



**Bill to:**  
Steam Logistics LLC  
,  
,  
,

Invoice Date: 03/13/2023  
Invoice #: 548762  
Terms: NET 30  
Due Date: 04/13/2023

| Date       | Customer Ref # | Origin - Destination                                                                    | Quantity | Rate | Amount |
|------------|----------------|-----------------------------------------------------------------------------------------|----------|------|--------|
| 03/13/2023 |                | 8400 Winchester Road, Memphis, TN, USA - 7066 Interstate Island Road, Syracuse, NY, USA |          |      |        |
|            |                |                                                                                         | 1        | 2650 | 2650   |

|              |
|--------------|
| <b>TOTAL</b> |
| 2650         |

**PLEASE NOTE**

The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below. Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, agreements or merchandise returns which would affect the payment of all or part of this Invoice on the due date.

**COMPASS FUNDING SOLUTIONS LLC**  
**P.O.BOX 205154**  
**DALLAS, TX 75320-5154**  
**Tel: 844-899-8092**

## Carrier Rate and Load Confirmation



Steam International  
325 Market Street, Suite 204  
Chattanooga, TN 37402  
Justyn Singletary  
justyn.singletary@steamlogistics.com

**Load Number:** 548762

**Date:** 03/10/2023

**Equipment Type:** Van

**Bill of Lading Number:**

**Load Number:** 548762

**Motor Carrier:** Brz

**Contact:** Sean Tomovic, (p) 7083035150 (f)

**Total Weight:** 4,000

**Attributes:**

### Shipper Pickup (Stop 1)

Continuum Solutions  
8400 Winchester Road  
Memphis, TN US 38125  
**Expected Date:** 03/13/2023  
**Shipping/Receiving Hours:** 08:00-17:00  
**Appointment Required:** No  
**Appointment Time:**  
**Contact:**

**Pickup Instructions:**  
**Shipper References:**  
**Pickup/Delivery Number:** F0013711

### Consignee Delivery (Stop 2)

Food Bank of Central New York  
7066 Interstate Island Rd  
Syracuse, NY US 13209  
**Expected Date:** 03/15/2023  
**Shipping/Receiving Hours:** 08:00-16:00  
**Appointment Required:** No  
**Appointment Time:**  
**Contact:**

**Delivery Instructions:**  
**Consignee References:**  
**Pickup/Delivery Number:**

### Shipment Information

| Handling Unit |      | Package |      |          |        |                       | LTL Only |            |
|---------------|------|---------|------|----------|--------|-----------------------|----------|------------|
| Qty           | Type | Qty     | Type | Weight   | HM (X) | Commodity Description | NMFC #   | NMFC Class |
|               |      |         |      | 4000 lbs |        | Kits                  |          |            |

### Carrier Fees

| Description         | Cost         |
|---------------------|--------------|
| Net Freight Charges | USD 2,650.00 |
| Total Cost          | USD 2,650.00 |

- Carriers must accept tracking, driver must contact broker prior to picking load up. \$150.00 fine will be enforced on load per day that load is not tracked.
- All shipments are subject to Steam's Broker - Carrier Agreement available at [www.steamcarriers.com](http://www.steamcarriers.com)
- **No Double Brokering**
- Please send final invoices and documents to [ap@steamlogistics.com](mailto:ap@steamlogistics.com).
- Invoices will not be processed without POD.
- If you are a *TriumphPay* customer and would like *QuickPay* then please send Invoice and POD to [quickpay@steamlogistics.com](mailto:quickpay@steamlogistics.com) for priority processing.





# Bill of Lading - Continuation Sheet

ORIGINAL

on Management Services Solution Electronic Bill of Lading.

it shipment is subject to terms and conditions of 41 CFR 102-117 & 118, the GSA Freight Standard Tender of Service  
the U.S. Government Freight Transportation - Handbook.

|          |                                                         |                               |                 |
|----------|---------------------------------------------------------|-------------------------------|-----------------|
| g Number | Issuing Office<br>Dept of Health & Human Services, ASPR | Date BOL Printed<br>3/10/2023 | Sheet No<br>2/3 |
|----------|---------------------------------------------------------|-------------------------------|-----------------|

ate of TSP Billing - Consignee Must Not Pay Any Charges

|           |                                           |                      |
|-----------|-------------------------------------------|----------------------|
| ivered On | 27. At (Actual Delivery Point City/State) | 28. By (Name of TSP) |
|-----------|-------------------------------------------|----------------------|

29. Delivered this consignment in apparent good order except  
as may be indicated

- ☐ Shortage  
☐ Damage

30.

- ☐ TSP OSD Report Attached  
☐ Delivery at Destination Furnished  
☐ Accessorial Services Certification Attached

31. TSP acknowledges receipt of packages and required placards.

TSP certifies emergency response information was made available and/or TSP has DOT emergency response  
guidebook or equivalent document in the vehicle.

Per  
Package Numbers  
Date

| 32. Quantity | 33. Type | 34. HM | 35. Item Description                                                                  | 36. Weight | 37. Cube | 38. Cube Units | 39. Truck No |
|--------------|----------|--------|---------------------------------------------------------------------------------------|------------|----------|----------------|--------------|
| 10           | PAL      |        | covid test kits<br><br>Appropriation Charge Code:<br>Other Appropriation Charge Code: | 4000       | 0        | Cu Ft.         | 1            |

## Charge Breakdown

Linehaul Cost

Fuel Surcharge Cost

Accessorial Cost

## Total Charge

\$4132.40

\$578.54

\$0.0

TOTAL

\$4710.94

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified,  
packaged, marked and labeled, and are in proper condition for  
transportation according to the applicable regulations of the Department  
of Transportation.



Signature

3/13/23

Date

## 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 Department of Transportation emergency response guidebook or  
equivalent documentation in the vehicle. Property described above is  
received in good order, except as noted.

Signature

Date



# Freight Bill of Lading

ORIGINAL

GSA Transportation Management Services Solution Electronic Bill of Lading.

This Government shipment is subject to terms and conditions of 41 CFR 102-117 & 118, the GSA Freight Standard Tender of Service (STOS), and the U.S. Government Freight Transportation - Handbook.

1. Bill of Lading Number  
F0013711

2. Date BOL Issued  
3/10/2023

3. Date BOL Printed  
3/10/2023

1/3

4. Contract P.O. Number/Other Authority:

5. Agency Shipment ID Number:

6. Tariff/Tender/Special Rate Authority

Tender ID GENT

SRO ID GENTL

LaneID Freight-TL

7. Line of Accounting

See item description (box 35)

8. TSP Name Tendered To

STEAM LOGISTICS, LLC  
Email: ryan.doherty@steamlogistics.com  
Phone: 8559841509 Ext: 7711

9. Bill Charges To

HHS c/o GSA FMP US Bank Syncada  
12800 Foster Street  
OVERLAND PARK KS 66213  
UNITED STATES  
Phone: 3219612524 Ext:  
Email: scott@continuumrecovery.com

SCAC SONW

10. Origin

Continuum Solutions / Cart.com  
8400 Winchester Road  
MEMPHIS TN 38125  
UNITED STATES  
Phone: 9038410941 Ext:  
Email: robin.goss@cart.com  
Other Details:

11. Destination

Food Bank of Central New York  
7066 Interstate Island Rd  
SYRACUSE NY 13209  
UNITED STATES  
Phone: 3154371899 Ext:  
Email: bmcmanus@foodbankcny.org  
Other Details:

12. Requested Pickup Date  
3/13/2023

13. Actual Pickup Date

14. Required Delivery Date  
3/16/2023

15. Signature of Agent

16. Per

17. TSP Pro Bill Number

18. Total Packages  
10

19. Total Weight  
4000

20. Total Cube  
0

21. Mode  
Motor

22. Declared Shipment Value

23. Estimate  
4710.94

24. Marks and Annotations  
PT#1012707244

Received 10 pallets  
for  
Adam cioteau  
3/15/23

For HAZMAT Emergency Contact 1800-888-8888

For Use of Issuing Office

25. Issuing Office

Dept of Health & Human Services, ASPR

Issuing Officer Steven Goddard, Special Government Employee

PICK UP IN 12:20 PM  
out 3:30 PM



## ORIGINAL

The shipment is subject to terms and conditions of 41 CFR 102-117 & 118, the GSA Freight Standard Tender of Service  
 U.S. Government Freight Transportation - Handbook.

| Bill of Lading Number |    | Date BOL Issued  | Date BOL Printed | Sheet No |            |          |
|-----------------------|----|------------------|------------------|----------|------------|----------|
| Type                  | HM | Item Description | Weight           | Cube     | Cube Units | Truck No |
|                       |    |                  |                  |          |            |          |