



# INVOICE

**BILL TO:**  
D & L TRANSPORT LLC  
8101 COLLEGE BLVD SUITE 110  
OVERLAND PARK, KS 66210

**INVOICE DATE:** 05/29/2025  
**INVOICE #:** B92770  
**TERMS:** NET 30  
**DUE DATE:** 06/29/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/27/2025		1 Riverside Wy, Wilton, NH 03086, USA - 2025 Sigman Rd NW, Conyers, GA 30012, USA			
		Freight Income	1	\$1,900.00	\$1,900.00

TOTAL
\$1,900.00

**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**



D & L TRANSPORT, LLC  
PO BOX 7690  
OVERLAND PARK KS 66207

PRO # 1582138

Rate Confirmation

05/27/25 08:58:35 (EST)

F R O M	ISABELLA CANNON (864) 653-3256 (866) 559-9916 (f) isabella@ltllogisticsagency.com		
C A R R I E R	BRZ (708) 303-5150 (p)		
	MC # 86875	Truck #	
	DOT 3119062	Trailer #	
	Driver EDWARDS, CARL BRAC	Cell # (717) 941-0739	

Size & Type: 53' VAN  
Pieces:

Description:  
Weight: 40000

Miles: 1132

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1900.00	
TOTAL RATE	1900.00	

PICK 1

BAR HARBOR WAER  
1 RIVERSIDE WAY  
WILTON NH 03086  
Phone/Contact: (603) 482-6125 JERRY

Appointment 05/27/25  
Appt Notes: UNTIL NOON

STOP 1

H-A SALES  
2025 SIGMAN RD NW  
CONYERS GA 30012  
Phone/Contact: (770) 922-2225

Must Deliver: 05/28/25  
Appt Notes: 8A-2P FCFS

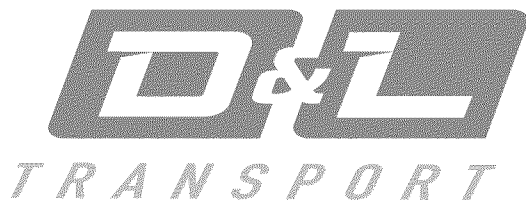
In consideration of the above rate, CARRIER agrees to the following:

1. CARRIER will transport this freight under its own operating authority, and the equipment used to transport the freight is covered by CARRIER'S insurance.
2. CARRIER will not re-broker, assign or interline the shipment(s) hereunder, without prior written consent of D&L Transport. CARRIER will not be paid in the event of violation of this paragraph and/or paragraph 1 above.
3. Delivery and/or pickup dates and hours will not require CARRIER to violate hours of service regs. Routing instructions, if any, are suggestions only.
4. INDEPENDENT CONTRACTOR - it is understood and agreed that the relationship between D&L and CARRIER is that of independent contractor and that no employee/employer relationship exists or is intended. D&L has no control of any kind over CARRIER, including but not limited to, routing of freight, and nothing contained herein shall be construed as inconsistent with this provision.
5. Insertion of D&L Transport's name as carrier on the BOL is for convenience only and does not change D&L's status as a broker nor CARRIER's status as a motor carrier.
6. CARRIER agrees to pay claims and/or customer charges due to late pickup or missed delivery time, and any costs associated with bringing in crews to load/unload truck.
7. All carriers/drivers are responsible to verify they scale out legally as D&L will not be responsible for any charges on overweight tickets. All loads paid by weight must have the req'd scale ticket for pay.
8. The 'Broker-Carrier Agreement' entered into and agreed upon by CARRIER and D&L is incorporated herein by reference, and the terms of said Agreement apply to this load as if fully set forth herein.
9. INDEMNITY - CARRIER shall defend, indemnify and hold D&L and its shipper customer harmless from any claims, actions or damages, arising out of CARRIER's

(Rate Confirmation Details on Next Page)

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D



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PO BOX 7690  
OVERLAND PARK KS 66207

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Rate Confirmation

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M

ISABELLA CANNON  
(864) 653-3256  
(866) 559-9916 (f)  
isabella@dltransportagency.com

C  
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BRZ  
(708) 303-5150 (p)  
MC # 86875 Truck #  
DOT 3119062 Trailer #  
Driver EDWARDS, CARL BRAC Cell # (717) 941-0739

performance under this agreement, including cargo loss & damage, theft, delay, damage to property, and personal injury or death.

10. SEALS - It is CARRIER's driver's responsibility to ensure the trailer is sealed properly after loading. With no exceptions, seals are to be removed by receiver or under receiver's supervision only.

11. QUICK PAY - 5% fee applied and carrier must be in business for at least 1 year to qualify. D&L processes payment within 24 hours of receiving the invoice and POD's as well as the agents release of the shipment. To be setup for Quick Pay, carrier must mark QUICK PAY on the invoice. A check will be mailed on the next check run. Check runs are M-W-F. If ACH is requested, please visit the carrier portal, <https://carrierportal.dltransport.com/>. Carriers payment will process within 24 hours.

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BILLING QUESTIONS: 913-608-8700

BILLING EMAIL: [ap@dltransport.com](mailto:ap@dltransport.com)

BILLING ADDRESS: PO BOX 7690, Overland Park, KS 66207

BILLING FAX: 941-237-4845

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

Doc ID: 2625052709375311  
Send Carrier Bills to the Address Above  
Sertifi Electronic Signature

PRO #1582138

must appear on all Invoices

E-Signed : 05/27/2025 08:00 AM CDT

*Smith Dabic*

smith@rtbrz.com  
IP: 178.218.162.132

Sertifi Electronic Signature  
DocID: 20250527075753753



Date 5/14/25

**BILL OF LADING - SHORT FORM - NOT NEGOTIABLE**

<b>SHIP FROM</b> BAR HARBOR 1 RIVERSIDE WAY WILTON NH 03086 ATT TIM 603-325-2811		<b>Bill of Lading Number:-</b>			
<b>SHIP TO</b> [Name] H-A SALES [Street Address] 2025 SIGMAN RD NW [City, ST ZIP Code] CONYERS GA 30012 CID No.: 770-922-2225		<b>Carrier Name -</b> Trailer number: Serial number(s):			
<b>-THIRD PARTY FREIGHT CHARGES BILL TO</b>		<b>SCAC:</b> <b>Pro Number:</b>			
<b>Special Instructions:</b>		<b>Freight Charge Terms</b> (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party * <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.			
<b>CUSTOMER ORDER INFORMATION</b>					
Customer Order No.	# of Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information	
			Y   N		
			Y   N		
			Y   N		
			Y   N		
Grand Total					
<b>CARRIER INFORMATION</b>					
Handling Unit		Package		LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)
<b>Commodity Description</b> <small>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</small>					
				NMFC No.	Class
28	PLTS		CTNS		
				APPAREAL NOI	General Merch
				49880-09	70
				5/29/25	
<b>COD Amount: \$</b> Fee terms: Collect <input type="checkbox"/> Prepaid <input checked="" type="checkbox"/>					
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 charges and all other lawful fees. <b>Shipper Signature</b>					