



Bill to:
SOMERSET LOGISTICS
2146 n Thompson Lane,
Murfreesboro,
TN,
37129

Invoice Date: 12/01/2023
Invoice #: 762631
Terms: NET 30
Due Date: 01/01/2024

| Date | Customer Ref # | Origin - Destination | Quantity | Rate | Amount |
|------------|----------------|--|----------|------------|------------|
| 11/29/2023 | | 162 Hanse Avenue, Freeport, NY, USA - 3752 Smyrna Church Road, Chatsworth, GA, USA | | | |
| | | | 1 | \$1,750.00 | \$1,750.00 |

| TOTAL |
|------------|
| \$1,750.00 |

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

Please have
driver call for
dispatch.

(708) 575-0312

MC # 376967

LOAD No. IND762631
SOMERSET LOGISTICS
 2146 N. THOMPSON LANE
 MURFREESBORO, TN 37129-6025

Confirmation must
be signed & returned
before driver can
be dispatched.
Thank you!

FAX: () -

Carrier: ROYAL 3, INC.

Contact:

Address: CHICAGO, IL 60638

Fax / Phone: (630) 485-6980 (630) 485-7370

Authority / Insurance On File?: Yes ☒ No ☐

DOT #: 2828543

MC #: MC944686

LOAD CONFIRMATION AND PAYMENT AGREEMENT --- PLEASE SIGN & RETURN ASAP

| | | |
|------------------------|--|----------------------------------|
| UNITS 860.00 | RATE/UNIT | COST/FLAT RATE \$1,750.00 |
| PRODUCT | Plastic Regrind In | P.O. # 950743 |
| EQUIPMENT | Van 53' | B/L # 9126 |
| QUANTITY | Full | WEIGHT 43,500 |
| DRIVER | TRUCK # | TRAILER # |
| | | Total \$1,750.00 |
| INITIAL PICK UP | | FINAL DESTINATION |
| DATE: | 11/29/2023 | TIME: 08:30-15:00 |
| FROM: | FARBER PLASTICS INC 162 HANSE AVE FREEPORT, NY 11520 | |
| CONTACT: | SHIPPING/RECEIVING | |
| PU #: | 950743 | |
| PHONE: | (516) 378-4860 | |
| PICKUP | *Driver must call for dispatch. | |
| NOTE: | *Please have driver call again when loaded. *Loading Hrs: 8:30-3:30 M-Th, 8:30-12:30 Fridays; 516-378-4860; ***3rd Party, Independent, Certified Scale Tickets are required on this load!!! Carrier will be fined \$300 if these scale tickets are not acquired!!! | |
| DATE: | 11/30/2023 | TIME: 08:00-16:00 |
| TO: | POLYTECH FIBERS 2 3752 SMYRNA CHURCH ROAD CHATSWORTH, GA 30705 | |
| CONTACT: | SHIPPING/RECEIVING - JAE LIM | |
| DEL #: | 9126 | |
| PHONE: | (423) 702-0357 | |
| DELIVERY | *Driver MUST email/text/fax BOLs ASAP to confirm delivery! | |
| NOTE: | ***3rd Party, Independent, Certified Scale Tickets are required on this load!!! Carrier will be fined \$300 if these scale tickets are not acquired!!! | |

| NO ADDITIONAL STOP(S) | | | |
|-----------------------|-----------------|-----------------|------------|
| Stop # | Contact / Phone | Name / Location | Stop Notes |
| | | NONE | |
| Date: | Time: | | |

BROKER SIGNATURE: JOANA COMPANADO, SOMERSET LOGISTICS

CARRIER SIGNATURE:

Andy Skorik

This agreement is pursuant to the terms of the Brokerage Agreement between SOMERSET LOGISTICS and the CARRIER and becomes a binding addendum to the contract. CARRIER will not re-broker, co-broker, subcontract, assign, interline, or transfer the transportation of shipments hereunder to any other persons or entity conducting business under a different operating authority, without prior written consent of SOMERSET LOGISTICS. If CARRIER breaches this provision, SOMERSET shall have the right of paying the monies it owes CARRIER directly to the delivering carrier, in lieu of payment to CARRIER. Upon SOMERSET'S payment to delivering carrier, CARRIER shall not be released from any liability to SOMERSET under this Agreement. In addition to the indemnity obligation in Par 1.H (Broker/Carrier Agreement), CARRIER will be liable for consequential damages for violation of this provision. Additionally, CARRIER shall transport all shipments provided under this Contract without delay, and all occurrences which would be probable or certain to cause delay shall be immediately communicated to SOMERSET by CARRIER. CARRIER can be subject to fines, penalties and possible deductions for missing agreed upon appointments and/or missed delivery dates.

Thank you for using SOMERSET LOGISTICS!

For payment, please email all documents to Invoices@SomersetLogistics.com

www.somersetlogistics.com Date: 11/29/2023 Time: 08:14:56 Page 1

02-09-22

| | | | | | | | | | |
|--|-------------|----------------------|-------------------|--|--|---|--------|---|--------------|
| SHIP FROM | | | | Bill of Lading Number: | | | | | |
| Farber Plastics, Inc. 162 HANSE AVE FREEPORT NY 15520 SID No.: | | | | BAR CODE SPACE | | | | | |
| SHIP TO | | | | Carrier Name: CUSTOMER PICK UP | | | | | |
| CELLMARK RECYCLING 80 WASHINGTON ST NORWALK, CT 06854 CID No.: | | | | Trailer number: Serial number(s): | | | | | |
| THIRD PARTY FREIGHT CHARGES BILL TO | | | | SCAC: | | | | | |
| [Name] [Street Address] [City, ST ZIP Code] | | | | Pro Number: BAR CODE SPACE | | | | | |
| Special Instructions: | | | | Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> | | | | | |
| | | | | <input type="checkbox"/> Master bill of lading with attached underlying bills of lading. | | | | | |
| CUSTOMER ORDER INFORMATION | | | | | | | | | |
| Customer Order No. | | # of Packages | Net Weight | Pallet/Slip (circle one) | | Additional Shipper Information | | | |
| PO #950743 | | 21 | 41625 | Y | N | MIXED COLOR PET REGRIND | | | |
| PO # | | | | Y | N | | | | |
| | | | | Y | N | | | | |
| Grand Total | | | | | | | | | |
| CARRIER INFORMATION | | | | | | | | | |
| Handling Unit | | Package | | Gross Weight | | 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. See Section 2(e) of NMFC item 360</small> | | LTL Only | |
| Qty | Type | Qty | Type | | | | | NMFC No. | Class |
| 21 | PLT | | | 42990 | 21 GAYLORDS OF MIXED COLOR PET REGRIND | | 156830 | 55 | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 21 | | | | 42990 | | | | | |
| <small>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 _____"</small> | | | | | | COD Amount: \$ _____ | | | |
| <small>Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/></small> | | | | | | Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B). | | | |
| <small>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.</small> | | | | The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. | | | | | |
| Shipper Signature/Date <small>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.</small> | | | | Trailer Loaded: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver | | Freight Counted: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces | | Shipper Signature _____ | |
| | | | | | | | | Carrier Signature/Pickup Date <small>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.</small> | |

November 21, 2023

BILL OF LADING – SHORT FORM – NOT NEGOTIABLE

Page 1 of 1

| | | | | | | | |
|--|-------------|---|-------------------|---|--|---|-----------------|
| SHIP FROM | | | | Bill of Lading Number: | | | |
| Farber Plastics, Inc. 162 HANSE AVE FREEPORT NY 15520 SID No.: | | | | BAR CODE SPACE | | | |
| SHIP TO | | | | Carrier Name: CUSTOMER PICK UP | | | |
| CELLMARK RECYCLING 80 WASHINGTON ST NORWALK, CT 06854 CID No.: | | | | Trailer number: Serial number(s): | | | |
| THIRD PARTY FREIGHT CHARGES BILL TO | | | | SCAC: | | | |
| [Name] [Street Address] [City, ST ZIP Code] | | | | Pro Number: BAR CODE SPACE | | | |
| Special Instructions: | | | | Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> | | | |
| | | | | <input type="checkbox"/> Master bill of lading with attached underlying bills of lading. | | | |
| CUSTOMER ORDER INFORMATION | | | | | | | |
| Customer Order No. | | # of Packages | Net Weight | Pallet/Slip (circle one) | | Additional Shipper Information | |
| PO #950743 | | 21 | 41625 | Y N | | MIXED COLOR PET REGRIND | |
| PO # | | | | Y N | | | |
| Grand Total | | | | Y N | | | |
| CARRIER INFORMATION | | | | | | | |
| Handling Unit | | Package | | 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. See Section 2(e) of NMFC item 360</small> | | LTL Only | |
| Qty | Type | Qty | Type | | | Gross Weight | NMFC No. |
| 21 | PLT | | | 42990 | 21 GAYLORDS OF MIXED COLOR PET REGRIND | 156830 | 55 |
| <i>Desiron Cantrell 11-30-23 p12</i> | | | | | | | |
| 21 | | | | 42990 | | | |
| <small>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 _____"</small> | | | | COD Amount: \$ _____ Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/> | | | |
| Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B). | | | | | | | |
| <small>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.</small> | | | | 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/Pickup Date | |
| <small>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.</small> | | <input type="checkbox"/> By shipper <input type="checkbox"/> By driver | | <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces | | <small>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.</small> | |