



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
53129, 540861	5/1/2024	VER68210108	5/2/2024	6/1/2024	00522953

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

Ref Type	Ref Number
PO	116
Seal Number	38
BOL	4824-500

Shipper: CHERRYVILLE PUBLIC WAREHOUSE
600 W ACADEMY ST
Cherryville, NC 28021

Consignee INTERNATIONAL FOAM
10530 WESTLAKE DR
Charlotte, NC 28273

Pallets	Pieces	Description	Quantity	Rate	Charges
2		ROLLS OF CLOTH	524.00		
		Minimum Charge			\$89.17
		Fuel Surcharge	89.17	0.3030	\$27.02
2			524.00		\$116.19 PPD

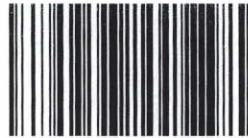
Please Remit Payment to:

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.**



INV00522953

VICS Standard BOL: WWW.VICS.ORG For Complete VICS BOL Guideline Information

00522953

Date: 04/08/2024		BILL OF LADING		Page <u>1</u>	
SHIP FROM Name: Cherryville Public Warehouse, Inc. Address: 600 WEST ACADEMY STREET City/State/Zip: CHERRYVILLE NC SID#: A/C VERATEX, INC FOB: <input type="checkbox"/>			Bill of Lading Number: 4824-500 <div style="text-align: center;">BAR CODE SPACE</div>		
SHIP TO Name: International Foam Inc Location #: _____ Address: 10530 WESTLAKE DRIVE City/State/Zip: CHARLOTTE, NC 28273 CID#: _____ FOB: <input type="checkbox"/>			CARRIER NAME: <u>Morton</u> Trailer number: _____ Seal number(s): _____ SCAC: _____ Pro number: _____		
THIRD PARTY FREIGHT CHARGES BILL TO: Name: International Foam Inc. Address: P.O. BOX 3871 City/State/Zip: TOMS RIVER, NJ 08756			<div style="text-align: center;">BAR CODE SPACE</div>		
SPECIAL INSTRUCTIONS:			Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3 rd Party <input checked="" type="checkbox"/>		
<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)					
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
ORDER#20294	11	3194	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	YARDS	
PO#116			<input type="checkbox"/> Y <input type="checkbox"/> N	20/2 COMBED COTTON	
			<input checked="" type="checkbox"/> Y <input type="checkbox"/> N		
			<input type="checkbox"/> Y <input type="checkbox"/> N		
GRAND TOTAL	11	3194			
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)
QTY	TYPE	QTY	TYPE		
2	Pallets	11	ROLLS	524	
COMMODITY DESCRIPTION					
ROLLS OF CLOTH					
LTL ONLY					
NMFC # CLASS					
RECEIVING					
STAMP SPACE					
GRAND TOTAL					
524					
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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
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 / DATE: <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.</small>			Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces
CARRIER SIGNATURE / PICKUP DATE <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</small> Property described above is received in good order, except as noted.					

Morton Motor
GSO
Jon A
53146

00522953



<input type="checkbox"/> PIECES	<input type="checkbox"/> ON SKIDS	# OF PIECES
<input type="checkbox"/> SKIDS	<input type="checkbox"/> ON FLOOR	<input type="checkbox"/> FLAT TOP
<input type="checkbox"/> DRUMS	<input type="checkbox"/> LONG	<input type="checkbox"/> PYRAMID TOP
<input type="checkbox"/> ROLLS	<input type="checkbox"/> SHORT	<input type="checkbox"/> STRETCH WRAPPED
<input type="checkbox"/> BUNDLES	<input type="checkbox"/> 4'X4'	<input type="checkbox"/> BANDED
<input type="checkbox"/> REELS		
<input type="checkbox"/> MIXED		

SHIPMENT EXCEEDS 12 FEET OF TRAILER
 MORTON MOTOR EXPRESS B/L LABEL



Delivery Receipt

Morton Motor Express

P.O. BOX 349, Clemmons, NC 27012

Phone: 336-235-3960

Fax:

Web: mortonexpress.com

Equipment
540861

Ship Date
5/1/2024

Bill-to Code
VER68210108

Bill Date

Pro Number
00522953

Consignee: INTERNATIONAL FOAM
10530 WESTLAKE DR
Charlotte, NC 28273

Ref Type
Seal Number

Ref Number
38

Shipper: CHERRYVILLE PUBLIC WAREHOUSE
600 W ACADEMY ST
Cherryville, NC 28021

Bill to:

VERATEX INC
P.O. BOX 682
New York, NY 10108

5/1/2024 03:30 PM

HM	Pallets	Pieces	Description
2			ROLLS OF CLOTH
2	0		

Quantity	Rate	Charges	Shipment
524.00			
524.00	Total:		PPD

Order Task	Instruction
Deliver Load	

Received in good order unless otherwise noted by:

Name: Dantes J Date: _____

Signature: _____ PCS: _____



DR00522953