



# Invoice

**Morton Motor Express**

P.O. BOX 349, Clemmons, NC 27012

Phone: 336-235-3960

| Equipment    | Ship Date | Bill-to Code | Bill Date | Due Date  | Invoice Number |
|--------------|-----------|--------------|-----------|-----------|----------------|
| 53153, 53164 | 9/3/2024  | VER68210108  | 9/3/2024  | 10/3/2024 | 00525140       |

**Bill to:** VERATEX INC  
P.O. BOX 682  
New York, NY 10108

| Ref Type | Ref Number |
|----------|------------|
| BOL      | 056402     |

**Shipper:** SOUTH FORK IND  
100 WEST PINE  
Maiden, NC 28650

**Consignee** CHERRYVILLE PUBLIC WAREHOUSE  
600 W ACADEMY ST  
Cherryville, NC 28021

| Pallets | Pieces | Description          | Quantity | Rate    | Charges      |
|---------|--------|----------------------|----------|---------|--------------|
| 2       |        | CIRCULAR KNIT FABRIC | 900.00   | 58.2900 | \$524.61     |
|         |        | Deficit Weight       | 100.00   | 58.2900 | \$58.29      |
|         |        | Discount             | 582.90   | -0.8000 | (\$466.32)   |
|         |        | Fuel Surcharge       | 116.58   | 0.2710  | \$31.59      |
| 2       |        |                      | 900.00   |         | \$148.17 PPD |

Please Remit Payment to:  
Morton Motor Express  
P.O. BOX 349  
Clemmons, NC 27012

\*\* Invoices not paid by due date are subject to late fees  
and administrative costs for collections.\*\*



INV00525140

This is to certify that the herein 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.

This Shipping Order

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent

056402

Shipper No. \_\_\_\_\_

Carrier No. \_\_\_\_\_

Date 1/1/74

|                                                                                                                                        |  |                             |  |
|----------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------|--|
| TO: Consignee                                                                                                                          |  | FROM: Shipper               |  |
| On Collect on Delivery shipments, the letters "COD" must appear before consignee's name - or as otherwise provided in item 430, Sec. 1 |  | SOUTH FORK INDUSTRIES       |  |
| Street                                                                                                                                 |  | Street                      |  |
| 100 WEST PINE STREET                                                                                                                   |  | 100 WEST PINE STREET        |  |
| Destination                                                                                                                            |  | Origin                      |  |
| MAIDEN, NC                                                                                                                             |  | MAIDEN, NC                  |  |
| Vehicle Number                                                                                                                         |  | U.S. DOT Hazmat Reg. Number |  |
| Zip Code 28650                                                                                                                         |  | Zip Code 28650              |  |

| No. Shipping Units | HM | Kind of Packaging, Description of Articles, Special Marks and Exceptions | Weight (Subject to Correction) | RATE | CHARGES |
|--------------------|----|--------------------------------------------------------------------------|--------------------------------|------|---------|
|                    |    | PACKAGES/SKIDS CIRCULAR KNT FABRIC                                       | 9.00                           |      |         |
|                    |    | PACKING LIST ATTACHED                                                    |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |
|                    |    |                                                                          |                                |      |         |

2 00525140

☐ PIECES  
☒ SKIDS  
☐ CHUMPS  
☐ ROLLS  
☐ BUNDLES  
☐ REELS  
☐ MIXED

☐ ON SKIDS  
☐ ON FLOOR  
☐ LONG  
☐ SHORT  
☐ 4'X4'  
☐ 4'X6'

☐ # OF PIECES  
☐ FLAT TOP  
☐ PYRAMID TOP  
☐ STRETCH WRAPPED  
☐ BANDED

SHIPMENT EXCEEDS 12 FEET OF TRAILER  
WORK ON NOTCH EXPRESS OR LABEL

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                            |                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| REMIT C.O.D. TO: ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | COD Amt: \$                                                                                                                                                                                                                                | C.O.D. FEE: PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/>        |
| Note - When the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | This is to certify that the above 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. | TOTAL CHARGES: \$                                                                    |
| RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this bill of lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns. |                                                                                                                                                                                                                                            | FREIGHT CHARGES<br>PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> |

|                                        |         |
|----------------------------------------|---------|
| SHIPPER P.O. BOX 742, MAIDEN, NC 28650 | CARRIER |
| PER                                    | PER     |
| EMERGENCY RESPONSE TELEPHONE NUMBER:   | DATE    |

Marked at all times the Hazardous Material is in transportation including storage, incident to transportation, (172.604) (172.605) (172.606) (172.607) (172.608) (172.609) (172.610) (172.611) (172.612) (172.613) (172.614) (172.615) (172.616) (172.617) (172.618) (172.619) (172.620) (172.621) (172.622) (172.623) (172.624) (172.625) (172.626) (172.627) (172.628) (172.629) (172.630) (172.631) (172.632) (172.633) (172.634) (172.635) (172.636) (172.637) (172.638) (172.639) (172.640) (172.641) (172.642) (172.643) (172.644) (172.645) (172.646) (172.647) (172.648) (172.649) (172.650) (172.651) (172.652) (172.653) (172.654) (172.655) (172.656) (172.657) (172.658) (172.659) (172.660) (172.661) (172.662) (172.663) (172.664) (172.665) (172.666) (172.667) (172.668) (172.669) (172.670) (172.671) (172.672) (172.673) (172.674) (172.675) (172.676) (172.677) (172.678) (172.679) (172.680) (172.681) (172.682) (172.683) (172.684) (172.685) (172.686) (172.687) (172.688) (172.689) (172.690) (172.691) (172.692) 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# Delivery Receipt

## Morton Motor Express

P.O. BOX 349, Clemmons, NC 27012

Phone: 336-235-3960 Fax:

Web: mortonexpress.com

|                           |                              |                                    |                  |                               |
|---------------------------|------------------------------|------------------------------------|------------------|-------------------------------|
| <b>Equipment</b><br>53153 | <b>Ship Date</b><br>9/3/2024 | <b>Bill-to Code</b><br>VER68210108 | <b>Bill Date</b> | <b>Pro Number</b><br>00525140 |
|---------------------------|------------------------------|------------------------------------|------------------|-------------------------------|

**Consignee:** CHERRYVILLE PUBLIC WAREHOUSE

600 W ACADEMY ST

Cherryville, NC 28021

704-435-5465

9/4/2024 -

**Ref Type**

**Ref Number**

**Shipper:** SOUTH FORK IND

100 WEST PINE

Maiden, NC 28650

9/3/2024 -

**Bill to:**

VERATEX INC

P.O. BOX 682

New York, NY 10108

| HM | Pallets | Pieces | Description          | Quantity | Rate   | Charges | Shipment |
|----|---------|--------|----------------------|----------|--------|---------|----------|
|    | 2       |        | CIRCULAR KNIT FABRIC | 900.00   |        |         |          |
|    | 2       | 0      |                      | 900.00   | Total: |         | PPD      |

**Order Task**      **Instruction**

Deliver Load

Received in good order unless otherwise noted by:

Name: Scott Signor      Date: \_\_\_\_\_

Signature: \_\_\_\_\_      PCS: \_\_\_\_\_



DR00525140