

**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- 2708 DATE: 01-24-24

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
01-15-24	1001013331	MILLER MAYS	RAVEN MECH	\$250.00
			15% FSC	\$37.50

Total Amount Due \$287.50

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



octaigne bi	iii of Lading - Short Fo	rm - Original - No	t Negotiable	BOL NO: 100101333
Shipper:	Miller Mays	#120	Customer Reference	
Address:	4650 Pine Timbers Building Houston, TX 77041	#130	Shipment Date: 01-15-2024	Carrier: VIKING
Country:	USA		PRO #:	Payment Term: Absorbed
Contact Name:			Sales Order #: 17569191	
Phone No:			PO # : Need PO	
Fax No:			Trip #: 1013329	
Consignee	FAVEN MECHANICAL (7703	9)		
Address:	1618 BUSCHONG ST	-		
	HOUSTON, TX 77039		Third Party Billing Information	
Country: Contact	USA		Zurn ind. C/O Cass Information S	ystems
Name:	-5/100		Saint Louis, MO 63166	
Phone No:	Jriop			
Fax No:				
Lynn				
Package Typ	e Package, Qty Pieces	Description	Weight   Class Length (ft	Width (ft) Height (ft) NME(
Tota Shipper Certi shipping name national govern	ification: I hereby certify that and are classified, packaged, inmental regulations.	- Spec Drain - Metal Drain - M		described above by proper
Tota Shipper Certi shipping name	ification: I hereby certify that and are classified, packaged, nmental regulations.  gnature:	the contents of this co	ains 4,982 lbs 50.0 0.000 4982  nsignment are fully and accurately	described above by proper and/air according to applicable
Total Shipper Certificational government of the person of	ification: I hereby certify that and are classified, packaged, inmental regulations.  gnature:  fication: Camer acknowledges a energency response informal abbook or equivalent in the vehicle of the conditions of applicable.	s receipt of packages in tion and required placacle.  le bill of lading. If this shing statement. The carries with problems.	nsignment are fully and accurately din proper condition for carriage by Date:  Date:  good order, condition and quantity rds were made available and/or carriage ipment is to be delivered to the corer shall not make delivery of this shall not make deliver	described above by proper land/air according to applicable  Trailer#:  unless otherwise stated hereon. Trier has the D.O.T. emergency
Total Shipper Certificational government of the person of	ification: Thereby certify that and are classified, packaged, inmental regulations.  gnature:  fication: Camer acknowledges and ebook or equivalent in the vehicle consignor shall sign the following wful charges. Call 414-808-010	s receipt of packages in tion and required placacle.  le bill of lading. If this shing statement. The carries with problems.	nsignment are fully and accurately din proper condition for carriage by  Date:  Date:  good order, condition and quantity were made available and/or carriage ipment is to be delivered to the condition and the c	described above by proper and are according to applicable  Trailer#:  Trailer#:  unless otherwise stated hereon. There has the D.O.T. emergency  insignee without recourse on the



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INVOICE# REX- 2709 DATE: 01-24-24

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
01-18-24	1001016129	MILLER MAYS	REGENCY	\$250.00
			15% FSC	\$37.50

Total Amount Due \$287.50

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



	ill of Lading - Short Form - Original -	Not Negotiable	BOL NO: 1001016129
Shipper:	Miller Mays		
Address:	4660 Pine Timbers Building #130 Houston, TX 77041	Customer Reference Shipment Date: 01-18-2024	Carrier: VIKING
Country:	USA	PRO #:	Payment Term: Absorbed
Contact		Sales Order #: 17563589	
Name: Phone No:		PO #:P1575210 Trip #:1016127	
Fax No:		mp * : 1010127	
Consignee	Fegency		
Addrass:	11500 Timber Forest Dr Houston, TX 77044	The second second	
Country:	USA	Third Party Billing Information S	
Contact Name:	Roman	FO Box 67 Saint Louis, MO 63166	
Phone No:	281-636-1907	511116 1.5003, 110 05200	
Fax No:			
Pallet Tota Shipper Cert	tification: I hereby certify that the contents of th	al Drains 3,146 lbs 50.0 0.000 3146	t) Width (ft) Height (ft) NMF0 0.000 0.000 50810  y described above by proper
Pailet Tota Shipper Cert shipping name rational gover	2 0 210 - Spec Drain - Meta al: 2 0 tification: Thereby certify that the contents of the e and are classified, packaged, marked and labele principal regulations.	Weight Class Length (f al Drains 3,146 lbs 50.0 0.000 3146	0.000 0.000 50810
Pallet Tota Shipper Cert shipping name	2 0 210 - Spec Drain - Meta al: 2 0 tiffication: I hereby certify that the contents of the and are classified, packaged, marked and labele in mental regulations.	Weight Class Length (f al Drains 3,146 lbs 50.0 0.000 3146	described above by proper y land/air according to applicable
Pailet Tota Shipper Cert shippery name rational gover Shipper's Si Driver's Sign Drivers Certifier resumes guid Subject to Sectors goor, the	2 0 210 - Spec Drain - Meta al: 2 0 2 10 - Spec Drain - Meta al: 2 0 2 10 - Spec Drain - Meta al: 2 0 2 10 - Spec Drain - Meta al: 2 2 0 2 10 - Spec Drain - Meta al: 2 2 0 2 10 - Spec Drain - Meta al: 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Weight Class Length (for all Drains 3,146 lbs 50.0 0.000 3146 lis consignment are fully and accurately disconsignment are full	described above by proper y land/air according to applicable  Trailer#:  Trailer#:  Ly unless otherwise stated hereon arrier has the D.O.T. emergency consignee without recourse on the
Pailet Tota Shipper Cert shipping name rational gover Shipper's Si Driver's Sign Driver's Certific resumes guid Subject to Sectors grow, the	2 0 210 - Spec Drain - Meta al: 2 0 vification: I hereby certify that the contents of the and are classified, packaged, marked and labele inmental regulations.  Ignature: July 1 packaged and labele inmental regulations.  Ignature: July 1 packaged and labele inmental regulations.  Ignature: July 1 packaged and required packages energency response information and required pebook or equivalent in the vehicle.  Iction 7 of conditions of applicable bill of lading. If the consignor shall sign the following statement. The awful charges. Call 414-803-0106 with problems.  Signal	Weight Class Length (for all Drains 3,146 lbs 50.0 0.000 3146 lis consignment are fully and accurately distributed and in proper condition for carriage by Date:  Date:	described above by proper y land/air according to applicable  Trailer#:  Trailer#:  Ly unless otherwise stated hereon arrier has the D.O.T. emergency consignee without recourse on the



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INVOICE# REX- 2710 DATE: 01-24-24

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
01-19-24	1001017105	MILLER MAYS	CFI MECH	\$130.00
			15% FSC	\$19.50

Total Amount Due \$149.50

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

Duro

	Acceptance of the second secon			- Not Negotiable		BOL NO	D: 1001017105
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Tim Houston, TX 7 USA	bers Building 7041	#130	Customer Refe Shipment Date PRO # : Sales Order # PO # : Need PO Trip # : 101710	e: 01-19-2024 : 17575690	Carrier: VI) Payment Ter	KING
Consignee Address: Country: Contact Name: Phone No:	CFI Mech 6109 Brittmooi Houston, TX 77 USA			Third Party Bill Zurn Ind. C/O Ca PO Box 67 Saint Louis, MO 6	ss Information S	on : Systems	
Comments/S Pickup Rema	pecial Instructi	ons:		Contract of the second			
			È	Delivery Remar	ks:		
allet	Package Qty	0 210-	Description Spec Drain - Meta	Weight Cli al Drains 1,504 lbs 50		t) Width (ft) H	
allet Total:  iipper Certifi ipping name a	Package Qty 11 11 cation:   hereb	0 210 - 0 / certify that	Spec Drain - Meta	Weight  Cl	ass Length (fi 0.0 0.000	0.000	0.000 50810.
allet Total:  iipper Certifi ipping name a	Package Qty 11 11 cation: I hereby are classified, hental regulation	0 210 - 0 / certify that	Spec Drain - Meta	al Drains 1,504 lbs 50 1504  sis consignment are fully d and in proper condition	ass Length (fi 0.0 0.000	0.000	
Total:  Tipper Certifi ipping name altional governm	Package Qty 11 11 cation: I hereby here are classified, hental regulation:	0 210 - 0 / certify that	Spec Drain - Meta	al Drains 1,504 lbs 50 1504  sis consignment are fully d and in proper condition	ass Length (fi 0.0 0.000 and accurately n for carriage b	/ described abov y land/air accord	0.000 50810.
Total:  Inipper Certificipping name altional government  Inipper's Signativer's Signativers Certificant	Package Qty 11 11 cation: I hereby the dare classified, pental regulation ature: ure: ure:	certify that packaged, not see the second se	spec Drain - Meta the contents of the narked and labele  freceipt of package on and required p	Weight   Class   1,504   bs   50   1504   class   50   class   50	ass Length (fi 0.0 0.000 and accurately n for carriage b	/ described abov y land/air accord  Trailer#:  Trailer#:	e by proper ing to applicable
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Total:  Inipper Certificational government of the second s	Package Qty 11 11 cation: I hereby the dare classified, the tental regulations at ure:  ure: ation: Carrier action of conditions are equivalent to 7 of conditions assignor shall signal charges. Call 4	certify that packaged, not so that packaged, not so that packaged is a constant of the packaged in the vehicle of applicable the following the packaged in the vehicle of applicable the following the packaged in the package	spec Drain - Meta the contents of the arked and labele  receipt of package on and required p e. bill of lading. If the statement. The with problems.	weight Claded In 1,504 lbs 50, 1504  Date:  Date:  pate:  pate:  pate:  pate:  carrier shall not make delications  bure of Consignor	ass Length (fi 0.0 0.000 and accurately n for carriage b 19/24 ion and quantity lable and/or carvered to the co- elivery of this si	/ described abov y land/air accord  Trailer#: y unless otherwithing the D.Co	e by proper ing to applicable se stated hereon.

NOTE Liability Limitation 101 ...

Aur / 19/24



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INVOICE# REX- 2711 DATE: 01-24-24

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
01-23-24	1001019767	MILLER MAYS	WINSTON WATER	\$375.00
			15% FSC	\$56.25

Total Amount Due \$431.25

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

Straight Bill	of Lading - Short Form - Original - No	t Negotiable BOL NO: 1001019767
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 01-23-2024 PRO #: Sales Order #: 17569446 PO #: 54393079 Trip #: 1019765
Consignee Address: Country: Contact Name: Phone No: Fax No:	WNSTON WATER 14134 VICKERY DR HOUSTON, TX 77032 USA	Third Party Billing Information: Zurn Ind. C/O Cass Information Systems PO Box 67 Saint Louis, MO 63166
Comments/S Pickup Rema	pecial Instructions: nrks:	Delivery Remarks:
Pallet Total  Shipper Certif shipping name a	ication: I hereby certify that the contents of this co and are classified, packaged, marked and labeled an mental regulations.	Weight Class Length (ft) Width (ft) Height (ft) NMFC ains 6,341 lbs 50.0 0.000 0.000 0.000 50810.2  6341  Insignment are fully and accurately described above by proper d in proper condition for carriage by land/air according to applicable  Date: 1-23-24  Trailer#:
Driver's Signa	oture:	Date: Trailer#:
Carrier certifies	<b>cation</b> : Carrier acknowledges receipt of packages in emergency response information and required placa book or equivalent in the vehicle.	good order, condition and quantity unless otherwise stated hereon.  Index were made available and/or carrier has the D.O.T. emergency
Subject to Secti	on 7 of conditions of applicable bill of lading. If this st	nipment is to be delivered to the consignee without recourse on the ier shall not make delivery of this shipment without payment of freight
	Signature	of Consignor
Cosignee Sign	nature: RRUIZ	Print Name:
Company Na	me:	Date:
NOTE Liability Li	mitation for loss or damage in this shipment may be	applicable. See 49 U.S.C § 14706(c)(1)(A) and (B)