



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
53150	10/9/2025	VER68210108	10/13/2025	11/12/2025	6327236

Ref Type Ref Number

Bill to: VERATEX INC
336 E 56th ST FRNT A
New York City, NY 10022

Shipper: AMERICAN BREASTCARE
2140 NEWMARKET PKWY SE
Marietta , GA 30067

Consignee SOUTH FORK IND
100 WEST PINE
Maiden, NC 28650

Pallets	Pieces	Description	Quantity	Rate	Charges
1		FABRIC	185.00		
		Minimum Charge			\$93.76
		Fuel Surcharge	93.76	0.2800	\$26.25
				185.00	\$120.01 PPD

A/B	Carrier	Amount	Pro #	Transaction	Receivable:	Our Revenue:
Advance:	JACKSON	\$72.96		10/15/2025	\$120.01	\$47.05

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.**



INV6327236

6327236



Bill of Lading

TO
Consignee A/C Veratex, Inc., South Fork Industries
Street 100 West Pine Street
Destination
City/State/Zip Malden, NC 28650
Route:

FROM
Shipper American Breastcare
Street 2140 Newmarket Pkwy
Origin Suite 122
City/State/Zip Marietta, GA 30067
Special Instructions:

FOR PAYMENT, SEND BILL TO

Name **Claude Simon**
Company **Veratek, Inc.**
Street **338 East 56th Street Flm A**
City/State/Zip **New York, NY 10022**

SHIPPER'S INSTRUCTIONS

NO. SHIPPING UNITS TIME DESCRIPTION OF ARTICLES
SPECIAL MARKS & EXCEPTIONS WEIGHT RATE CHARGE



6327236

REMIT C.O.D.	C.O.D. AMOUNT: \$	C.O.D. FEE PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> PREPAID
TO: ADDRESS:	If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	TOTAL CHARGES \$
(Signature of Consignor)		Freight Charges are collect unless agent named

NOTE: Where 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

Freight Charges are collect unless
market prepaid

RECEIVED subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading, and good order, except as noted (contents and condition of packages unknown), marked consigned and destined as indicated above which said carrier agrees to carry to its usual place of delivery as 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 of said property, over all or any portion of said route to destination and as to each party at any time interested in all or any 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 on the date of shipment. Shipper hereby certifies that he is familiar with all the Bill of Lading terms and conditions in

Shipper American Breastcare	Carrier Morton Express
Per	Date:

Mark with "X" or "RQ" if appropriate to designate Hazardous Material s Substances as defined in the Department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional method for identifying hazardous materials on Bills of Lading 172.201(a)(1)(iii) of Title 49, Code of Federal Regulations. Also when shipping hazardous materials, the shipper's certification statement prescribed in section 172.204(a) of the Federal Regulations, as indicated on the Bill of Lading does apply, unless a specific exception from the requirement is provided in the Regulation for a particular material.

MORTON
MOTOR EXPRESS **Delivery Receipt**

Morton Motor Express
P.O. BOX 349, Clemmons , NC 27012
Phone: 336-235-3960 Fax:
Web: mortonexpress.com

Equipment	Ship Date	Bill-to Code	Bill Date	Pro Number
SOUTH FORK IND	10/8/2025	SOU10028650		6327236
Consignee:		Ref Type	Ref Number	
100 WEST PINE Maiden , NC 28650				
10/10/2025				
Shipper: AMERICAN BREASTCARE 2140 NEWMARKET PKWY SE Marietta , GA 30067		Bill to: SOUTH FORK IND P.O. BOX 742 Maiden , NC 28650		
10/8/2025				
HM	Pallets	Pieces	Description	
	1		FABRIC	
	1	0		
			Quantity	Rate
			185.00	
				185.00
			Total:	COL

A/B	Carrier	Amount	Pro #	Trans Date
Advance	JACKSON	\$0.00		10/10/2025

Order Task **Instruction**

Deliver Load

Received in good order unless otherwise noted by:

Name: John L. Lewis Date: 10/10/2025
Signature: John L. Lewis PCS: 2



DR6327236