



Viking Express Freight

INVOICE

"Committed To Excellent Services"

Viking Express Freight c/o Jobe Services Dept. 22

PO Box 4346

Houston, TX 77210-4346

INVOICE# TPW-931

DATE: 03-06-24

BILL TO:

TEXAS PIPE WORKS

P.O. BOX 2937

LONGVIEW, TX 75606

Ship Date	P.O. Number	Shipper	Consignee	Amount
02-29-24	11826 TK#7	TEXAS PIPE WORKS	TEXAS PIPE SUPPLY	\$900.00

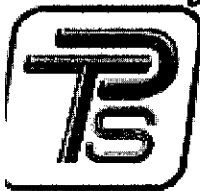
Make all checks payable to VIKING EXPRESSTOTAL FREIGHT CHARGES DUE IN 7 DAYS.

If you have any questions concerning this invoice, call 832-256-6501.

THANK YOU FOR YOUR BUSINESS!

Total Amount Due

\$900.00



Texas Pipe & Supply Co.

2330 HOLMES ROAD HOUSTON, TX 77051-1098 USA
PHONE: (713) 799-9235 FAX: (713) 799-8701

CORPUS CHRISTI, TEXAS
DALLAS, TEXAS
MORGAN CITY, LOUISIANA
WEST CHESTER, OHIO

DENVER, COLORADO
MOBILE, ALABAMA
HAMMOND, INDIANA
BRIDGEVIEW, MISSOURI

MIDDLESEX, NEW JERSEY
AUBURNDALE, FLORIDA
CHARLOTTE, NORTH CAROLINA
DECATUR, GEORGIA

PACKING LIST

VISIT OUR WEBSITE
www.texaspipe.com

SHIPPER
SHIP
TO

TEXAS PIPE & SUPPLY CO
2330 HOLMES ROAD
HOUSTON TX 77051-1098

WILL CALL - PICK UP ADDRESS:
2330 HOLMES ROAD
M-TH 7AM-3:30PM/FRI 7AM-2:30PM
HOUSTON TX 77051-1098 UNITED ST

CI#2232335

PAGE	ORDER DATE	ORDER NO.
1	02/23/24	3376688

WHS.	SALES LOC	SHIP DATE	PICKING SLIP#
01	01	02/29/24	1154589

21544
TEXAS PIPE WORKS INC
PO BOX 2937
LONGVIEW TX 75606 UNITED STATES
AP TEL/FAX: 903 297-7833 903 297-9240

ORDERED BY MATT TERRELL	CUSTOMER P.O. NO. 11826	SHIPPED VIA BDE TRANS 177	SALES REPRESENTATIVE
VOLUME 0.00	WEIGHT 14795 LBS	FREIGHT TERMS SHIPPING POINT	ORIGINATION AMY CASNER

COMMENTS:
Ent: franciscodg

CARBON STEEL WARNING
Particulates may be harmful
to your health. For more
information refer to M.S.D.S.

QUANTITY ORDERED	QUANTITY SHIPPED	ITEM DESCRIPTION	LINE WEIGHT/UOM
360.00 F	17 J	10" S/40S 0.365" PIPE WLD A312	Ln 1
	362.10 F	304/L PE SRL	
		20' min - must be NSF-61	

HEATS: (6 J) AB2T ASCENT TUBULAR PRODUCTS UNITED STATES
(8 J) AH1T ASCENT TUBULAR PRODUCTS UNITED STATES
(3 J) Y38B ASCENT TUBULAR PRODUCTS UNITED STATES

1 ENVELOPE WITH MTR'S
RECEIVED BY BDE TRANS 177

DRIVER SIGNATURE: _____

Package No.	Pkg Type	Weight	Pcs in Pkg
1	LOOSE	14,795	17
TOTALS:		14,796	17

Note - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

\$ _____ per _____

Subject to Section 7 of the conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

COD Amt: \$

FREIGHT CHARGES ☒

Check box if charges are to be collect.

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted [contents and condition of contents of packages unknown], marked, consigned, and destined as indicated above which said carrier, [the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract] agrees to carry to its usual place of delivery of said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of the shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

The above described goods to be forwarded to consignee and destination shown, subject to the classification and tariffs in effect on the date hereof and to the terms and conditions of the Uniform Express Receipt, prescribed by the Interstate Commerce Commission, and in effect on the date of shipment.

TEXAS PIPE & SUPPLY MUST BE NOTIFIED OF DAMAGES OR SHORTAGES WITHIN 24 HRS. OF RECEIPT OF PIPE.

RECEIVED THE ABOVE SHIPMENT IN GOOD ORDER; BY SIGNING THIS BILL OF LADING, CARRIER AGREES TO ACCEPT THE TERMS AND CONDITIONS CONTAINED WITHIN THIS BILL OF LADING

X
CONSIGNEE

DATE

RECEIVED BY (CARRIER)

02/29/2024

DATE



Viking Express Freight

INVOICE

"Committed To Excellent Services"

Remit: Viking Express Freight Services, LLC

c/o J.O.B.E. Service, Inc. Dept.22

PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2722

DATE: 03-06-24

BILL TO: Zurn NMP Processing

c/o Cass Information Systems

P.O. BOX 67

ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
02-13-24	1001033665	MILLER MAYS	SOUTH TEXAS PLUMBING	\$250.00
			15% FSC	\$37.50

Make all checks payable to VIKING EXPRESS

TOTAL FREIGHT CHARGES DUE IN 7 DAYS.

If you have any questions concerning this invoice call 832-256-6501.

Total Amount Due

\$287.50

Driver Copy

Straight Bill of Lading - Short Form - Original - Not Negotiable

BOL NO: 1001033665

Shipper: Miller Mays
Address: 4660 Pine Timbers Building #130
Houston, TX 77041
Country: USA
Contact Name:
Phone No:
Fax No:

Customer Reference
Shipment Date: 02-13-2024 **Carrier:** VIKING
PRO # : **Payment Term:** Absorbed
Sales Order #: 17536621
PO # : 36.2340218
Trip # : 1033663

Consignee SOUTH TEXAS PLUMBING
Address: 5431 BRYSTONE
HOUSTON, TX 77041
Country: USA
Contact Name: Shop
Phone No:
Fax No:

Third Party Billing Information :
Zurn Ind. C/O Cass Information Systems
PO Box 67
Saint Louis, MO 63166

Comments/Special Instructions:
Pickup Remarks:

Delivery Remarks:

Package Type	Package Qty	Pieces	Description	Weight	Class	Length (ft)	Width (ft)	Height (ft)	NMFC
Pallet	3	0	210 - Spec Drain - Metal Drains	3,168 lbs	50.0	0.000	0.000	0.000	50810.2
Total:		3	0	3168					

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: Jack Hyl **Date:** 2/13/24 **Trailer#:** _____

Driver's Signature: _____ **Date:** _____ **Trailer#:** _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.

Signature of Consignor

Cosignee Signature: Virgil T Page
Company Name: South Texas Plmby.

Print Name: Virgil T Page
Date: 2/13/24

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. Å§ 14706(c)(1)(A) and (B)



Viking Express Freight

INVOICE

"Committed To Excellent Services"

Remit: Viking Express Freight Services, LLC

c/o J.O.B.E. Service, Inc. Dept.22

PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2723

DATE: 03-06-24

BILL TO: Zurn NMP Processing

c/o Cass Information Systems

P.O. BOX 67

ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
02-23-24	1001042039	MILLER MAYS	TW MECHANICAL	\$130.00
			15% FSC	\$19.50

Make all checks payable to VIKING EXPRESS

TOTAL FREIGHT CHARGES DUE IN 7 DAYS.

If you have any questions concerning this invoice call 832-256-6501.

Total Amount Due	\$149.50
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Driver
Copy

Straight Bill of Lading - Short Form - Original - Not Negotiable

BOL NO: 1001042039

Shipper: Miller Mays
Address: 4660 Pine Timbers Building #130
Houston, TX 77041
Country: USA
Contact Name:
Phone No:
Fax No:

Customer Reference
Shipment Date: 02-23-2024 **Carrier:** VIKING
PRO # :
Sales Order #: 17621026
PO # : Need PO
Trip # : 1042037
Payment Term: Absorbed

Consignee TW MECHANICAL (77493)
Address: 1005 Airline Dr. Ste A
KATY, TX 77493
Country: USA
Contact Name: Shop
Phone No:
Fax No:

Third Party Billing Information :
Zurn Ind. C/O Cass Information Systems
PO Box 67
Saint Louis, MO 63166

Comments/Special Instructions:
Pickup Remarks:

Delivery Remarks:

Package Type	Package Qty	Pieces	Description	Weight	Class	Length (ft)	Width (ft)	Height (ft)	NMFC
Bundle	2	0	210 - Spec Drain - Metal Drains	143 lbs	50.0	0.000	0.000	0.000	50810.2
Total:	2	0		143					

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: _____

Date: 2/23/24

Trailer#: _____

Driver's Signature: _____

Date: _____

Trailer#: _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.

Consignee Signature: _____

Print Name: _____

Company Name: _____

Date: _____

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. Å§ 14706(c)(1)(A) and (B)



Viking Express Freight

INVOICE

"Committed To Excellent Services"

Remit: Viking Express Freight Services, LLC

c/o J.O.B.E. Service, Inc. Dept.22

PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2724

DATE: 03-06-24

BILL TO: Zurn NMP Processing

c/o Cass Information Systems

P.O. BOX 67

ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-05-24	1001050001	MILLER MAYS	CFI MECHANICAL	\$375.00
			15% FSC	\$56.25

Make all checks payable to VIKING EXPRESS

TOTAL FREIGHT CHARGES DUE IN 7 DAYS.

If you have any questions concerning this invoice call 832-256-6501.

Total Amount Due	\$431.25
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Straight Bill of Lading - Short Form - Original - Not Negotiable

BOL NO: 1001050001

Shipper: Miller Mays
Address: 4660 Pine Timbers Building #130
Houston, TX 77041
Country: USA
Contact Name:
Phone No:
Fax No:

Customer Reference
Shipment Date: 03-05-2024
PRO # :
Sales Order #: 17551451
PO # : 5117436309
Trip # : 1049999

Carrier: *Viking Express*
Payment Term: Absorbed

Consignee CFI Mech C/O Angleton Jr HS
Address: 25455 FM521
Angleton, TX 77515
Country: USA
Contact Name: Joshua
Phone No: 832-906-0508
Fax No:

Third Party Billing Information :
Zurn Ind. C/O Cass Information Systems
PO Box 67
Saint Louis, MO 63166

Comments/Special Instructions:
Pickup Remarks:

Delivery Remarks:

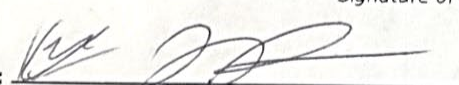
Package Type	Package Qty	Pieces	Description	Weight	Class	Length (ft)	Width (ft)	Height (ft)	NMFC
Pallet	4	0	210 - Spec Drain - Metal Drains	6,451 lbs	50.0	0.000	0.000	0.000	50810.2
Total:	4	0		6451					

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: **Date:** *3-5-24***Trailer#:** _____**Driver's Signature:** _____**Date:** _____**Trailer#:** _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.

*Signature of Consignor***Consignee Signature:** **Print Name:** _____**Company Name:** _____**Date:** _____

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C Â§ 14706(c)(1)(A) and (B)



Viking Express Freight

INVOICE

"Committed To Excellent Services"

Remit: Viking Express Freight Services, LLC

c/o J.O.B.E. Service, Inc. Dept.22

PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2725

DATE: 03-06-24

BILL TO: Zurn NMP Processing

c/o Cass Information Systems

P.O. BOX 67

ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
02-28-24	1001045183	MILLER MAYS	KILGORE- HANOVER	\$250.00
			15% FSC	\$37.50

Make all checks payable to VIKING EXPRESS

TOTAL FREIGHT CHARGES DUE IN 7 DAYS.

If you have any questions concerning this invoice call 832-256-6501.

Total Amount Due	\$287.50
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Driver
copy

BOL NO: 1001045183

Straight Bill of Lading - Short Form - Original - Not Negotiable

Shipper: Miller Mays
Address: 4660 Pine Timbers Building #130
Houston, TX 77041
Country: USA
Contact Name:
Phone No:
Fax No:

Customer Reference
Shipment Date: 02-28-2024
PRO # :
Sales Order #: 17616540
PO # : F55-9715
Trip # : 1045181

Carrier: **VIKING**
Payment Term: Absorbed

Consignee Kilgore-Hanover
Address: 707 Marston St
Houston, TX 77019
Country: USA
Contact Name: **Adam**
Phone No: **832-340-0564**
Fax No:

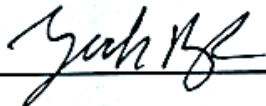
Third Party Billing Information :
Zurn Ind. C/O Cass Information Systems
PO Box 67
Saint Louis, MO 63166

Comments/Special Instructions:
Pickup Remarks:

Delivery Remarks:

Package Type	Package Qty	Pieces	Description	Weight	Class	Length (ft)	Width (ft)	Height (ft)	NMFC
Bundle	1	0	480 - Wilkins - Valves	3,049 lbs	77.5	0.000	0.000	0.000	127200
Total:	1	0		3049					

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: Date: 2/28/24

Trailer#: _____

Driver's Signature: _____


Date: _____

Trailer#: _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

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Signature of Consignor

Consignee Signature: Print Name: Adam SligerCompany Name: Kilgore

Date: _____

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. Â§ 14706(c)(1)(A) and (B)