



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

Invoice	<b>32146660</b>
Date	05/08/2025
Page	1 of 1

TOTAL QUALITY LOGISTICS (Please reference #32146660 when making payment.)

**PICKUPS**

NUTRIENT CONTROL SYSTEMS (CHAMBERSBURG, PA) (05/01/2025)

**DROPS**

LF BIO (NORTH LAWRENCE, NY) (05/02/2025)

**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	Straight Box Truck	26 ft	DUE UPON RCPT
Rate Type	Hazmat Load	# of Pallets	# of Cases	Weight
FTL	No	0	0	5000

Quantity	Customer PO No.	Description	Rate	UOM	Amount
1	TQL PA-NY	FREIGHT	1,350.00000	Flat	\$1,350.00

*Pay and manage your invoices online with our free customer web portal, TQL TRAX. Visit or Click [TQL.com/TRAX](http://TQL.com/TRAX) to learn more.*

**Would you prefer to be paperless? Please email Accounting at [ACustomerQuestions@tql.com](mailto: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

<b>Total USD</b>	<b>\$1,350.00</b>
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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**



20250506



Bill of Lading - Short Form - Not Negotiable

TQL PO Number:

**Ship From**

**Shipper Details**

**Pick 1:**  
Nutrient Control Systems  
130 Industrial Drive  
Chambersburg, PA 17201

Pickup Date: 5/1/2025  
Pickup Time: 2:30P-3P  
Contact Name:  
Pickup #:  
Carrier:

**Ship To**

**References**

**Drop 1:**  
LF Bio  
1080 County Route 55  
North Lawrence NY 12967

Delivery Date: 5/2/2025  
  
Delivery Time: 8a-10a  
  
Delivery PO #:

**3<sup>rd</sup> Party Bill To:**

Total Quality Logistics  
PO Box 634558  
Cincinnati, OH 45263-4558

**Special Instructions:**

Contact TQL for accessorail approval or issues at 513-831-2600 x39788

**Freight Terms:**

Third Party: X  
Collect: \_\_\_\_\_  
Prepaid: \_\_\_\_\_

**Accessorials:**

Qty	Type	Weight (lbs.)	Dims	NMFC	Item Description	LTL Class
1		1260			Pump	
2		500x2			miscel (x2)	
1		250			Pump	
<b>GRAND TOTALS:</b>						

**COD Amount:**

Fee Terms: Collect  Prepaid  Check Acceptable

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 \_\_\_\_\_."

**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:**

If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

Signature of Consignor: \_\_\_\_\_

**Trailer Loaded:**

By Shipper  
 By Driver

**Freight Counted:**

By Shipper  
 By Driver

**Shipper Signature/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.

Shipper: Brock M Date: 05/01

**Carrier Signature/Pickup Date:**

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.

Carrier: John White Date: \_\_\_\_\_

**Receiver Signature/Date**

This is to certify that above-named materials were delivered in the expected condition.

Receiver: [Signature] Date: 5-2