



REMIT PAYMENT TO:
PO BOX 634558
CINCINNATI, OH 45263-4558

Invoice	28246975
Date	05/30/2024
Page	1 of 1

TOTAL QUALITY LOGISTICS (Please reference #28246975 when making payment.)

PICKUPS

NUTRIENT CONTROL SYSTEMS (CHAMBERSBURG, PA) (05/22/2024)

DROPS

MARTIN CONSTRUCTION RESOURCE (MAPLEVIEW FARM) (MADRID, NY) (05/23/2024)

Bill To:

NUTRIENT CONTROL SYSTEMS, INC.
 130 INDUSTRIAL DR
 CHAMBERSBURG, PA 17201

Salesperson ID	Customer ID	Trailer Type	Trailer Size	Payment Terms
Jack Gutierrez	11401876	Flat	53 ft	DUE UPON RCPT
Rate Type	Hazmat Load	# of Pallets	# of Cases	Weight
FTL	No	0	0	30000

Quantity	Customer PO No.	Description	Rate	UOM	Amount
1	TQL PA-NY	FREIGHT	2,300.00000	Flat	\$2,300.00

Pay and manage your invoices online with our free customer web portal, TQL TRAX. Visit or Click TQL.com/TRAX to learn more.

Would you prefer to be paperless? Please email Accounting at ACustomerQuestions@tql.com and we can begin invoicing you via email or fax

WE SUPPORT THE CREDIT INDUSTRY BY REPORTING ACCOUNTS RECEIVABLE INFORMATION DUN & BRADSTREET, ANSONIA CREDIT DATA, THE BLUE BOOK, RED BOOK, COMPUNET, & EXPERIAN

Total USD	\$2,300.00
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Amounts not paid within 30 days of the date of the invoice are subject to a 1.5% monthly finance charge.

THANK YOU VERY MUCH FOR YOUR BUSINESS
ANY QUESTIONS OR CHANGE IN ADDRESS. PLEASE CALL US AT (513) 831-2600
OR VISIT US AT WWW.TQL.COM



20240526



Bill of Lading – Short Form – Not Negotiable					TQL PO Number: 28246975		
Ship From					Shipper Details		
Pick 1: Nutrient Control Systems 130 Industrial Drive Chambersburg, PA 17201					Pickup Date: 5/22/2024 Pickup Time: 2:50 PM Contact Name: Pickup #: Carrier:		
Ship To					References		
Drop 1: 204 Sweet Rd Madrid, NY 13660					Delivery Date: 5/23/2024 Delivery Time:		
3rd Party Bill To:					Delivery PO #:		
Total Quality Logistics PO Box 634558 Cincinnati, OH 45263-4558							
Special Instructions:					Freight Terms:		
Contact TQL for accessorial approval or issues at 513-831-2600 x43532					Third Party: <input checked="" type="checkbox"/>		
Accessorials:					Collect: <input type="checkbox"/>		
					Prepaid: <input type="checkbox"/>		
Qty	Type	Weight (lbs.)	Dims	NMFC	Item Description	LTL Class	
GRAND TOTALS:							
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"/> Check Acceptable <input type="checkbox"/>		
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).							
For Freight Collect Shipments:					Trailer Loaded:		Freight Counted:
If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign following statement: <i>The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.</i> Signature of Consignor: _____					<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver
Shipper Signature/Date				Carrier Signature/Pickup Date:			
This is to certify that above-named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.				Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.			
Shipper: <u><i>[Signature]</i></u> Date: <u>05/22/24</u>				Carrier: <u><i>[Signature]</i></u> Date: <u>5/22/24</u>			
Receiver Signature/Date							
This is to certify that above-named materials were delivered in the expected condition.							
Receiver: <u><i>[Signature]</i></u> Date: <u>5-23-24</u>							

Certified Copy