



Bill to:
COYOTE LOGISTICS , LLC
191 E.DEERPATH ROAD,
Lake Forest,
IL,
60045

Invoice Date: 09/01/2023
Invoice #: 29813739
Terms: NET 30
Due Date: 10/01/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/31/2023		4211 Shuffel Street Northwest, North Canton, OH, USA - 100 Raines Dr, Franklin, KY 42134, USA			
			1	1000	1000

TOTAL
1000

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



Rate Confirmation Load 29813739

Send invoices to:
CarrierInvoices@coyote.com
960 Northpoint Parkway
Suite 150
Alpharetta, GA 30005

877-6COYOTE
(877-626-9683)

Cust Requirements

Equipment	Van, 53'
Pre Cooled Temp	None
Load Temp	None
Tarps	Undefined
Value	\$100,000

Booked By

Jared Soderholm
Jared.Soderholm@coyote.com
Phone: +1 (773) 365 6497
x2228
Fax: +1 (773) 365 7804



Get

CoyoteGO

Today!

- Dispatch
- Send updates
- Check in
- Submit paperwork

Available for An-
droid or iPhone,
at App Store or
Google Play

Load Requirements

N/A

Equipment Requirements

N/A

Notes

All Van/Container loads MUST be sealed at origin either by shipper or driver with a seal number noted on bill of lading. The driver is responsible for re-sealing the trailer after each pickup/drop on a multi-stop shipment. In the event a shipment that was sealed at origin or after each additional pickup/drop arrives at the destination with a tampered seal or without the seal intact then (i) the Carrier shall be liable for any shortage or damage claims with respect to such shipment and (ii) the shipper shall have the right, in its sole discretion, to deem the entire shipment damaged, adulterated/contaminated and unsalvageable, without the need for any inspection and the Carrier shall be liable for the full value of the shipment. Carrier is required to weigh shipment within 50 miles of departing each shipper. If carrier fails to weigh shipment within 50 miles of departing each shipper, any citations/expenses incurred due to the equipment and/or shipment weight will be the carrier's sole responsibility. Carrier must meet and comply to shipper requirements at the facility. All drivers must wear masks or facial coverings to the extent required by laws or facilities. **Carrier must be in full compliance with the Food Safety Modernization Act (FSMA), if applicable. By accepting the shipment, Carrier agrees that the driver has consented to receiving text messages and/or phone calls from or on behalf of Coyote.**

Approval for payment of detention is contingent upon the following eligibility requirements:

- 1) Carrier must report facility departure time and total detention hours within 24 hours of shipment delivery at the final facility.
- 2) Carrier must provide proof of the on time arrival and departure times in the form of a BOL or other shipping document with arrival and departure times notated by facility within 24 hours of shipment delivery at final facility.

Route Directions

Carrier acknowledges that any routing instructions from the shipper herein are being provided for convenience only, and the Carrier may choose the route.

Signature Line

By signing below, BRZ agrees to the terms and conditions set forth below and provided herewith, if any.



Rate Confirmation

Load 29813739

Stop 1: Pick Up

Pick Up 1035137988 Numbers	Appointment Scheduled For Thu 08/31/2023 at 13:00	Facility Notes
Confirmation None Numbers		
Facility Kong	Driver Work No Touch	
Address 4211 SHUFFEL ST NW North Canton, OH 44720-6937	SLIC N/A	
Contact None Phone +1 (111) 111 1111		

Stop 1 Requirements

N/A

Commodity	Packaging	Exp Wt	Pallets
Pet Toys	Pallet	9,167 Lbs	12

Stop 2: Delivery

Delivery 1035137988 Numbers	Appointment Scheduled For Fri 09/01/2023 at 08:00	Facility Notes
Confirmation None Numbers		
Facility TRACTOR SUPPLY COMPANY #499	Driver Work No Touch	
Address 100 RAINES DR Franklin, KY 42134	SLIC N/A	
Contact None Phone +1 (270) 598 5510 x0		

Stop 2 Requirements

N/A

Commodity	Packaging	Exp Wt	Pallets
Pet Toys	Pallet	9,167 Lbs	12

Charges

Description	Units	Per	Amount
Fuel Surcharge	479.00	\$0.610	\$292.19
Flat Rate	1.00	\$707.810	\$707.81
Total			USD \$1,000.00

Contact

Send invoices to:
**960 Northpoint Parkway
Suite 150
Alpharetta, GA 30005**

Please contact Coyote
at 877-626-9683 if the
charges are incorrect.



Rate Confirmation

Load 29813739

Agreement

Carrier Riki Transportation Inc
USDOT 3119062
Phone None
Email edith@rtbrz.com
Fax None

Broker Coyote Logistics, LLC
Rep Jared Soderholm
Title Sales Rep
Phone +1 (773) 365 6497 x2228
Fax +1 (773) 365 7804
Date 08/31/2023 08:04

By signing below, BRZ agrees to the terms and conditions set forth below and provided herewith, if any.

Name and Title (Print)

Signature

Date

PLEASE SIGN THIS AGREEMENT AND EMAIL TO Jared.Soderholm@coyote.com

Coyote Logistics, LLC is an Equal Opportunity Employer



Rate Confirmation

Load 29813739

Terms and Conditions

The Broker-Carrier Agreement or Carrier Agreement (in each case, the "Agreement") between Coyote Logistics, LLC, a Licensed Property Broker - USDOT # 2236410, and BRZ is amended by the verbal agreement between Jared Soderholm of Coyote Logistics, LLC hereafter referred to as BROKER, and Edith of BRZ hereafter referred to as CARRIER, dated 08/31/2023.

This confirmation is subject to the terms of the Agreement and this document constitutes an amendment thereto. If the CARRIER has not signed the Agreement, then the rate shown above is the agreed individually negotiated rate and no other rate shall apply including any carrier tariff rate or terms.

THIS LOAD SHALL NOT BE DOUBLE BROKERED. No additional charges not listed above may be added by the CARRIER. Any additional charges must appear on a revised confirmation sheet signed by the BROKER. CARRIER must include signed copy of the shipper's bill of lading and any other proof of delivery with invoice to BROKER. Rates, except as specifically designated above, are inclusive of any fuel surcharge. CARRIER certifies that it is in compliance with all requirements of the California Air Resources Board (CARB) that are applicable to the scope of CARRIER's operations, including, but not limited to: Statewide Truck and Bus Regulations, Transport Refrigeration Unit (TRU) Regulations, Tractor-Trailer Greenhouse (GHG) Gas Regulations, and Drayage Truck Regulations. CARRIER also warrants that it is in compliance with any comparable requirements of the Environmental Protection Agency (EPA) and other states, where applicable. CARRIER shall be responsible for any fines imposed on BROKER and/or shipper resulting from noncompliance.

CARRIER hereby confirms that it maintains applicable and valid insurance without exclusions that would prevent coverage for the items listed above. CARRIER has at least \$100,000.00 in cargo insurance and \$1,000,000.00 in automobile liability coverage. CARRIER further confirms that in transporting the shipment described hereinabove, it will comply with all U.S. DOT and FDA regulations applicable to its operations while transporting said shipment, including, but not limited to drivers' hours of service, and the Food Safety Modernization Act (FSMA), if applicable. CARRIER agrees to the attached requirements from the shipper, if any.

ALL LOADS ARE SUBJECT TO ELECTRONIC TRACKING

By accepting this shipment, CARRIER agrees that it has obtained a written agreement from each driver transporting a shipment tendered by BROKER to CARRIER pursuant to the Agreement in which each driver provides all necessary consents to (i) receiving text messages and/or phone calls from or on behalf of BROKER and (ii) allowing BROKER or its vendor to track such driver's location while transporting such shipment. CARRIER shall comply with all applicable laws relating to the collection, use, storage, retention, disclosure, and disposal of any information CARRIER provides to BROKER, including information regarding the drivers transporting shipments. CARRIER shall indemnify, defend, and hold BROKER and its affiliates harmless from and against any and all claims, damages, liabilities, losses, actions and expenses (including attorneys' fees) arising out of or in connection with CARRIER's breach of this Section. This Section shall survive the expiration or termination of the Agreement between BROKER and CARRIER.

Date: 8/31/2023

BILL OF LADING

SHIP FROM

Name: KONG COMPANY - Canton
Address: 4211 Shuffel Street NW,
City/State/Zip: North Canton, OH, 44720
Phone Number: 330.784.2835

FOB: ☐

SHIP TO

Name: Tractor Supply Co. #0499
Address: 100 Raines Drive,
City/State/Zip: Franklin, KY, 42134
Phone Number: 270.586.5392

FOB: ☐

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: KONG - Golden
Address: 16191 Table Mountain Parkway,
City/State/Zip: Golden, CO, 80403
Phone Number: 303.216.2626

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

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

BILL OF LADING NUMBER: 21801
CARRIER NAME: Coyote Logistics
CONTAINER NUMBER:
TRAILER NUMBER:
SEAL NUMBER: 0802874

BROKER

Name:
Address:
City/State/Zip:

REFERENCES

SUBJECT TO COUNT DATE: 9-1-23
CARRIER: LOWE TRUCK: 430
TRAILER: 385716 SEAL#: 0802874
INSPECTED BY: [Signature]
RECEIVER: [Signature]
PEST EVIDENCE: (YES / NO) NO

SPECIAL INSTRUCTIONS

Ship To Instructions Please make a delivery appointment by phone- 270.586.5392 or Email- FDCRec@TractorSupply.com
Please document all communication with TSC, including requests to place freight into consolidation.
Delivery window: 8/28 - 8/31.

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	# PALLETS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
1035137988	750	12	9166	Y N	Order # SO136289

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	Commodity Description	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
12	PLT	750	CAS	9166		Rubber Pet Products	00207006	100
12		750		9166		PAGE TOTAL		

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 _____."

COD Amount: \$ _____

FEE TERMS:

Collect: ☐ Prepaid: ☐ Customer Check: ☐

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 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 charges and all other lawful fees.

Shipper Signature _____

SHIPPER SIGNATURE / DATE

TRAILER LOADED

FREIGHT COUNTED

CARRIER SIGNATURE / DATE

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

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.

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

Moe
8-31-23

D103

FILED OF LADING NUMBER: 21801

SHIP FROM Name: KONG COMPANY - Canton Address: 4211 Shuffel Street NW, City/State/Zip: North Canton, OH, 44720 Phone Number: 330.784.2835		SHIP TO Name: Tractor Supply Co. #0499 Address: 100 Rains Drive, City/State/Zip: Franklin, KY, 42134 Phone Number: 270.586.5392		FOB: <input type="checkbox"/> BROKER Name: _____ Address: _____ City/State/Zip: _____		FOB: <input type="checkbox"/>		Name: _____ Address: _____ City/State/Zip: _____		REFERENCES SCAC: CLLQ PRO NO: _____		SEAL NUMBER: 0802874 CARRIER NAME: Coyote Logistics CONTAINER NUMBER: _____ TRAILER NUMBER: _____		BAR CODE SPACE																																
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Woe
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