

## **INVOICE**

BILL TO: BEST LOGISTIC SERVICES 829 GRAVES STREET KERNERSVILLE, NC 27284 INVOICE DATE: 06/23/2025 INVOICE #: R96973 TERMS: NET 30 DUE DATE: 07/23/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/19/2025		1310 Fanning Bridge RD, Fletcher, NC 28732 - 9585 N Virginia St, Ste 100, Reno, NV 89506			
		Freight Income	1	\$4,200.00	\$4,200.00

TOTAL	
\$4,200.00	

## 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

**TEAM: Purple Team** 

Best Logistics P.O. Box 336

PU 1

SO 2

Kernersville, NC 27285

PHONE: (336) 515-9003 \* FAX: (844) 301-4234 \*

Carrier: ZIGI FREIGHT INC

Carrier ID: ZIGLOM Phone: 630-485-7370

> Fax: 630-485-6980 Date: 06/19/2025

1720114 Order:

\*ORDER # MUST APPEAR ON ALL BILLING\* \*DRIVER MUST CALL IN FOR DISPATCH\*

Contact: Purple Team

Weight: 20000.0

Trailer: 53' Van Only

\*PLEASE NOTE OUR NEW CONTACT NUMBERS BELOW:

Phone: (336) 515-9003 \* Fax: (844) 301-4234 \*

Reference:

Instructions / Comments:

Electrolux - ELEMIN: PLEASE NOTIFY US OF ANY DELAYS.

Order Miles: 2424.0

PU# 1720114

BOL: 1720114

Name: Electrolux

Address: 1310 Fanning Bridge RD

APPT REQ receiving.csg@electrolux.com

**FLETCHER** 

Name: ELECTROLUX KITCHEN

Address: 9585 N VIRGINA ST

STE 100

RENO

NV 89506

NC 28732

Contact: (336) 515-9003

Commodity: Palletized Household goods

Driver Assist: N

Date: 06/23/2025 1100

Date: 06/19/2025 0700

06/19/2025 1900

Contact: (336) 515-9003

Driver Assist: N

Total Carrier Pay: \$4,200.00 Payment **Payment** 

IN ORDER TO HAUL FOR BEST, ALL CARRIERS MUST INFORM DRIVERS OF MACROPOINT TRACKING REQUIREMENT. AT THE TIME OF BOOKING, ALL CARRIERS MUST PROVIDE VALID DRIVER PHONE NUMBER. DRIVERS MUST ACCEPT AND DOWNLOAD MACROPOINT APP BEFORE ARRIVING TO SHIPPER. SHOULD CARRIER/DRIVER NOT COMPLY, A \$100 FINE WILL BE IMPOSED. SUBMISSION OF SIGNED RATE CONFIRMATION VALIDATES THIS AGREEMENT. ELD COMPLIANCE VIA MACROPOINT IS ALSO ACCEPTABLE.

## Please sign below Agreement

Mateo Utvic

STANDARD TERMS ARE PAYMENT MADE 28 DAYS FROM RECEIPT OF LEGIBLE SIGNED BILL OF LADING, INVOICE, AND LUMPER RECEIPT (IF APPLICABLE). ALL EXTRA CHARGES MUST BE PRE-APPROVED BY BEST REPRESENTATIVE THAT BOOKED LOAD. ALL EXTRA CHARGES MUST BE BILLED WITH RECEIPT & BOL. DRIVER MUST REPORT ANY OVERAGES, SHORTAGES, OR DAMAGED PRODUCT IMMEDIATELY.

CARRIER CERTIFIES THAT THEY HOLD THE APPROPRIATE LISCENCES AND AUTHORITIES AND MAINTAIN THE APPROPRIATE INSURANCE COVERAGES AS REQUIRED. BY REGULATION TO PERFORM THIS TRANSPORTATION ON BEHALF OF BEST LOGISTICS.

ANY DOUBLE BROKERAGE WILL RESULT IN NON-PAYMENT. CONFIRMATION OF THE ACTUAL CARRIER OF THIS LOAD WILL BE MADE BEFORE PAYMENT IS RELEASED. FINES IMPOSED FOR LATE PICKS AND LATE DELIVERIES.

CARRIER ACKNOWLEDGES AND AGREES THAT BROKER HAS THE EXCLUSIVE OBLIGATION TO PAY FREIGHT CHARGES TO CARRIER. CARRIER HEREBY WAIVES AND AGREES TO REFRAIN FROM ALL COLLECTION EFFORTS AGAINST BROKER'S CUSTOMER, SUPPLIER, RECEIVER, CONSIGNOR, OR CONSIGNEE AND ONLY SEEK PAYMENT FROM BROKER.

To Expedite Payment: Email All invoices and Signed POD as attachments to: CarrierAP@shipwithbest.com (PICTURES IN EMAIL BODY WILL NOT BE ACCEPTED) 678 3-31-16 In the SUBJECT LINE Reference ORDER NUMBER 1720114

06/19/2025

(505) 550-8974

Harol

(X) Accept 773

W94935 ( ) Decline



Date:	Date:											
6/19/2025 BILL OF LA								DING		Page 1	4729	
City/State/Zip: FLETCHER, NC 28732								Bill of Lading Number: 00125050014954729				
SID#; FOB: SHIP TO							(402) 00125050014954729					
Name: ELECTROLUX HOME PR Location						0000		CARRIER I	NAME: BEST DEDI	CALED		
Addres	ss:	N VIRO	GINIA ST	J	0000	_	Seal number(s): UL-0597330 Shipment Number: 1720114					
City/State/Zip: RENO, NV 89506								SCAC: BSCG				
CID#	CID#							Pro number:				
PREPAID, THIRD PARTY OR COLLECT FREIGHT CHARGES TO:  Name: ELECTROLUX_FLETCHER C/0								(9012K) BSCG TRL#W94935				
Address: ELECTROLUX-FLETCHER CITI BANK POWERTRAC P.O. BOX 3001					KĽÓĞI	Freight Charge Terms: (freight charges  are prepaid unless marked otherwise)  Prepaid X Collect 3rd Party						
City/St	ate/Zip:	NAPER	RVILLE,	IL 60566	6			Master Bill of Lading: with attached underlying Bills of Lading				
SPECIAL INSTRUCTIONS:												
767 r P 015 TRA SEA	412100, O number	3767412 s 60001 0015293 W94935 0597330	200, 3767 49274, 60 2, 600015	412500, 37674: 00149272, 6000 2930, 6000152	12600, 0149279 934, 60	3767412700 6, 60001522 000152933,	51, 6000	67412900, 3° 6000152257, 152935.	0, 3766742700, 376 767413100. Includ 6000152928, 60001	es Custome 52927, 600	5	
CHE	TOMER	ORDER	NUMBER	the same of succession, where the same of the same of		IER ORDER I		PALLET	ADDITIONA	L SHIPPER IN	IFO	
CUSTOMER ORDER NUMBER				(Y/N) 17,085 Y 3762873601								
6000149274												
GRAN	D TOTA					17,085 RRIER INFOR						
HANDLING PACKAGE UNIT					COMMODITY DESCRIPTION LTL O				NLY			
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	must be so market	d and par	ng special or additional care or attention in handling or stowing and packaged as to ensure safe transportation with ordinary care.  See Section 2(e) of NMFC Item 360  NMFC #			CLASS	
	7.1	1	atna	17,085		Appl P	Part	s - Fletc	her 0085	156600-5	85	
37	plts		ctns	17,000			Parts - Fletcher 0085 156600-5 85					
					23,3							
								ODAND TO	TAI			
37		1		17,085	W	a the agreed or		COD Amou				
"The agree	alue of the pro	value of the p	vs: roperty is specif	quired to state specifications and states are stated by the ship	per to be n	ot exceeding		Fee	Terms: Collect: Customer check ac	ceptable:		
NOTE	Liability L	imitation	for loss o	r damage in this	s shipm	nent may be	appli	The carrier sha	I not make delivery of this	shipment without po	avment of	
the shipper, Straight Bil	on request. The	shipper hereby o ding those on th	ertifies that he/she e back thereof, and	ts that have been agreed uporules that have been agreed uporules that have been establistis familiar with all the terms the said terms and condition	deandition	ns of the NIMPO UM	form	neight and an e	and lattra charges.	- India pe	aymant of	
and accepted for him/herself and his/her assigns.  SHIPPER SIGNATURE / DATE   Trailer Loade						reight Counted		Shipper Signature  CARRIER SIGNATURE / PICKUP DATE  Carrier acknowledges receipt of packages and				
This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and are in prepar condition for transportation according to the applicable reportations of the DOT.				By Driver		By Shipper  By Driver/pallets said to contain  By Driver/pallets said to contain						
(MA)	106-	-19-2	025			By Driver/Pie	,,,,,,		Property described above is rece	lved in good order, excep	ot as noted	