

**Bill to:**

ARRIVE LOGISTICS
200 EAST SIXTH ST.,
Austin,
TX,
78749

Invoice Date: 06/26/2023

Invoice #: 4292957

Terms: NET 30

Due Date: 07/26/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/23/2023		551 St James Gate, Bolingbrook, IL, USA - 30800 County Road 49, Loxley, AL, USA			
			1	1850	1850

TOTAL
1850

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



7701 Metropolis Dr | Bldg 15 Austin, TX 78744

Phone: (888) 861-0650 | Fax: (512) 872-5109

Have your driver call in for dispatch at (888) 861-0650 ext. 1 and reference the Arrive order4292957

Load		Carrier		Truck	
Arrive Order	4292957	Carrier	Brz	Equipment	-
Cargo Value	\$100,000.00	Attn		Equipment Requirements	Food Grade, Load Bars, Straps
Total Miles	925 Miles	Phone		Truck Number	
Total Pallets	25 Pallets	Fax		Driver	
Total Weight	42000 lbs			Driver Phone	
Load Type	Dry				
Load EQ Type	Van Only				
EQ Size	53 ft				
BOL #	BOLND37906246				
Shipment ID	CM28282836				
Rate Details					
LineHaul	\$1,850.00				
Total	\$1,850.00				

HOW TO GET PAID!

All invoices must either be emailed to invoices@arrivelogistics.com OR directly uploaded via the 'Documents Tab' of a Load in ARRIVENow Carrier.

DOCUMENTS NEEDED

- Carrier invoice
- All pages of the signed Proof of Delivery (POD)
- Rate confirmation
- All approved accessorial documents and receipts previously approved by your sales rep

PAYMENT TERMS

- Default payment terms are Net 30 from the date all required documents are received. You can select standard terms or our QuickPay option of Net-2 for a 2% fee, through TriumphPay.

GETTING STARTED ON TriumphPay

- Visit <https://secure.triumphpay.com/> to create an account with TriumphPay or if you already have a TriumphPay account, enter your login information.
- Once logged in, select Arrive Logistics as your broker and confirm the relationship through authentication.
- Select your preferred payment term, your payment type, and verify your carrier information.



7701 Metropolis Dr | Bldg 15 Austin, TX 78744

Phone: (888) 861-0650 | Fax: (512) 872-5109

Have your driver call in for dispatch at (888) 861-0650 ext. 1 and reference the Arrive order4292957

Pickup #1

Pickup Address	Appointment	Ref/PO#	Commodity	Weight
Scoular 551 St James Gate Bolingbrook, IL 60440	Jun 23, 2023 12:00 CDT Appt. Type By Appointment Confirmed	PO # Reference # Reference #2 PO # PO # PO # PO # PO # PO # PO #	LOX-125183 LOX-125183-2023 0616 LOX-125183 LOX-125177 LOX-125178 LOX-125179 LOX-125180 LOX-125181 LOX-125182 LOX-125183	Mixed Dry Goods 25 PALLETS
42000 lb				

Driver Instructions: BY APPOINTMENT

Pickup Notes: PALLETS: GMA NO EXCHANGE / 7 po DRIVER MUST REQUEST TO DOUBLE STACK DRIVER MUST LET 1ST SHIPPER KNOW TO LEAVE SPACE FOR 2ND SHIPPERS PRODUCT (PALLETS) DRIVER MUST CONFIRM PALLET COUNT. IF PALLET COUNT DOESN' T MATCH PLEASE REACH OUT TO ARRIVE OR CARRIER WILL BE LIABLE FOR UNSHIPED PALLETS.

Delivery #1

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
LOXLEY 30800 COUNTY RD 49 Loxley, AL 36551	Jun 25, 2023 05:00 CDT Appt. Type By Appointment Confirmed	PO #	APP6921637	

Driver Instructions: BY APPOINTMENT

Delivery Notes:

Pickup Comments IF DRIVER CANNOT WATCH LOADING, DR MUST WRITE ' SHIPPER LOAD & COUNT-SLC' & SEAL # ON THE BOL. IF DRIVER FAILS TO NOTE THIS ON BOL AT TIME OF LOADING, BOL WILL SERVE AS EVIDENCE DRIVER WAS ABLE TO WATCH & CONFIRM LOADING PROCESS. Req to Double stack

Delivery Comments Load all PO or Subject to Fine 2 load locks/straps min NO YARDING FINES APPLY TO MISSED PICK Pay Lump to unload \$250 Fine Missed Del DR must be awake/onsite dock while unloading NEED PICS OF RESTACK/Extensive TO REFUND No Roll Door DR Must Secure

All invoices must include signed proof of delivery and supporting documents.

Please email to invoices@arrivelogistics.com or send to:

DM Trans, LLC dba Arrive Logistics

7701 Metropolis Dr | Bldg 15

Austin, TX 78744

PH# (888) 861-0650 FAX (512) 872-5109



7701 Metropolis Dr | Bldg 15 Austin, TX 78744

Phone: (888) 861-0650 | Fax: (512) 872-5109

Have your driver call in for dispatch at (888) 861-0650 ext. 1 and reference the Arrive order4292957

All trailers must be absolutely free of all debris of any kind or will be turned away and refused loading. Reasons to reject trailer at loading include, but are not limited to the following: Foul Odors, Broken glass, Metal shavings, Infestation, and mold.

Load locks or 2 straps or a combination of these two options - Mandatory for each load. Drivers will be turned away if noncompliant.

All drivers must arrive 15 minutes prior to their scheduled pickup time at this location. You will be considered late if you arrive less than 15 minutes prior to your pickup appointment.

Drivers must confirm trailer seal on correct trailer door prior to departure

Operational Rules:

1. **If a driver is not permitted to confirm (by visual inspection) that the load is secure and the piece count is correct.**

The driver is required to call Arrive immediately and have this information documented on the BOL with the words - Shipper Load/Count per _____ Shipper Signature / Initials.

Communication to Arrive must take place PRIOR to the driver leaving the facility.

2. Do not dispatch a driver who cannot meet transit time without violating Hours of Service or other safety rules. Nothing in this Rate Confirmation constitutes a request to violate Hours of Service or other safety rules or to coerce a driver to do so.
3. This Rate Confirmation is deemed accepted by Carrier unless it is rejected within 48 hours of receipt.
4. Receipt of shipment by Carrier constitutes acceptance of and agreement to the terms of this Rate Confirmation.
5. Double brokering without prior written authorization will result in forfeiture of payment by Arrive to Carrier.
6. Any communication regarding this load must be addressed to Arrive and not its customer.
7. All charges are included in this Rate Confirmation.
8. Carrier must give Arrive notice 1 Hour prior to detention occurring.
9. Carrier agrees in the event there are overages, shortages, or damages, Carrier will contact Arrive's office to report the discrepancy before leaving the customer's premises.
10. Payment will be made within thirty (30) days after receipt of invoice, original BOL, and signed Load-Rate Confirmation unless Arrive disputes the invoice or any part thereof.
11. Freight must not be handled or trans loaded by Carrier without approval from Arrive. In the event of Carrier's violation of this Operational Rule, the limitation of liability as to cargo loss or damage set forth in the Broker Carrier Agreement between Arrive and Carrier shall be voided and payment by Arrive to Carrier shall be forfeited by Carrier.
12. Carrier or its agent certifies that any Transportation Refrigeration Unit (TRU or reefer) equipment furnished will be in compliance with the in-use requirements of the California TRU regulations.
13. This Rate Confirmation incorporates the terms and conditions of a Broker Carrier Agreement signed by Arrive and Carrier.
14. In the event of a conflict between this Rate Confirmation and any Broker Carrier Agreement between Arrive and Carrier, this Load-Rate Confirmation shall govern as to the provisions in conflict.

If this load is a temp-controlled load follow these guidelines:

1. All temp-controlled loads should be run on continuous.
2. The temperature must follow the Bill Of Lading.
 - If no temperature, please call Arrive immediately.
 - If there are any discrepancies in the Arrive Rate Confirmation and BOL - Please call Arrive immediately. Temp on BOL will prevail.

Do not dispatch a driver who cannot meet transit time without violating Hours of Service or other safety rules. Nothing in this Rate Confirmation constitutes a request to violate Hours of Service or other safety rules or to coerce a driver to do so.

Broker. DM Trans, LLC dba Arrive Logistics

Carrier Signature: _____

Print Name: _____

Driver: _____ Cell #: _____

Truck#: _____ Tllr: _____ Tllr. Type: _____

A Rate Confirmation from Arrive Logistics will only be sent from the following email addresses: @arrivelogistics.com @arrivefresh.com @arvy.us. It is the Carriers responsibility to verify that a Rate Confirmation has come from a legitimate Arrive email prior to accepting a load and performing services; Arrive will not be held responsible for any payments, losses or damages incurred by Carrier or any third party associated with a Rate Confirmation that has not legitimately originated from Arrive.

NOTE:By accepting this Rate Confirmation, Carrier warrants and agrees that it will follow all rules and regulations concerning its choice of driver(s), including assigning a driver who can perform the transportation services without violating the Hours of Service of Drivers Regulations contained in 49 CFR 395 applicable at the time of acceptance of the shipment.

MERIT LOGISTICS

(949) 481-0685

Aldi (ALDLOX), Loxley, AL

Tax Id: 461734845
 IWO #: 461734845
 AL DL OK 96262626202302409
 Time: 6/25/2023 2:44:00 AM
 PO #: 125177 125181 125178
 125182 125180 125183
 125179
 Truck #: 825
 Trailer #: 94940
 Door #: 215
 Clients Dept: Unloading (GRF)
 Product: GM
 Vendor: Crunchies Natural
 Carrier: Food Company, LLC
 Bill To: BRZ
 QTY < Case >: BRZ
 Activity: 2344
 Work Order Charge: \$75.00
 Service Charge: \$75.00
 Total: \$3.76
 Payment: \$78.76
 Authorization: Credit Card
 Driver: 010722
 AD

Driver's Signature

Supervisor's Signature

06/25/2023 03:56

www.meritlogistics.com

BILL OF LADING

FROM

OF LADING
 S GATE
 OK, IL 60440

FOB: ☐

TO

Y
 RD 49
 36551

FOB: ☒

REGES TO

215

Bill of Lading Number:

113174128



113174128

Carrier name: BRZ

Trailer Number: 940940

Temperature:

Seal Number(s): 777635

Product Temp:

SCAC: CUST

Pro Number:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: ☒ 3rd Party:

The load has been inspected (check box) and found to be in conformity with the Master B/L of Lading, with attached underlying B/Ls of Lading and subject to the terms and conditions of the Bill of Lading. The carrier is not responsible for any loss, damage or shortage of goods, or for any delay in delivery, if the goods are not properly packed, labeled, and marked. Received under protest pending quality inspection and count/quantity verification.

Aldi Signature:

Driver Signature:

Case Paid:

Time:

Check In (Goods):

Appointment Time:

Unloaded & Signed Out:

Date: 6/25/23

2:19

5:00

3:40

CUSTOMER ORDER NUMBER

PKGS

WEIGHT

PALLET/SLIP

Customer PO #

2,344

27,992

X

GRAND TOTAL

2,344

27,992

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
25	PL	2,344	CS	27,992		SEE PACKING LIST		
25		2,344		27,992		GRAND TOTAL		

Where this 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 not be exceeding

per

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐

Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rates, classifications, and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

HUKIC

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 DOT.

Trailer Loaded:

☒ By Shipper

☐ By Driver

Freight Counted:

☐ By Shipper

☐ By Driver/pallets said to contain

☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

BILL OF LADING

Master Bill of Lading #: 113174128

SHIP FROM

LAGROU DIST. AS AGENT FOR

Name: NATURAL SOURCING INTERNATIONAL, LL
Address: 551 ST. JAMES GATE
City/State/Zip: BOLINGBROOK, IL 60440
SID#: FOB: ☐

Bill of Lading Number:

113167148



113167148

SHIP TO

Name: ALDI INC
Address: 30800 COUNTY ROAD 49
City/State/Zip: LOXLEY, AL 36551
CID#: FOB: ☒

Carrier name: BRZ

Trailer Number: 940940

Temperature:

Seal Number(s): 777635

Product Temp:

SCAC: CUST

Pro Number:

SEND FREIGHT CHARGES TO

Name:
Address:
City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: ☐ Collect: ☒ 3rd Party: ☐

Master Bill of Lading, with attached
underlying Bills of Lading

☐ (check-box)

SHIP ON 6/23/2023
2 PALLETS

CARRIER: TO SCHEDULE AN APPOINTMENT GO TO (WWW.LOGISTICSACP.COM)
APPOINTMENTS MUST BE SCHEDULED 24 HOURS IN ADVANCE OF DELIVERY.

and labels of the trailer. The product is to be inspected for evidence of tampering, damage and contamination. The country of origin is present on the label if applicable. Received under protest, pending quality inspection and counterparty verification.

Signature: *[Signature]*
Date: *[Signature]*
Time: *[Signature]*
Check In (Guard): *[Signature]*
Appointment Time: *[Signature]*
Unloaded & Signed Out: 340

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	Customer PO #
31403	138	1,890	Y N	LOX-125180
GRAND TOTAL	138	1,890		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
2	PL	138	CS	1,890		SEE PACKING LIST		
2		138		1,890		GRAND TOTAL		

Where this 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 not be exceeding _____ per _____

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐

Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

HUKAC

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 DOT.

Trailer Loaded:

☒ By Shipper

☐ By Driver

Freight Counted:

☐ By Shipper

☐ By Driver/pallets said to contain

☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

02/23

BILL OF LADING

Master Bill of Lading #: 113174128

SHIP FROM

LAGROU DIST. AS AGENT FOR
 Name: TASTE OF NATURE
 Address: 551 ST. JAMES GATE
 City/State/Zip: BOLINGBROOK, IL 60440
 SID#:

FOB: ☐

Bill of Lading Number:

113167158



113167158

SHIP TO

Name: ALDI INC
 Address: 30800 COUNTY ROAD 49
 City/State/Zip: LOXLEY, AL 36551
 CID#:

FOB: ☒

Carrier name: BRZ

Trailer Number: 940940

Temperature:

Seal Number(s): 777635

Product Temp:

SCAC: CUST

Pro Number:

SEND FREIGHT CHARGES TO

Name:
 Address:
 City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: _____

Collect: ☒

3rd Party: _____

The load is ☐ (check box) Master Bill of Lading, with attached
 underlying bills of lading.

comparing, however and notwithstanding this, the carrier of Origin is present on the
 bill of lading if applicable, stored under proper handling quality inspection and
 quantity verification.

Aldi Signature:

Driver Signature:

Date:

Date:

Time:

Check In (Guard):

Appointment Time:

Unloaded & Signed Date:

CUSTOMER ORDER NUMBER

125181

PKGS

486

WEIGHT

2.269

PALLET/SLIP

Y

N

Customer PO

LOX-125181

GRAND TOTAL

486

2.269

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
3	PL	486	CS	2.269		SEE PACKING LIST		
3		486		2.269		GRAND TOTAL		

Where this 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 not be exceeding

_____ per _____

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rates, classifications
 and rules that have been established by the carrier and are available to the shipper, on request,
 and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

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 DOT.

Trailer Loaded:

☒ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ By Driver/pallets said to contain☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards.
 Carrier certifies emergency response information was made available
 and/or carrier had the DOT emergency response guidebook or
 equivalent documentation in the vehicle.

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

LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Customer:

Packing List

ALDI INC
30800 COUNTY ROAD 49

LOXLEY, AL 36551



31403

Order#: 113167148

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125180

Order Date: 6/16/2023

Line Num	Item#	UOM	Qty Shipped	Description
1	48488	CA	84	ALDSNCSB12 CHIA SEE BLACK
		SHIP ON 6/23/2023		
2	58836	CA	54	ALDI SN FLAX SEED VAR PK/WHOLE/BRN/
		2 PALLETS		
TOTAL			138	

Item Detail

Item#	Lot #	Description	Quantity
48488	23143 C018	ALDSNCSB12 CHIA SEE BLACK	84
58836	23125 C018	ALDI SN FLAX SEED VAR PK/WHO	54
	*** End of packing list ***		

6/23/23

BILL OF LADING

Master Bill of Lading #: 113174128

SHIP FROM
LAGROU DIST. AS AGENT FOR

Name: CRUNCHIES NATURAL FOODS (CHAUCER)
 Address: 551 ST. JAMES GATE
 City/State/Zip: BOLINGBROOK, IL 60440
 SID#: FOB: ☐

Bill of Lading Number:

113167186



113167186

SHIP TO

Name: Aldi Inc. (LOX)
 Address: 30800 County Road 49
 City/State/Zip: Loxley, AL 36551
 CID#: FOB: ☒

Carrier name: BRZ

Trailer Number: 940940

Temperature:

Seal Number(s): 777635

Product Temp:

SCAC: CUST

Pro Number:

SEND FREIGHT CHARGES TO

Name:
 Address:
 City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: ☐Collect: ☒3rd Party: ☐☐ (check box)Master Bill of Lading: with attached
underlying Bills of Lading

The load has been inspected for correct description, cleanliness, condition,
 and odors of the trailer. The product is not inspected for evidence of
 tampering, damage and condition. The carrier of origin is present on the
 label if applicable. Received under protest, without inspection and
 count/quantity verification.

Aldi Signature:

Driver Signature:

Gate Pass:

SHIPPED ON CHEP PALLETS

Time:

Check-In (Gross):

SHIPPED ON GMA-PALLETS

Appointment Time:

PALLET WRAPS

Unloaded & Signed Out:

CUSTOMER ORDER NUMBER

309272

PKGS

300

WEIGHT

660

PALLET/SLIP

Y

N

Customer PO

LOX-125182

GRAND TOTAL

300

660

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with and any care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
3	PL	300	CS	660		SEE PACKING LIST		
3		300		660		GRAND TOTAL		

Where this 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 not be exceeding
 _____ per _____

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rates, classifications
 and rules that have been established by the carrier and are available to the shipper, on request,
 and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

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 DOT.

Trailer Loaded:

☒ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ By Driver/pallets said to contain☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards.
 Carrier certifies emergency response information was made available
 and/or carrier had the DOT emergency response guidebook or
 equivalent documentation in the vehicle.

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

LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Packing List

Customer:

ALDI INC
30800 COUNTY ROAD 49

LOXLEY, AL 36551



125181

Order#: 113167158

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125181

Order Date: 6/16/2023

Line	Num	Item#	UOM	Qty	Description
	1	601198	CA	486	ALDI F&N DC VP FRUIT & BUT BARS
TOTAL				486	

Unit	Item	Quantity	Weight	Description
D05279584	601198	162		ALDI F&N DC VP FRUIT & BUT BA
Lot: 2306144885			756.54	Expire Date: 6/14/2024
D05279585	601198	162		ALDI F&N DC VP FRUIT & BUT BA
Lot: 2306144885			756.54	Expire Date: 6/14/2024
D05279586	601198	162		ALDI F&N DC VP FRUIT & BUT BA
Lot: 2306144885			756.54	Expire Date: 6/14/2024
Total:		486	2269.62	Total Pallets: 3

*** End of packing list ***

LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Packing List

Customer:

ALDI LOXLEY
30800 COUNTY RD 49

LOWLEY, AL 36551



400779637

Order#: 113170003

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125179

Order Date: 6/19/2023

Line Num	Item#	UOM	Qty Shipped	Description
1	20020313	CA	196	ALDI, 80X12, POW, SCH, REBA, 2G
TOTAL			196	

Item Detail

Item#	Lot #	Description	Quantity
20020313	1443D11	ALDI, 80X12, POW, SCH, REBA, 2G	196
*** End of packing list ***			

LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Customer:

Aldi Inc, (LOX)
30800 County Road 49

Loxley, AL 36551

Packing List



309272

Order#: 113167186

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125182

Order Date: 6/16/2023

Line Num	Item#	UOM	Qty Shipped	Description
	1 706734	CA	300	SIMPLY NATURE 16 BAG VARIETY PACKSTRAB
TOTAL			300	

Item Detail

Item#	Lot #	Description	Quantity
706734	CH2304951	SIMPLY NATURE 16 BAG VARIETY	300
*** End of packing list ***			

LAGROU DISTRIBUTION SYSTEMS, INC Packing List

Page: 001

Customer:

ALDI LOXLEY
30800 COUNTY ROAD 49

LOXLEY, AL 36551



125178

Order#: 113170167

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125178

Order Date: 6/19/2023

Line Num	Item#	UOM	Qty Shipped	Description
1	92630	CA	288	(ALDI-9263) BENTON MINI ABC/CHOC CH
TOTAL			288	

Item Detail

Item#	Lot #	Description	Quantity
92630	040524	(ALDI-9263) BENTON MINI ABC/	216
92630	050224	(ALDI-9263) BENTON MINI ABC/	72
*** End of packing list ***			

BILL OF LADING

Master Bill of Lading #: 113174128

SHIP FROM

LAGROU DIST. AS AGENT FOR
Name: PURE'S FOOD SPECIALTIES
Address: 551 ST. JAMES GATE
City/State/Zip: BOLINGBROOK, IL 60440
SID#:

FOB: ☐

Bill of Lading Number:
113170167



113170167

SHIP TO

Name: ALDI LOXLEY
Address: 30800 COUNTY ROAD 49
City/State/Zip: LOXLEY, AL 36551
CID#:

FOB: ☒

Carrier name: BRZ
Trailer Number: 940940 Temperature:
Seal Number(s): 777635 Product Temp:

SCAC: CUST
Pro Number:

SEND FREIGHT CHARGES TO

Name:
Address:
City/State/Zip:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: Collect: ☒ 3rd Party:

The ☐ is not reported for on Master Bill of Lading, with attached, and is of the type. The goods are not subject to the provisions of the bill of lading.

label if applicable. Received under the provisions of the bill of lading, and quantity verification.

Ali's Signature:
Driver Signature:
Gate Pass:
Time:
Check In (Guard):
Appointment Time:
Unloaded & Signed Out: 340

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SKIP	Customer PO #
125178	288	1,512	Y N	LOX-125178
GRAND TOTAL	288	1,512		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
4	PL	288	CS	1,512		SEE PACKING LIST		
4		288		1,512		GRAND TOTAL		

Where this 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 not be exceeding _____ per _____

COD Amount: \$
Fee Terms: Collect: ☐ Prepaid: ☐
Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

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 DOT.

Trailer Loaded:

☒ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

COMPATIBLE BILL OF LADING LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Packing List

Customer:

Aldi Inc - Loxley
30800 County Road 49

Loxley, AL 36551



1137352

Order#: 113170241

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125177

Order Date: 6/19/2023

Line Num	Item#	UOM	Qty Shipped	Description
1	C56573	CA	672	ELEVATION MIXED TRAY 6/4PK
TOTAL			672	

Item Detail

Item#	Lot #	Description	Quantity
C56573	231470Z	ELEVATION MIXED TRAY 6/4PK	288
C56573	231510Z	ELEVATION MIXED TRAY 6/4PK	288
C56573	231570Z	ELEVATION MIXED TRAY 6/4PK	67
C56573	231600Z	ELEVATION MIXED TRAY 6/4PK	29

*** End of packing list ***

BILL OF LADING

Master Bill of Lading #: 113174128

Bill of Lading Number:

113170241



113170241

Carrier name: BRZ

Trailer Number: 940940

Temperature:

Seal Number(s): 777635

Product Temp:

SCAC: CUST

Pro Number:

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid: X

Collect:

3rd Party: X



(check box)

Master Bill of Lading: with attached underlying Bill of Lading

The load has been inspected for evidence of tampering, cleanliness, condition and odors of the trailer. The product has been inspected for evidence of tampering, damage and cleanliness. The presence of residue is present on the label if applicable. Received under protest of quality of goods and quantities verified.

ADD Signature:

Driver Signature:

Gate Pass:

Date:

Time:

Check In (Guard):

Appointment Time:

Unloaded & Signed On: 340

CUSTOMER ORDER NUMBER

1137352

PKGS

672

WEIGHT

13,177

PALLET/SLIP

Y

N

Customer PO #

LOX-125177

GRAND TOTAL

672

13,177

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
7	PL	672	CS	13,177		SEE PACKING LIST		
7		672		13,177		GRAND TOTAL		

Where this 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 not be exceeding

per

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐

Customer Check Acceptable: ☐

NOTE Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 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 the shipper, if applicable, otherwise to the rules, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

Driver's Signature:

NUKIC JASIN

Time out: 6/23/2023 11:56 AM

HUKIC

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 DOT.

Trailer Loaded:

☒ By Shipper

☐ By Driver

Freight Counted:

☐ By Shipper

☐ By Driver/pallets said to contain

☒ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available and/or carrier had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

LAGROU DISTRIBUTION SYSTEMS, INC

Page: 001

Packing List

Customer:

ALDI LOXLEY
30800 COUNTY ROAD 49

LOXLEY, AL 36551



S003-07318

Order#: 113170201

Date: 6/22/2023

ROUTE/STOP LGMS

Customer PO#:



LOX-125183

Order Date: 6/19/2023

Line	Item#	UOM	Qty	Description
Num		Shipped		
1	03-00252	CA	264	ALDI SAUCE REPACK 12/24 OZ
TOTAL			264	

Item Detail

Item#	Lot #	Description	Quantity
03-00252	01/23/2026	ALDI SAUCE REPACK 12/24 OZ	264
*** End of packing list ***			