



## INVOICE

**BILL TO:**

SQUARE LOGISTIC SOLUTIONS LLC  
23 ROOSEVELT AVE  
CARTERET, NJ 07008

**INVOICE DATE:** 06/24/2025**INVOICE #:** R97651**TERMS:** NET 30**DUE DATE:** 07/24/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/23/2025		680 Edgewood Ave N, Jacksonville, FL 32254-3079, USA - 600 Ash St, Watsontown, PA 17777-1103, USA			
		Freight Income	1	\$1,800.00	\$1,800.00

**TOTAL**

\$1,800.00

**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**



23 Roosevelt Ave Carteret, NJ 07008-2413  
(888)-757-9572

23 ROOSEVELT AVE  
CARTERET, NJ 07008

**Docket:** MC01230414

**Phone:** (888) 757-9572

## LOAD CONFIRMATION

<b>Load #</b>	13851
<b>Date</b>	06/23/2025
<b>Equipment</b>	Van
<b>Equipment Length</b>	53'
<b>Weight</b>	40000 lbs
<b>Commodity</b>	Dry Goods (General)
<b>Distance</b>	898 miles
<b>Declared Value</b>	70000.00

### Carrier Information

**ZIGI FREIGHT INC**  
6850 W 63RD STREET  
CHICAGO, IL 60638  
6304857370.0

**MC Number** MC00944686  
**Primary Contact** ASTA  
**Phone** 630-485-7370 X108  
**Fax**

**Driver** Driver not set  
**Phone**  
**Email**  
**Fax**

### Notes and References

**Notes** BLIND SHIPMENT//LIGHT AND HEAVY WEIGHT TICKETS REQUIRED  
50 % DEDUCTION IN RATE , IF UNABLE TO PROVIDE

### Stops / Actions

#	Action	Date/Time	Location	Contact
1	Pickup	06/23/25 15:00	4Plast Corp. - Florida Industrial Plastics Recycling 680 Edgewood Ave N Jacksonville, FL 32254-3079 USA	Primary Contact <b>Phone:</b> +48 606 662 650
<b>References:</b> PO#40969T				
2	Delivery	06/24/25 15:00	Moran Logistics 600 Ash St Watson town, PA 17777-1103 USA	<b>Phone:</b>
<b>References:</b> DELIVERY PO# E3105 <b>Cargo:</b> Check in at the guard shack 118 8th st Watson town, PA 17777				

### Pay Items

Description	Notes	Quantity	Rate	Amount
Flat Rate		1	1800.00	1800.00

**Total** 1800.00

- **Please send POD/ Signed BOL within 24/48 hours after delivery! Else there will be Deduction of \$100.**
- In case of Double Brokerage, full payment will be made to the original driver.
- We pay our carriers in net 20-25 days or less from the time we receive your invoice.
- **Email all invoices to: AP@SQUARELOGISTICSOLUTIONS.COM.**
- Accessorial charges such as pallet exchanges, fees including lumper, entry, and loading or unloading will be included in the agreed rate confirmation!
- **Missed appointments or late delivery will lead to \$250 deduction.**
- **Incase of any interruption or non acceptance of tracking link by driver will lead to \$250 deduction.**
- Drivers must report damages immediately.
- Incomplete paperwork may delay payment.
- Adherence to tracking procedures is obligatory. Failure to accept the provided tracking link will result in a deduction of \$250.
- **Reefer MUST be able to produce Thermoking report , if needed**

Driver Name	Driver Cell Phone #	
Print Name	Signature <i>Asta Mijao</i>	Date

# BILL OF LADING

Page 1 of 1

**SHIP FROM**  
 Name: K&S RESOURCES LLC  
 Address: 045 La Fontana Blvd Suite 232  
 City/State/Zip: Boca Raton FL  
 CID#: \_\_\_\_\_ FOB: ☐

Bill of Lading Number: PO# E3105

BAR CODE SPACE

**SHIP TO**  
 Name: Moran Logistics Location #: \_\_\_\_\_  
 Address: 600 Ash St  
 City/State/Zip: Watsontown, PA 17777  
 CID#: \_\_\_\_\_ FOB: ☐

CARRIER NAME: \_\_\_\_\_  
 Trailer number: 2022

Seal number(s): \_\_\_\_\_

SCAC: \_\_\_\_\_  
 Pro number: \_\_\_\_\_

BAR CODE SPACE

**THIRD PARTY FREIGHT CHARGES BILL TO:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ 3<sup>rd</sup> Party \_\_\_\_\_

☐ Master Bill of Lading: with attached underlying Bills of Lading

**SPECIAL INSTRUCTIONS:**

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SUP (CIRCLE ONE)			
3105			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
GRAND TOTAL						

CARRIER INFORMATION					LTL ONLY	
HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	NMFC #	CLASS
QTY	TYPE	QTY	TYPE	<small>Commodity 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 216 of NMFC Item 340</small>		
		40000 Lbs		LDPE CLEAR FILM IN BALES		
GRAND TOTAL						

RECEIVING  
 STAMP SPACE

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 \_\_\_\_\_

COD Amount: \$ \_\_\_\_\_

Fee Terms: Collect: ☐ Prepaid: ☐  
 Customer check acceptable: ☐

**NOTE:** Liability Limitation for loss or damage in 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, 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.

Shipper Signature

**SHIPPER SIGNATURE / DATE**

This is to certify that the above named measures are properly classified, packaged, marked and stowed, and are in proper condition for transportation according to the applicable regulations of the DOT.

**Trailer Loaded:**


☐ By Shipper  
☐ By Driver

**Freight Counted:**


☐ 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 had the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

 Eric Newton  
 6-24-25

<b>Date:</b>			<b>BILL OF LADING</b>			<b>Page 1 of _____</b>	
<b>SHIP FROM</b>							
Name: RR3 Resources LLC			Bill of Lading Number: PO# E3105  BAR CODE SPACE				
Address: 045 La Fontana Blvd Suite 232							
City/State/Zip: Boca Raton FL							
SID#:    FOB: <input type="checkbox"/>							
<b>SHIP TO</b>			CARRIER NAME: Trailer number: 2022 Seal number(s):  SCAC: Pro number:  BAR CODE SPACE				
Name: Moran Logistics                              Location #: _____							
Address: 600 Ash St							
City/State/Zip: Watson town, PA 17777							
CID#:    FOB: <input type="checkbox"/>			Freight Charge Terms: ( <i>freight charges are prepaid unless marked otherwise</i> ) Prepaid _____ Collect _____ 3rd Party _____  <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)				
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>							
Name:			SPECIAL INSTRUCTIONS:				
Address:							
City/State/Zip:							
<b>CUSTOMER ORDER INFORMATION</b>							
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SKID (CIRCLE ONE) Y N		ADDITIONAL SHIPPER INFO	
3105				Y	N		
				Y	N		
				Y	N		
				Y	N		
				Y	N		
				Y	N		
				Y	N		
GRAND TOTAL				Y	N		
<b>CARRIER INFORMATION</b>							
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M.	NMFC # CLASS	
				40000 Lbs	(X)	RECEIVING STAMP SPACE	
GRAND TOTAL							
<div style="float: right; width: 200px;">RECEIVING STAMP SPACE</div>							
<p>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:</p> <p>The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \$_____</p> <p><b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).</b></p> <p>RESERVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rules, 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.</p>							
<b>SHIPPER SIGNATURE / DATE</b> <small>This is to certify that the above named materials are properly classified, packaged, marked and loaded, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>				<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	
				<b>COD Amount: \$ _____</b> Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		<b>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available under carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.</small>	

 Eric Newton  
6-24-25