

**Bill to:**

HMD TRANSPORT INC.
111 E WACKER DRIVE #400,
CHICAGO,
IL,
60691

Invoice Date: 06/22/2023

Invoice #: 62324

Terms: NET 30

Due Date: 07/22/2023

| Date | Customer Ref # | Origin - Destination | Quantity | Rate | Amount |
|------------|----------------|--|----------|------|--------|
| 06/21/2023 | | 405 Commerce Place, Asheboro, NC, USA - 5106 Tradeport Drive, Memphis, TN, USA | | | |
| | | | 1 | 1200 | 1200 |

| |
|--------------|
| TOTAL |
| 1200 |

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



HMD TRANSPORT INC
10031 VIRGINIA AVE
CHICAGO RIDGE IL 60415

| | |
|---------------------------------|--|
| F R O M | DRAGAN BOZOVIC (312) 667-6420 dragan@hmdtransport.com |
| C A R R I E R | ROYAL3 INC (630) 485-7370 (p) Att: ASTA MIJAC (630) 485-6980 (f) MC # 944686 Truck # DOT 2828543 Trailer # Driver FLARE KA LEL ATRE Cell # (347) 781-7234 |

Size & Type: 53' VAN Description: BUMP CAN Miles: 665
Pieces: Weight: 12900

| CHARGES | | DISPATCH NOTES |
|----------------|---------|----------------|
| LINE HAUL RATE | 1200.00 | |
| TOTAL RATE | 1200.00 | |

PICK 1

CPP GLOBAL
405 COMMERCE PLACE
ASHEBORO NC 27203
Hours : 0800-1500

Appointment 06/21/23
Appt Notes: 4500511494
Ref # 55199506

STOP 1

TRADEPORT WAREHOUSE
5106 TRADEPORT DRIVE
MEMPHIS TN 38141

Appointment 06/22/23 @ 10:00
Appt Notes: 4500511494
Ref # 4500511494

BY SIGNING THIS CONFIRMATION CARRIER AGREES TO ALL OF THE FOLLOWING TERMS.
COMPENSATION MAY BE WITHHELD IF THIS SHIPMENT IS DOUBLE-BROKERED, MOVED BY RAIL
CONSOLIDATED WITH ANY OTHER FREIGHT OR IF THE AGREED SERVICES ARE NOT FULFILLED
TRAILER SEALS: SEAL MUST BE APPLIED, WITH THE SEAL NUMBER NOTED ON THE BILL OF
LADING, PRIOR TO DEPARTURE FROM THE SHIPPER. SEALS MUST NOT BE BROKEN WITHOUT
PRIOR WRITTEN APPROVAL FROM HMD TRANSPORT. FAILURE TO DELIVER AT THE DESIGNAT
ED CONSIGNEE WITH THE PROPER SEAL INTACT WILL RESULT IN A CLAIM.

This confirmation governs the rate for the movement of the above-referenced
freight as of the date specified and hereby amends, and is incorporated by
reference and becomes part of that certain Agreement by and between BROKER
and Carrier. By means of either its signature on the Confirmation or its
provision of service: i) CARRIER shall perform its services in accordance
with all applicable laws, rules, and regulations (including, if applicable,
requirement to record hours of service via electronic logging device); and ii)
CARRIER shall be conclusively presumed to have agreed to the rates and
conditions set forth herein. CARRIER shall be conclusively presumed to have
agreed to the rates and conditions set forth herein. CARRIER further represent
and warrants that said mutually agreed upon rates are reasonable
and compensatory, that the freight would not have been tendered
to CARRIER at higher rates, and that no shipments handled under
such rates will subsequently be subject to a later claim of undercharges.
CARRIER hereby confirms current and valid insurance coverage without exclusion
in conflict with HMD Transport load. in amounts no less than the following:
one million dollars (\$1,000,000) auto liability coverage one million dollars
(\$1,000,000) general liability coverage, \$100,000.00 cargo coverage.
If carrier's insurance policy contains a schedule of covered vehicles, carrier
will only only transport this shipment using a vehicle that is listed

(Continued On Next Page)

Carrier Signature _____ Date _____ / _____ / _____
M D



HMD TRANSPORT INC
10031 VIRGINIA AVE
CHICAGO RIDGE IL 60415

PRO # 62324 Rate Confirmation
06/20/23 12:42:48 (EST)

| | |
|---------------------------------|--|
| F R O M | DRAGAN BOZOVIC (312) 667-6420 dragan@hmdtransport.com |
| C A R R I E R | ROYAL3 INC (630) 485-7370 (p) Att: ASTA MIJAC (630) 485-6980 (f) MC # 944686 Truck # DOT 2828543 Trailer # Driver FLARE KA LEL ATRE Cell # (347) 781-7234 |

as a scheduled vehicle on their insurance policy.
ALL TRAVEL DIRECTIONS PROVIDED BY HMD TRANSPORT ARE FOR INFORMATIONAL PURPOSES ONLY. IT IS THE CARRIERS SOLE RESPONSIBILITY TO LAWFULLY AND SAFELY OPERATE ALL VEHICLES AND THEIR CONTENTS OVER ANY ROAD, HIGHWAY, BRIDGE AND/OR ROUTE IN STRICT COMPLIANCE WITH ALL APPLICABLE LAWS, RULES AND REGULATIONS. CARRIER MUST ADVISE IF ANY DELIVERY SCHEDULES, SPECIFICATIONS, INSTRUCTIONS OR REQUIREMENTS CANNOT BE LEGALLY ACCOMPLISHED OR IF THE AVOIDANCE OF ANY FINES, PENALTIES OR DEDUCTIONS WOULD REQUIRE OR RESULT IN THE VIOLATION OF ANY LAWS OR REGULATIONS.
You must provide us with your driver's REAL phone number.
If you do not provide us with a working number we will deduct \$200 from the rate. If Macro Point Tracking is not accepted, \$200 deduction will apply.
PAYMENT REQUIREMENTS:
SIGNED BOL / SIGNED DELIVERY RECEIPT / SIGNED RATE CONFIRMATION SHEET.
LOAD / UNLOAD / LUMPER RECEIPTS MUST ACCOMPANY INVOICING OR THEY WILL NOT BE PAID. MUST REFERENCE LOAD # ON ALL CORRESPONDENCES.
ALL ACCESSORIAL CHARGES MUST BE PRE-APPROVED & BILLED WITH RECEIPT & POD.
DETENTION POLICY: FIRST TWO HOURS FREE AND \$40 PER HOUR AFTER TWO HOURS.
MAXIMUM DETENTION PAID 5 HOURS. 6 HOURS QUALIFIES THE CARRIER FOR A LAYOVER
LAYOVER POLICY: SOLO: \$150 TEAM: \$250 EVERY 24/HOURS
PLEASE EMAIL A COPY OF POD TO ap@hmdtransport.com
CALL 312-778-8777 for any billing related questions.
POD MUST BE SUBMITTED WITHIN 24 HOURS AFTER DELIVERY TO AVOID \$75 CHARGE.
IF POD IS RECEIVED LATER THAN 30 DAYS LOAD CAN RESULT IN NON-PAYMENT.

Carrier Signature _____

Date _____ / _____ / _____
M D

E-Signed : 06/20/2023 11:43 AM CDT

ASTA MIJAC

asta@royal3inc.com
IP: 46.33.206.144

Sertifi Electronic Signature
DocID: 20230620114233112

DRIVER

BILL OF LADING

BOL NO: 55199506

Carrier: Hmd Trucking, Inc.

Ship From

CPP GLOBAL
405 COMMERCE PLACE
ASHEBORO, NC 27203
JD Eliason 336-498-2654

Pickup Date: 06/21/2023

Delivery Date: 06/22/2023

Origin Terminal

P: F:

Destination Terminal

Ship To

TRADEPORT WAREHOUSE
5106 TRADEPORT DRIVE
MEMPHIS, TN 38141
Dennis Tolbert 901-248-1746

P: F:

References:

BOL: SN156150

Mode: TL

PO Number: 4500511494

Shipment Number: 8314457

3rd Party Freight Charges Bill To

RJ Reynolds C/O CJ LOGISTICS FREIGHT AMERICA
1750 S Wolf Rd
Des Plaines, IL 60018-1949

Special Instructions:

DO NOT BREAK SHIPPER SEAL/NO TANS-LOADING: CARGO CLAIM MAY RESULT
Trailers must be clean, dry and odorless. Absolutely no glass particles. If trucks arrive with any of these conditions they will be rejected.

Driver must present GOVT ISSUED ID upon arrival at guard shack

Delivery appointment required *Include the PO#'s, company you're picking up from, and the date to deliver* Dennis Tolbert 901-248-1746; tolberd1@americansnuff.com Jerry O'Hara 901-248-1850; ohara@americansnuff.com Joe Munn 901-248-1752; munnj@americansnuff.com

Accessorials:

Freight Terms:

Prepaid: _____

Collect: _____

3rd Party: X

| Qty | Type | Weight | HM (X) | NMFC | Item Description | LTL Class |
|---------------|------|--------|--------|------|--|-----------|
| 30 | PLT | 12900 | | | Bump Can Dimensions: 40.0 X 48.0 X 79.0 | 85.0 |
| Grand Totals: | | | | | | |

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 _____," _____ skids, 50 lbs per pallet weight waived

Remit COD to:

Collect _____ Prepaid _____ Customer check acceptable _____ COD Amount: _____

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).

Received, subject to individually determined rates or contracts that have been agreed upon in writing, between the carrier and shipper, if applicable, otherwise to the shipper, on request, and to all applicable state and federal regulations.

Trailer

Loaded:

☒ by Shipper
☐ by Driver

Freight

Counted:

☒ by Shipper
☐ by Driver

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper: [Signature]

Shipper Signature/Date: [Signature] 6-21-23

Carrier Signature/Pickup 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 DOT.

Shipper: [Signature] 6-21-23

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 vehicle. Property described above is received in good order, except as noted

Carrier: _____

SEAL # 066911

205085