



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
53130, 53159	10/14/2024	VER68210108	10/14/2024	11/13/2024	00512221

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

Ref Type	Ref Number
BOL	101424-501

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

Consignee SOUTH FORK IND
100 WEST PINE
Maiden, NC 28650

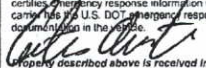
Pallets	Pieces	Description	Quantity	Rate	Charges
1		CLOTH	207.00		
		Minimum Charge			\$89.17
		Fuel Surcharge	89.17	0.2720	\$24.25
1			207.00		\$113.42 PPD

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.**



INV00512221

Date: 10/14/2024		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 FOB: <input type="checkbox"/>				Bill of Lading Number: <u>101424-501</u> PAR CODE SPACE		
SHIP TO Name: South Fork Industries, Inc Location #: _____ Address: 1010 WEST PINE STREET City/State/Zip: MAIDEN, NC 28650 CID#: _____ FOB: <input type="checkbox"/>				CARRIER NAME: <u>MORTON</u> Trailer number: _____ Seal number(s): _____ SCAC: _____ Pro number: _____ PAR CODE SPACE		
THIRD PARTY FREIGHT CHARGES BILL TO: Name: VERATEX, INC Address: PO BOX 682 City/State/Zip: NEW YORK NY				Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect _____ 3 rd Party <u>X</u> <input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading		
CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO	
		1	826	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	YARDS	
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
				<input checked="" type="checkbox"/> Y <input type="checkbox"/> N		
				<input type="checkbox"/> Y <input type="checkbox"/> N		
GRAND TOTAL		1	826			
CARRIER INFORMATION						
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	NMFC # CLASS
1	Pallet	1	Rolls	207		ROLL OF CLOTH
1		1		207		
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: 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. Signature _____ Shipper		
SHIPPER SIGNATURE / 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.		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 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or complied with U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.  10/14/24 Property described above is received in good order, except as noted.		

6

00512221

<input type="checkbox"/> PIECES	<input type="checkbox"/> ON SKIDS	# 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
MORTON MOTOR EXPRESS BOL LABEL



Delivery Receipt

Morton Motor Express

P.O. BOX 349, Clemmons, NC 27012

Phone: 336-235-3960 Fax:

Web: mortonexpress.com

Equipment 53159	Ship Date 10/14/2024	Bill-to Code VER68210108	Bill Date	Pro Number 00512221
---------------------------	--------------------------------	------------------------------------	------------------	-------------------------------

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

Ref Type **Ref Number**

10/15/2024 -

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

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

10/14/2024 - 03:30 PM

HM	Pallets	Pieces	Description	Quantity	Rate	Charges	Shipment
	1		CLOTH	207.00			
	1	0		207.00	Total:		PPD

Order Task **Instruction**

Deliver Load

Received in good order unless otherwise noted by:

Name:

Joel Ventura Date: *10-15-24*

Signature:

[Signature] PCS: _____



DR00512221