



Bill to:
CH Robinson

Invoice Date: 12/07/2023
Invoice #: 457145126
Terms: NET 30
Due Date: 01/07/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/05/2023		245 1st Avenue North, Perham, MN 56573, USA - 4491 State Route 14A, Dundee, NY, USA			
			1	\$3,400.00	\$3,400.00

TOTAL
\$3,400.00

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

C.H. Robinson Contract Addendum and Carrier Load Confirmation - #457145126

This load confirmation is confidential information of CH Robinson and may not be disclosed to third parties without CH Robinson's prior written approval.

**Heimar Aranzubia at Zigi Freight Inc - T5303929
DBA: Royal3 Inc**

C.H. Robinson requires automated shipment check-in and in-transit updates from one of the approved shipment status technologies. Additional information about these technologies can be found at www.chrobinson.com.

If you require assistance during your check-in process, please use one of our mobile apps, or call (888) 278-9441.



C.H. Robinson Communication

Customer-Specified Equipment Requirements

Equipment: Van - Min L=48

SHIPPER#1:	Tuffy's Pet Foods	Pick Up Date:	12/05/23
Address:	245 1st Avenue North	*Open Pick Up*	
	Perham, MN 56573	Pick Up Time:	07:00-22:00
		Pickup#:	T683624
Phone:	(218) 346-7500	Appointment#:	

Please ask for and confirm receipt of:

Commodity	Est Wgt	Units	Count	Pallets	Temp	Ref #
Dog Food	43,905	Pallet(s)	1,115			GDM 112923

Shipper Instructions

RECEIVER #1:	GDM Denz LLC	Delivery Date:	12/08/23
Address:	4491 State Rt 14A	*Open Delivery*	
	DUNDEE, NY 14837	Delivery Time:	07:30-17:00
		Delivery#:	GDM112923
Phone:	(607) 243-9796	Appointment#:	

Please confirm delivery of:

Commodity	Est Wgt	Units	Count	Pallets	Temp	Ref #
Dog Food	43,905	Pallet(s)	1,115			GDM 112923

Receiver Instructions

Please reach out to Wayne for delivery appt. waynesenig@gmail.com or 607-243-9796



C.H. Robinson Contract Addendum and Carrier Load Confirmation - #457145126**Rate Details**

Service for Load #457145126	Amount	Rate	Extended
Line Haul - PER LB	1	\$3,400.00	\$3,400.00
Total:			\$3,400.00

SUBMIT FREIGHT BILL TO:

CHRW Billing
P.O. Box 3470
Chicago, IL 60654
LoadDocs@CHRobinson.com

To insure prompt payment, all billing must be accompanied by an invoice with the Carrier Name and C.H. Robinson Load Number

Fuel Surcharge Information

Please note that C.H. Robinson has included a \$587.52 fuel surcharge within the listed transportation rate on this confirmation. The fuel surcharge is an estimate based off of a weekly national average fuel price from the U.S. Department of Energy.

QUICK PAY and CASH ADVANCE

QUICK PAY - If you are a Carrier who utilizes C.H. Robinson's Quick Pay Program, you may email your invoice and required paperwork to LoadDocs@chrobinson.com or visit NavisphereCarrier.com for other scanning options. Funds will be released from C.H. Robinson, minus the fixed discount, within two business days from receipt of complete and legible paperwork. Paperwork received by 12:00 noon (CST) will be counted as same day; paperwork received after 12:00 noon (CST) will count as the next business day. Carriers enrolled in Quick Pay are no longer required to submit original paperwork for payment in addition to using one of our billing methods unless otherwise instructed by C.H. Robinson. Carrier shall retain custody of the original paperwork and provide it to C.H. Robinson upon Request.

C.H. Robinson also recommends that Carrier only submit "receipt" for payment once, regardless of billing method to avoid additional fees. If you would like more information about becoming enrolled in Quick Pay, please contact the Quick Pay Department at (800) 326-9977. For a list of our billing options, please visit NavisphereCarrier.com.

CASH ADVANCE - Carriers may request a cash advance from C.H. Robinson to be issued at C.H. Robinson's sole discretion as a partial settlement to the agreed upon rate. All cash advances will be deducted from final settlement; including a transaction fee of the greater of 3% of the advance issued or \$15 for each individual advance.

Directions

Any directions given by C.H. Robinson or its Customers, whether orally and/or electronically, are for informational purposes only. It is the Carrier's sole responsibility to confirm that it may lawfully and safely operate its vehicle and its contents over any road, highway, bridge and/or route. Carrier shall be solely responsible for any fines, penalties, or citations that may be levied as a result of operating its vehicle equipment and its contents in any way that may be found to be in violation of any regulation, law or ordinance.

Shipper's Driving Directions

SHIPPER 1 - Tuffy's Pet Foods: From Fargo: 10 east and take CR 80 exit. follow into town and take a left on first ave north. they will be the tall, blue building on 1st ave. Heading West on Hwy 10 take the CR 8 (aka 3rd ave) exit and take a right. follow to main street (CR 80) and take a left, take a right on 1st ave and they will be the tall, blue building on 1st ave.



C.H. Robinson Contract Addendum and Carrier Load Confirmation - #457145126**C.H. Robinson Contract Addendum and Carrier Load Confirmation Conditions**

THIS LOAD CONFIRMATION IS SUBJECT TO THE TERMS OF THE AGREEMENT FOR MOTOR CONTRACT CARRIER SERVICES ("AGREEMENT") PREVIOUSLY EXECUTED BETWEEN OUR COMPANIES AND THIS CONSTITUTES AN ADDENDUM TO THE TERMS OF THAT AGREEMENT. WE AGREE TO PAY THE RATES AND CHARGES SHOWN ABOVE AND NO DIFFERENT TARIFF RATE OR SCHEDULE OF RATES APPLY. THIS LOAD CONFIRMATION IS INCLUSIVE OF ALL CHARGES. UNLESS ORAL AND WRITTEN FAX OBJECTIONS ARE MADE TO ITS TERMS, AT THE EARLIER OF WITHIN TWENTY-FOURS (24) HOURS OF RECEIPT OR PRIOR TO WORK BEING INITIATED, YOU HAVE AGREED TO THESE TERMS.

Additional Terms**1.**

Unless C.H. Robinson provides written notice herein that this term does not apply to this shipment, Carrier's motor vehicle equipment shall be dedicated to C.H. Robinson's exclusive use while transporting the cargo subject to this booking. Carrier's violation of this exclusive use requirement shall result in Carrier's forfeiting its right to be paid for the transportation services contemplated by this Load Confirmation, not as penalty, but as liquidated damages.

2.

Cash advance requests made after regular business hours will not be authorized. If Carrier requires a cash advance, Carrier must make arrangements with the C.H. Robinson booking representative during normal business hours and/or upon booking this shipment. Cash advance requests made outside of the C.H. Robinson booking branch's regular business hours may not be authorized. If Carrier requires a cash advance, Carrier must make arrangements with the C.H. Robinson booking branch during its normal business hours and/or upon booking this shipment.

3.

This rate is contingent upon successful and on-time completion of all load requirements as orally stipulated or written on this Addendum and rate may be subject to reduction if Carrier fails to complete any applicable terms and conditions. Rate may be reduced if load picks up or delivers after originally scheduled time and date. Carrier acknowledges that failure to complete any terms and conditions on this shipment may jeopardize or result in loss of future business opportunities with C.H. Robinson and/or cancelation of the Agreement.

4.

Accessorial charges (including but not limited to labor, detention, and/or layover charges) must be authorized and approved prior to or at time of occurrence. C.H. Robinson will not provide any reimbursement of any non, prior-approved accessorial charges. Carrier shall ensure the bill of lading is notated either when handling is required or when detention occurs, that a lumper receipt is provided when a lumper is hired, and/or that both are included as supporting documents with the Carrier's invoice. All overage, shortage, and damage must be reported to C.H. Robinson immediately, at time of occurrence, and noted on the bill of lading.

5.

C.H. Robinson's Customer requires that Carrier provide, through C.H. Robinson, the following electronic shipment status updates via EDI, NavisphereCarrier, the Navisphere driver app, or some other electronic method of providing shipment status updates (unless otherwise specified on this confirmation): - Arrival at and departure from Shipper(s) within thirty (30) minutes of occurrence; - A minimum of one check call per day, prior to 10:00am, each day that Carrier is in possession of this shipment; and - Arrival at and departure from Receiver(s) within thirty (30) minutes of occurrence.

6.

For any problems or issues after regular business hours or over the weekends, please contact C.H. Robinson at (888) 278-9441.

7.

For this shipment, Carrier agrees it shall be in possession of relevant and applicable cargo insurance coverage in an amount sufficient to cover the loss or damage of the cargo being transported. Carrier's cargo insurance policy must not exclude from coverage any commodities or cargo carried on this booking. If Carrier's cargo insurance policy contains a schedule of covered vehicles or equipment, Carrier will not transport any cargo on this booking using a vehicle and/or equipment that is not listed as scheduled on Carrier's cargo insurance policy.



BILL OF LADING

Print 12/5/2023

SHIP FROM	SHIPPING INFO
Name: Tuffy's Pet Foods, Inc.	Shipped Date: 12/5/2023
Address: 245 1st Ave N	Carrier Name: Royal 3 755
City/State/Zip: Perham, MN 56573	Trailer #: 242143
	Seal Number(s): 0062312

SHIP TO	FREIGHT INFO
Name: GDM DENS LLC	SCAC:
Address: 4491 State Route 14A	PRO #:
City/State/Zip: DUNDEE, NY 14837	
CID #: 14304*10	

THIRD PARTY FREIGHT CHARGES BILL TO	FREIGHT CHARGE TERMS
Name:	Freight charges are prepaid unless marked otherwise
Address:	Prepaid _____ Collect _____ 3rd Party _____ PFS _____
City/State/Zip:	

Special Instructions:

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER #	ORDER-SHIP	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)
GDM 112923	T683624	33	43,905.52	Y N

CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			NMFC #	CLASS
33	PA	1,082.00	Pieces	42,255.52	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		
33	PA		Pieces	1,650.00		PALLETS	
33		1,082.00		43,905.52		GRAND 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 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 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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.

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

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.


12/5/2023

Trailer Loaded:	Freight Counted:
<input checked="" type="checkbox"/> By Shipper	<input checked="" type="checkbox"/> By Shipper
<input type="checkbox"/> By Driver	<input type="checkbox"/> By Driver/pallets said to contain
	<input type="checkbox"/> By Driver/Pieces
<input checked="" type="checkbox"/> No Pest Infestation	<input checked="" type="checkbox"/> Trailer clean/Good condition: Padlock Witness
<input checked="" type="checkbox"/> No Trailer Odor	<input checked="" type="checkbox"/> Trailer swept clean

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


12/5/2023

BILL OF LADING

Print 12/5/2023

Page 1

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City/State/Zip: Perham, MN 56573	Trailer #: 242143
	Seal Number(s): 0062312

SHIP TO	FREIGHT INFO
Name: GDM DENS LLC	SCAC:
Address: 4491 State Route 14A	PRO #:
City/State/Zip: DUNDEE, NY 14837	
CID #: 14304*10	

THIRD PARTY FREIGHT CHARGES BILL TO	FREIGHT CHARGE TERMS
Name:	Freight charges are prepaid unless marked otherwise
Address:	Prepaid _____ Collect _____ 3rd Party _____ PFS _____
City/State/Zip:	

Special Instructions:

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER #	ORDER-SHIP	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)
GDM 112923	T683624	33	43,905.52	Y N

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	COMMODITY DESCRIPTION	LTL ONLY		
QTY	TYPE	QTY	TYPE			NMFC #	CLASS	
33	PA	1,082.00	Pieces	42,255.52	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			
33	PA		Pieces	1,650.00		PALLETS		
33		1,082.00		43,905.52		GRAND TOTAL		

Zosser M 12-7-23

<p>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:</p> <p>The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.</p>	<p>COD Amount: \$ _____</p> <p>Fee Terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/></p> <p style="text-align: center;">Customer check acceptable <input type="checkbox"/></p>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

<p>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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.</p>	<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p>	<p style="text-align: center;">CARRIER SIGNATURE / PICKUP DATE</p> <p>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.</p> <p style="text-align: right; font-size: 1.5em; font-family: cursive;">jd</p> <p style="text-align: right;">12/5/2023</p>
<p>SHIPPER SIGNATURE/DATE</p> <p>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.</p> <p style="font-size: 1.5em; font-family: cursive;">Vano</p> <p style="text-align: right;">12/5/2023</p>	<p>Trailer Loaded:</p> <p><input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Driver</p> <p><input type="checkbox"/> By Driver</p>	<p>Freight Counted:</p> <p><input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain</p> <p><input type="checkbox"/> By Driver/Pieces</p> <p><input checked="" type="checkbox"/> No Pest Infestation <input checked="" type="checkbox"/> Trailer clean/Good condition Padlock Witness</p> <p><input checked="" type="checkbox"/> No Trailer Odor <input checked="" type="checkbox"/> Trailer swept clean</p>