

**Bill to:**

WORLDWIDE EXPRESS OPERATIONS LLC
2323 Victory Ave Ste 1600,
Dallas,
TX,
75219

Invoice Date: 12/20/2023

Invoice #: 828717

Terms: NET 30

Due Date: 01/20/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/18/2023		1801 N 36th St, Grand Forks, ND, USA - 489 West Taylor Road, Romeoville, IL, USA			
			1	\$19,999.00	\$19,999.00

TOTAL
\$19,999.00

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**

PRO # 828717

Rate Confirmation

12/15/23 17:22:23 (EST)



WORLDWIDE EXPRESS AND UNISHIPPERS

2700 COMMERCE ST SUITE 1500
DALLAS TX 75226F
R
O
MJOEL JUSTICE
(888) 956-7447
(888) 804-6421 (f)
joel.justice@wwex.comC
A
R
R
I
E
RROYAL3 INC
(630) 485-7370 (p) Att: SAM
(630) 485-6980 (f)
MC # 944686 Truck # 727
DOT 2828543 Trailer # W94925
Driver SIMON Cell # (786) 865-8573

Size & Type: 53' VAN

Pieces: 30

DECLARED VALUE \$100000.00

Description: CABOT MAC N CHEESE

Weight: 38000

Miles: 732

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1999.00	PO# 1041/DEL REF#12192308 CABOT SERIOUSLY SHARP MAC & CHS. MACROPOINT REQUIRED // ANY SIGN OF PARTIALLING OR NON-TRACKING WILL RESULT IN A RATE REDUCTION// DEL CONF#12072311
TOTAL RATE	1999.00	

PICK 1

PHILADELPHIA MAC
1801 N 36TH ST.
GRAND FORKS ND 58203
Hours : ASAP-1300Appointment 12/18/23 @ 10:00
Appt Notes: ONLY AVAILABLE APPT
Seal # 786 865 8573
Ref # PO# 1041

STOP 1

RJW GROUP
489 W TAYLOR ROAD
ROMEIOVILLE IL 60446
Hours : 0800-1500
Phone/Contact: (630) 424-2494Appointment 12/19/23 @ 08:30
Seal # 786 865 8573
Ref # 12192308

Please reference additional page for requirements and details.
Send available equipment emails to trucklist@wwex.com

Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 828717

must appear on all Invoices

To be eligible for Accessorials / Incidentals, driver must:

- Be checked in to shipper **OR** receiver by the appointment time
- Submit all proof of detention, accessorial, incidentals within 24-48 hours of delivery.
- ***Carrier must accept location tracking via an approved visibility technology (confirm with broker)***

Detention:

- Carrier must be on time for pickup/delivery.
- Detention accrual begins 2 hours after appointment time at shipper/receiver IF:
 - Carrier must notify Broker after **60** minutes of waiting.
 - Provide time stamped BOL within 48 hours of delivery.
- Detention Rate - **\$40/hr** after 2 hours. Max \$200 detention per stop.

Layover, Truck Order Not Used (TONU):

- Carrier must contact Broker to request.
- Delays or cancellations must be confirmed by Broker
- Layovers: \$200 Dry Van or \$250 Running Reefers.
- TONU: \$200


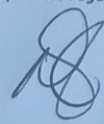
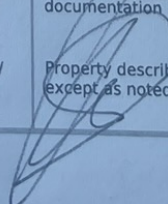
Submitting Payments:

- Email Invoice, Rate Confirmation, Proof of Delivery & Receipts to CarrierAP.Invoices@wwex.com and **MUST** include the word **INVOICE** in the subject line.
- 5% Quick Pay available upon request
- For Payments question contact Inquiry.CarrierAP@wwex.com or call the Carrier AP Department at 888-860-4030

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Broker's attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. This Carrier Rate Confirmation is a legally binding agreement between Broker and Carrier. No signature is required to enforce any provision of this agreement; rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement and this Carrier Rate Confirmation, the Agreement shall govern and then any terms set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match this Rate Confirmation. Broker does not authorize handwritten or verbal changes to this rate confirmation. If this rate confirmation does not accurately reflect the load terms, Carrier must obtain a revised rate confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in line haul deductions.

Ship Date: 12/18/23

BILL OF LADING Delivery Number : 296711

SHIP FROM Name: Philadelphia Macaroni Company Address: 1801 N 36th Street City/State/ZIP: Grand Forks ND 58203 Delivery #: 296711		Bill of Lading Number: BoL number  (402) 00413470000936096			
SHIP TO Customer Number: 10139 Location# IL0001 Name: VERMONT CHEESE PRODUCTS INC Address: 489 W. TAYLOR ROAD City/State/ZIP: ROMEOVILLE IL 60446 Customer PO #: 1041		Carrier Name: ROYAL LOGISTICS INC Trailer Number: W94925 Seal Number(s): 1040364 Delivery Method: SCAC: ROYF Pro (Tracking) number:			
THIRD PARTY FREIGHT CHARGES BILL TO Name: NA Address: City/State/ZIP:		(9012K) ROYF			
SPECIAL INSTRUCTIONS: Master Bill of Lading number		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading			
CUSTOMER ORDER INFORMATION					
ORDER NUMBER	CUSTOMER'S PO NUMBER	# OF PKGS	WEIGHT	PALLET / SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
1000010925	1041	43 PAL	19,914.3722	Y (N)	
GRAND TOTAL		43 PAL	19,914.3722		
CARRIER INFORMATION				COMMODITY DESCRIPTION	
HANDLING UNIT		PACKAGE		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M (X)
43	PAL	19,914.3722			
GRAND TOTAL		43	19,914.3722		
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 _____ " 0.00				COD Amount: 0.00 Free Terms: Collect <input type="checkbox"/> Prepaid: <input checked="" type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
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, 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.	
SHIPPER SIGNATURE / DATE  This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of U.S. DOT.				Signature Shipper  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 U.S.DOT emergency response date book or equivalent documentation in the vehicle. Property described is received in good order, except as noted. 12/18/23	

Print Date: 12-18-23
Print Time: 15:13:47

Ship Date: 12/18/23

BILL OF LADING Delivery Number : 296711

SHIP FROM
Name: Philadelphia Macaroni Company
Address: 1801 N 36th Street
City/State/ZIP: Grand Forks ND 58203
Delivery #: 296711

FOB ☒

Bill of Lading Number: BoL number



(402) 00413470000936096

SHIP TO
Customer Number: 10139
Name: VERMONT CHEESE PRODUCTS INC
Address: 489 W. TAYLOR ROAD
City/State/ZIP: ROMEOVILLE IL 60446
Customer PO #: 1041

Location# IL0001

FOB ☐

Carrier Name: ROYAL LOGISTICS INC

Trailer Number: W94925

Seal Number(s): 1040364

Delivery Method:

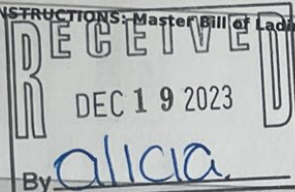
SCAC: ROYF

Pro (Tracking) number:

THIRD PARTY FREIGHT CHARGES BILL TO

Name: NA
Address:
City/State/ZIP:

SPECIAL INSTRUCTIONS: Master Bill of Lading number



SUBJECT TO CREDIT AND INSPECTION

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

Prepaid ☐ Collect ☒ 3rd Party ☐

☐ Master Bill of Lading with attached underlying Bills of Lading

ORDER NUMBER	CUSTOMER'S PO NUMBER	# OF PKGS	WEIGHT	PALLET / SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
1000010925	1041	43 PAL	19,914.3722	Y (N)	

GRAND TOTAL 43 PAL 19,914.3722

HANDLING UNIT		PACKAGE		CARRIER INFORMATION		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M (X)	Commodities requiring 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		NMFC#	CLASS
43	PAL	43	PAL	19,914.3722					

GRAND TOTAL 43 19,914.3722

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 " 0.00

COD Amount: 0.00

Free 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, 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.

Signature Shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of U.S. 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 has the U.S.DOT emergency response date book or equivalent documentation in the vehicle.

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

12/18/23