N	PRIOR TO DELIVERY. VANMETER CAN
			Y	N	RECEIVE MORE THAN 2 TRUCK LOADS IN
			Y	N	ONE DAY.
P002157500			Y	N	PL# 881287153
P002157547			Y	N	PL# 881287153
			Y	N	Other: VMI material should not be
			Y	N	shipping on recycled reels
			Y	N	Call in advance: YES - 24 HOURS IN
			Y	N	ADVANCE
			Y	N	Receiving Contact: 913-298-7142
PAGE SUBTOTAL					

CARRIER INFORMATION

HANDLING UNIT		PACKAGE				COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or slowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 350	NMFC #	CLASS
		1	PCS	4879		CU Cable / Wire CTL	30310-1	100
		8	PCS	6729		CU Cable or Wire	30310-2	70
		1	PCS	1067		Al Cable or Wire	13810	60
		8	PCS	1		Hand Tools 30<	18662011	60
		18		12676 LB		PAGE SUBTOTAL		

Page 4 of 8

CUSTOMER ORDER INFORMATION

CARRIER INFORMATION

[illegible]

~~SUPPLEMENT TO THE BILL OF LADING~~

Bill of Lading Number : 00328860072135092-1

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NO.	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
P002155108			Y	N	2 truck loads in one day.
			Y	N	PL# 881288230
			Y	N	Other: VMI material should not be
			Y	N	shipping on recycled reels
			Y	N	Call in advance: YES - 24 HOURS IN
			Y	N	ADVANCE
			Y	N	Receiving Contact: 913-298-7142
			Y	N	Receiving Hours: MON-FRI from 8:0
			Y	N	AM-1:00PM
			Y	N	Additional Delivery Requirements:
P002156306			Y	N	Vanmeter can not receive more than
			Y	N	2 truck loads in one day.
			Y	N	PL# 881288497
			Y	N	Other: VMI material should not be
PAGE SUBTOTAL			Y	N	shipping on recycled reels

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