



# Invoice

Morton Motor Express

P.O. BOX 349, Clemmons, NC 27012

Phone: 336-235-3960

SCANNED

Equipment	Ship Date	Bill-to Code	Bill Date	Due Date	Invoice Number
53117, 53152	7/30/2024	VER68210108	7/30/2024	8/29/2024	00478295

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

Ref Type Ref Number

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

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

Pallets	Pieces	Description	Quantity	Rate	Charges
1		FABRIC	378.00		
		Minimum Charge			\$89.17
		Fuel Surcharge	89.17	0.2850	\$25.41
1			378.00		\$114.58 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.\*\*



INV00478295

SCANNED

Date: 07/30/2024

## BILL OF LADING

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SHIP FROM				SHIP TO			
Name: Cherryville Public Warehouse, Inc. Address: 600 WEST ACADEMY STREET City/State/Zip: CHERRYVILLE NC SID#: A/C VERATEX				FOB: <input type="checkbox"/> Name: South Fork Industries, Inc Location #: _____ Address: 1010 WEST PINE STREET City/State/Zip: MAIDEN, NC 28650 CID#: <input type="checkbox"/> FOB: <input type="checkbox"/> THIRD PARTY FREIGHT CHARGES BILL TO: Name: VERATEX, INC Address: PO BOX 682 City/State/Zip: NEW YORK NY			
SPECIAL INSTRUCTIONS:							
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SKID (CIRCLE ONE)		ADDITIONAL SHIPPER INFO	
		8	1080	X	N	YARDS	
				Y	N		
				Y	N		
				X	N		
				Y	N		
GRAND TOTAL		8	1080				
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE			ROLLS OF CLOTH	
1	Pallet	8	Rolls	378		LTL ONLY	
						NMFC #	CLASS
RECEIVING STAMP SPACE							
1		8	378	GRAND TOTAL			
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 _____ per _____.						COD Amount: \$ _____ Fee Terms: <input checked="" type="checkbox"/> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
<b>NOTE</b> Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).						The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Signature _____ Shipper	
SHIPPER SIGNATURE / DATE				Trailer Loaded: <input type="checkbox"/> Freight Counted: <input type="checkbox"/>		CARRIER SIGNATURE / PICKUP DATE	
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.				<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain	
				<input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/Pieces		<input type="checkbox"/> ON SKIDS <input type="checkbox"/> ON FLOOR <input type="checkbox"/> # OF PIECES _____ <input type="checkbox"/> DRUMS <input type="checkbox"/> LONG <input type="checkbox"/> FLAT TOP <input type="checkbox"/> ROLLS <input type="checkbox"/> SHORT <input type="checkbox"/> PYRAMID TOP <input type="checkbox"/> BUNDLES <input type="checkbox"/> 4'X4' <input type="checkbox"/> STRETCH WRAPPED <input type="checkbox"/> REELS <input type="checkbox"/> MIXED <input type="checkbox"/> BANDED	
				Signature _____ 7/30/29 Property described above is received in good order, except as noted.			

00478295

<input type="checkbox"/> PIECES	<input type="checkbox"/> ON SKIDS	<input type="checkbox"/> # OF PIECES _____
<input type="checkbox"/> DRUMS	<input type="checkbox"/> ON FLOOR	<input type="checkbox"/> FLAT TOP
<input type="checkbox"/> ROLLS	<input type="checkbox"/> LONG	<input type="checkbox"/> PYRAMID TOP
<input type="checkbox"/> BUNDLES	<input type="checkbox"/> SHORT	<input type="checkbox"/> STRETCH WRAPPED
<input type="checkbox"/> REELS	<input type="checkbox"/> 4'X4'	<input type="checkbox"/> BANDED
<input type="checkbox"/> MIXED	SHIPMENT EXCEEDS 12 FEET OF TRAILER <input type="checkbox"/>	
MORTON MOTOR EXPRESS B/L LABEL		

SCANNED

**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
53152	7/30/2024	VER68210108		00478295
<b>Consignee:</b> SOUTH FORK IND			<b>Ref Type</b>	<b>Ref Number</b>
100 WEST PINE				
Maiden, NC 28650				
7/31/2024	-			
<b>Shipper:</b> CHERRYVILLE PUBLIC WAREHOUSE		<b>Bill to:</b>	VERATEX INC	
600 W ACADEMY ST			P.O. BOX 682	
Cherryville, NC 28021			New York, NY 10108	
7/30/2024	-	03:30 PM		
HM	Pallets	Pieces	Description	
	1	0	FABRIC	
			Quantity	Rate
			378.00	
			Total:	PPD

**Order Task**      **Instruction**

Deliver Load

Received in good order unless otherwise noted by:

Name: Mike Epler Date: 7/31/24

Signature: Mike Epler PCS: \_\_\_\_\_



DR00478295