



WESTERN  
LOGISTICS  
EXPRESS

# CARRIER RATE CONFIRMATION REF LOAD# 2094-0030-0424

WLE WESTERN LOGISTICS EXPRESS  
1401 IRON STREET  
N. KANSAS CITY, MO 64116

DOT# 2233370 MC507771

PAGE 1 OF 2  
4/24/24 9:58:15

PHONE: 816-666-2871

DISPATCHED BY: COREY PEBWORTH  
corey.pebworth@wlxtrans.com

Contractor: EYE1 GLOBAL SERVICES LLC  
1301 E DEBBIE LN  
STE 102  
DOT# 2423292

| Miles | Weight | Qty | HazMat |
|-------|--------|-----|--------|
| 33.20 | 30000  | 7   | NO     |

Equipment : Van  
Commodity: SUPPLEMENTS

Must Tarp: NOT REQUIRED..  
Contact: ROLLIN  
Phone: 2143345376 FAX#  
Email: eye1dispatch@gmail.com

01 PICKUP EUROPA/ HUBAMATRIX PICKUP# TO-5312  
1851 BIG TOWN BLVD  
SUITE 500  
MESQUITE, TX 75149

LOAD DATE 4/24/24  
TIME 0900 12:00

LOAD INFO..  
MUST USE MACROPOINT OR \$250 WILL BE DEDUCTED. FCFS TO-5312

02 DELIVER PROSUPPS CUST REF#  
5501 HEADQUARTERS DR  
SUITE 150W  
PLANO, TX 75024

DELIVERY DATE 4/24/24  
TIME 08:00 1500

LOAD INFO..  
FCFS ON DEL CLOSE 1500

CARRIER PAY---- 250.00

All invoices must include a signed delivery receipt

\*\* SIGNED POD MUST BE SUBMITTED TO WLEDOCS@WLXTRANS.COM WITHIN 24 HOURS OF DELIVERY \*\*

I understand that the freight we are accepting and about to move requires wet coverage on our Cargo Insurance policy. This freight must be protected from getting wet or condensation during transit, and we understand that we are responsible for any claims should the freight be unacceptable to our customer. In the case that our Cargo Insurance Policy does not accept the liability on any claim, we will be responsible for damages directly. \*\*

\*\*\* Driver must hook up to Macropoint if driver refuses or turns off his GPS service on his phone in transit then a \$250 rate reduction will be taken from the carrier's rate. \*\*\*

Tariffs, service guides or similar publications maintained by carrier are not applicable to transportation provided pursuant to this agreement. Charges due to any variance in weight, size, or classification will not be paid. The rate agreed upon in this rate confirmation super-cedes all other agreements and shall be all inclusive.

CARRIER will not subcontract, assign, or transfer the transportation to any other motor carrier(s).

CONTINUED ON PAGE--> 2



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Email: eye1dispatch@gmail.com

CARRIER:  
SIGNED BY  
AUTHORIZED OFFICER

X 

DATE 4/24/24

CO NAME: WESTERN LOGISTICS EXP  
SIGNED BY  
AUTHORIZED OFFICER

PHILLIP CARR

4/23/24

YOUR INVOICE MUST REFERENCE THIS LOAD#--> 2094-0030-0424

# Bill of Lading Non-Negotiable

Dispatch Ph: (816) 746-28

RECEIVED, subject to the "COMMON CARRIER RATE AGREEMENT" or the CONTRACT between the Shipper and Carrier in effect on the date of shipment, the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown below. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state regulatory agency, except as specifically agreed to in writing by the shipper and the carrier.

| <b>ORIGIN: EUROPA/ HUBAMATRIX</b><br><b>1851 BIG TOWN BLVD</b><br><b>SUITE 500</b><br><b>MESQUITE, TX 75149</b>  |              | <b>DEST: PROSUPPS</b><br><b>5501 HEADQUARTERS DR</b><br><b>SUITE 150W</b><br><b>PLANO, TX 75024</b>   |   |
|--|--------------|---|---|
| <b>SEND WESTERN LOGISTICS EXP</b><br><b>INVOICE 1401 IRON STREET</b><br><b>TO N. KANSAS CITY, MO 64116</b>   |              | Ship Date: 4/24/24<br>Load #: 2094-0030-0424<br>REF #: TO-5312<br><br>Load must be Tarped <u>N</u> HAZ MAT <u>N</u>   |   |
| <b>PICK 4/24 BY 11AM DELIVER STRAIGHT THROUGH TO PLANO</b>   |              |   |   |
| Pieces   | Description  | Weight  | Freight Charges<br>Third Party  |
| <del>20000</del><br>6 pes<br>BH  | SUPPLEMENTS  | <del>30000</del><br>5988<br>BH  | Subject to Section 7 of the agreement between Shipper and Carrier, if the shipment is to be delivered to the consignee without recourse on the consignor, the originator shall sign the following statement:<br>The carrier shall not make delivery of this shipment without payment of freight and all lawful charges. |
|  |              |   | Freight Charges<br>Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> COD <input type="checkbox"/>   |
|  |              | 5988 BH<br><del>30000</del>   | <b>C.O.D. AMOUNT</b><br>_____   |
|  | <b>TOTAL</b> |   |   |
| Carrier's liability is for actual loss unless otherwise agreed in Appendix B to Common Carrier Rate Agreement, contract, or stated below. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ per pound.<br>_____ Shipper<br>per _____<br>per _____<br>(Shipper or Shipper's Agent Signature) |              | Accepted in good order and condition, unless otherwise stated herein.<br>PIECES _____<br>Exceptions:<br>Driver Load: Yes _____ No _____ Placard Provided: Yes _____ No _____<br><b>EYE1 GLOBAL SERVICE LLC</b><br>per _____ Date & Time Tendered _____ AM/PM<br>(Driver's Signature)  |   |
| <b>Shipper Certification</b><br>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 Department of Transportation<br>per _____ Date <u>4-24-24</u>  |              | <b>Carrier Certification</b><br>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent document in the vehicle.<br>per _____ Pieces <u>6</u><br>Date <u>4/24/24</u> |   |

Received  
4/24/24

281 604