



**Bill to:**  
Backhaul Direct  
,  
,  
,

Invoice Date: 12/24/2023  
Invoice #: 1122089  
Terms: NET 30  
Due Date: 01/24/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/22/2023		105 Washington Avenue, Wyandotte, OK, USA - 30800 County Road 49, Loxley, AL, USA			
			1	\$2,000.00	\$2,000.00

<b>TOTAL</b>
\$2,000.00

**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**



12/21/2023 16:40 PM

**Backhaul Direct Carrier Shipment Confirmation - Load # 1122089**

**Please have the driver call (317) 682-6009, check in with Load # 1122089  
to obtain load requirements prior to arriving at Shipper.**

**Text (317) 682-6009 to submit all shipping-related documents once your driver(s) have safely arrived at the destination. WE WILL NEVER ASK, DEMAND, REQUIRE OR EXPECT YOU TO HAVE YOUR DRIVER TEXT, READ AN EMAIL, OR REPLY TO ANY ELECTRONIC MESSAGES WHILE THE DRIVER IS DRIVING THE TRUCK.**

Carrier: BRZ, MC#:86875		BHD Rep: Thomas Armstrong			
Contact: Luke x 708.852.5668		Phone: (317) 974-9119			
Carrier Phone: 7083035150		Fax: (317) 974-9120			
Carrier Fax:		Email: tarms@backhauldirect.com			
Carrier Email: blake@rtbrz.com					
Equipment Type:	Dry Van	Commodity:	Paper Bags	Temp Control:	No
Min. Trailer Size:	53	Quantity:	540	Temp:	
Weight:	19,980 lbs.	Type:	Piece	Hazmat:	No
Pickup #:	LOX-137229/SO0284295	B.O.L. #:	BOLND39667122	P.O. #:	CM30034162
PRO #:					
Pickup	AJM PACKAGING CORPORATION	Pickup Date:	12/22/2023	Comments:	
	105 WASHINGTON AVENUE	Pickup Time:	12:00		
	Wyandotte, OK 74370	Dr. Work:	No Touch		
	() -	Pickup #:	SO0284295		
	Commodity	Quantity	Type	Weight (lbs.)	PO #
	LOX-137229-20231204	540	Piece	19,980	LOX-137229
Delivery	LOXLEY	Delivery Date:	12/24/2023	Comments:	
	30800 COUNTY RD 49	Delivery Time:	04:00		
	Loxley, AL 36551	Dr. Work:	No Touch		
	() -	Pickup #:			
	Commodity	Quantity	Type	Weight (lbs.)	PO #
	LOX-137229-20231204	540	Piece	19,980	LOX-137229

**Customer Rate Confirmation Notes**

## Backhaul Direct Carrier Shipment Confirmation - Load # 1122089

\*\*\*\*DRIVER MUST TAKE PICTURES OF PRODUCT IN TRAILER BEFORE LEAVING SHIPPER AND AGAIN IMMEDIATELY ONCE DOCKED AT RECEIVER \*\*\*\*

\*\*\*\*DO NOT ACCEPT OR PICK UP THIS LOAD UNLESS YOU CAN DELIVER ON TIME. \*\*\*\*

\*\*\*\*\*LATE DELIVERIES WILL BE CONSIDERED A BREACH OF CONTRACT AND SUBJECT TO A REDUCTION IN RATE FOR SERVICES PERFORMED. \*\*\*\*

\*\*\*\*DRIVER COUNT REQUIRED\*\*\*\*

\*\*\*\*SHIPPER SEAL DOES NOT ALLEVIATE DRIVER COUNT REQUIREMENT\*\*\*\*

\*Swing-door food grade trailer required

\*If driver is not allowed on the dock at shipper or receiver contact Backhaul Direct immediately and have facility mark it on BOL

\*Do not leave shipper if driver is not allowed on the dock

\*Driver must ensure freight is secured and in excellent condition with load bars and/or straps before leaving shipper

\*If there are any concerns about condition of freight or security of freight, do not leave shipper and contact Backhaul Direct immediately with pictures

\*Follow shipper BOL for reefer temperature and verify with Backhaul Direct

\*Trailer must be pre-cooled and run continuously

\*Driver must pulp product to verify correct temperature

\*Every load has a pre-approved lumper amount at delivery

\*Driver must ensure receiving personnel put both in and out times on receiver stamp on BOL to charge for detention. Driver handwritten times on BOL are not accepted by customer.

\*Driver must explain the necessary loading arrangement when checking in with each shipper and ensure there is enough room for all pallets before leaving each stop when making multiple pickups. Driver must call Backhaul Direct confirming pallet arrangement before leaving each stop. Failure to follow this procedure may require trailer to be re-worked at carrier costs. If product is forced to be cut if driver does not follow this procedure, carrier may be responsible for costs involved with delivering cut product.

\*Driver cannot skip pickups or purchase orders without authorization from Backhaul Direct. Backhaul Direct's recovery cost of missed pickups or purchase orders may be deducted from carrier linehaul if driver does not follow this procedure. Failure to get authorization from Backhaul Direct immediately or after hours does not equal authorization to skip stops.

---

### Additional Load Comments

PU#: SO0284295

PRE-APPROVED LUMPER AMOUNT: 75.00

\*\*DRIVER MUST ENSURE EACH SHIPPER LEAVES ENOUGH ROOM FOR PRODUCT AT OTHER PICKUPS BEFORE LEAVING EACH STOP. SOMETIMES THIS MAY REQUIRE PINWHEELING OR LOADING PALLETS SIDEWAYS. DRIVER MUST CONTACT BACKHAUL DIRECT BEFORE LEAVING EACH STOP CONFIRMING HE HAS NECESSARY SPACE FOR OTHER STOPS. FAILURE TO FOLLOW THIS PROCEDURE MAY REQUIRE TRUCK TO BE RE-WORKED AT CARRIER COSTS. IF PRODUCT IS FORCED TO BE CUT IF DRIVER DOES NOT FOLLOW THIS PROCEDURE, CARRIER MAY BE RESPONSIBLE FOR COSTS INVOLVED WITH DELIVERING CUT PRODUCT.\*\*

CARRIER MUST VERIFY AND ADHERE TO EQUIPMENT AND TEMP REQUIREMENTS FROM SUPPLIER Pallets: GMA NO EXCHANGE

Pallets: GMA NO EXCHANGE

---

### NVOCC: 02780NF

**Directions:** Any directions given by Backhaul Direct, LLC, ("BHD") are for informational purposes only. Carrier must choose the specific route and confirm that it can safely and lawfully provide the services being requested of it.

#### Other Terms:

1. Any additional charges that arise during Carrier's performance of the services on behalf of BHD, must be approved by BHD prior to or while they are occurring, or they will not be reimbursed. All supporting documents and proof must be submitted to BHD within 72 hours after BHD approval, otherwise reimbursement may be delayed or denied. Potential Detention must be communicated to BHD in writing within 30 minutes of its occurrence, otherwise it will be denied.
2. Unless otherwise agreed upon, Carrier may not co-mingle other shipments.
3. All rates are in USD, unless specified otherwise. The Total Rate to Carrier includes any and all charges for the services being performed.
4. Carrier must notify BHD immediately upon discovery of any potential/actual cargo issues in writing to [claims@backhauldirect.com](mailto:claims@backhauldirect.com). Carrier may not dispose of any cargo without the prior written consent of BHD. Failure to follow these procedures may result in a claim.
5. Carrier acknowledges and agrees that it has full power and authority to bind its employees, agents, subcontractors to these terms and conditions. Carrier shall require that its employees, agents or subcontractors will refrain from engaging in any reckless or dangerous activities, including but not limited to

## Backhaul Direct Carrier Shipment Confirmation - Load # 1122089

the downloading of any application/software or communicating to any third-party in any way that could cause them to be distracted. Any requests by BHD or its customers to track the location of any shipment through GPS or other electronic means, is done so with the full knowledge and permission of Carrier's employees, agents and subcontractors.

6. The terms and conditions herein amend any previously agreed upon terms and conditions between the parties. Where no conflict exists between the terms and conditions herein and any previously agreed upon terms and conditions, the previously agreed upon terms and conditions will be controlling. Where a conflict does exist between the terms and conditions herein and any previously agreed upon terms and conditions between the parties, the terms and conditions herein will be controlling. Indiana law will govern the interpretation and enforcement of these provisions exclusively, without regards to conflicts of law principles, unless preempted by Federal Law. The courts sitting in Marion County, IN will have exclusive jurisdiction over the resolution of any action taken by either party to enforce the terms herein. The prevailing party will be entitled to monetary damages, injunctive relief, its attorney fees (including in-house legal fees) and any other remedies provided by the court.

Settlement Details					
Type	Description	Quantity	Rate	Charge Type	Amount
Linehaul		1.00	\$2,000.00	Flat Rate	\$2,000.00
				<b>Total Rate to Carrier</b>	<b>\$2,000.00</b>

To ensure prompt payment, please include the following:

1. Invoice with Carrier's Invoice #
2. Signed Proof of Delivery
3. Signed Carrier Rate Confirmation
4. Any backup (receipts) for any approved Accessorial Charges. .
5. Restacks/Reworks must have pictures.
6. Preferred method of sending in invoices = [invoice@backhauldirect.com](mailto:invoice@backhauldirect.com)
7. For all other inquiries, please email [accounting@backhauldirect.com](mailto:accounting@backhauldirect.com)

**Send Invoice To:**

Backhaul Direct, LLC  
10194 Crosspoint Blvd, Ste 300  
Indianapolis, IN 46256  
(800) 518-1664 x 5  
[invoice@backhauldirect.com](mailto:invoice@backhauldirect.com)

Carrier, please complete the following information (please print clearly)

Driver Name \_\_\_\_\_  
Driver Phone \_\_\_\_\_

Empty Location \_\_\_\_\_  
Empty Time \_\_\_\_\_

Name \_\_\_\_\_  
Signature Luke Miche


Title \_\_\_\_\_  
Date \_\_\_\_\_



Date: 12/22/2023 11:45 AM

## BILL OF LADING

Page 1 of 1

<b>SHIP FROM</b> Name ..... MDRO Warehouse Address ..... C/O AJM Packaging (Joplin) 105 Washington Avenue Wyandotte, OK 74370 SID# ..... SH0417756 FOB: <input checked="" type="checkbox"/>		<b>Bill of lading number :</b> 00769550002842956 Order number: SO0284295 TRLN318751  00769550002842956	
<b>SHIP TO</b> Name ..... ALDI LOXLEY Delivery address ..... 30800 Country Road 49 Loxley, AL 36551 CID# ..... 10002792 - ALDI LOXLEY FOB: <input type="checkbox"/>		Carrier name ..... Backhaul Direct Seal numbers ..... f2469775 Trailer number ..... w94924	
<b>BILL THIRD-PARTY FREIGHT CHARGES TO:</b> Name ..... Address ..... Special instructions: Consignee PO: LOX-137229		Del. Date 12/22/2023 Del. Time 12:00:00 Conf# ..... SCAC BHDR Pro Number ..... Freight charge terms Prepaid _____ Collect <input checked="" type="checkbox"/> Third party _____ <input type="checkbox"/> Master bill of lading: with attached Underlying bills of lading <input type="checkbox"/> Pallet Exchange	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	Weight	PALLET/SLIP	ADDITIONAL SHIPPER INFO
137229	540	19,980.00	✓	✓
			✓	✓
			✓	✓
GRAND TOTAL	540	19980		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGES		WEIGHT	H.M.	COMMODITY DESCRIPTION	NMFC#	Class
QTY.	TYPE	QTY.	TYPE					
30.00	SLIP	540	BA	19,980.00		HB65143CAL: 1/7 65# NMF HB-300 1C/4S (IT'S AN ALDI THING.)	153900 Sub 10	65
30		540		19980		GRAND TOTAL	20040	PLT/Tare Weight 60

 "Product Essential for Supermarket & Food Manufacturing distribution". ++++++  
 ++++++  
 ++++++

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, and to all applicable state and federal regulations.

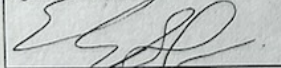
Subject to Section 7 of Conditions of applicable Bill of Lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

AJM Packaging

Signature

Shipper

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in perfect condition for transportation according to the applicable regulations at the DOT.



## Trailer loaded

☒ By shipper☐ By driver


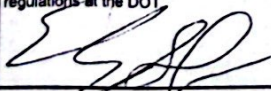
## Freight counted

☐ By shipper☐ By driver/Pallets said to contain☒ By driver/Pieces

CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges receipt of packages and 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.

Attention Driver: This shipment is Shipper load and Driver count. You are responsible for an accurate count and load inspection at the origin and destination facilities. The carrier is liable for any average, shortage and damage on this load. AJM Packaging will not be responsible for any unloading/accessorial charges unless they are authorized by our Corporate Traffic Department. Prior to assisting in any unloading, you must call 248-901-0040, Ext. 225, 235, 237. Driver cannot break seal. Carriers must call and schedule delivery appointments a minimum of 72 hours prior to arrival at the consignee. This shipment was tendered to the carrier sorted and segregated as to the quantity, size pack and description.



<b>SHIP FROM</b> MDRO Warehouse C/O AJM Packaging (Joplin) 105 Washington Avenue Wyandotte, OK 74370 SID# SH0417756 FOB: <input checked="" type="checkbox"/>		<b>Bill of lading number :</b> 00769550002842956 Order number: SO0284295 <b>TRLN318751</b>  00769550002842956								
<b>SHIP TO</b> Name: ALDI LOXLEY Delivery address: 30800 Country Road 49 Loxley, AL 36551 CID# 1002792		<b>Carrier name :</b> Backhaul Direct <b>Seal numbers :</b> f2469775 <b>Trailer number :</b> w94924 Del. Date: 12/22/2023      Del. Time: 12:00:00      Conf#:								
The load has been inspected for evidence of infestation, cleanliness and odors of the trailer. The product has been inspected for evidence of tampering, damage and quantity verification.		<b>THIRD-PARTY FREIGHT CHARGES TO:</b> Name: _____ Address: _____ Driver Signature: _____ Gate Pass: _____ Date: 12-24-23 Special Instructions: _____ Consignee PO: LOX-137229 Check In (Guard): 1000pm Appointment Time: 400 Unloaded & Signed Out: 5:09								
CUSTOMER ORDER INFORMATION										
CUSTOMER ORDER NUMBER	# PKGS	Weight	PALLET/SLIP	ADDITIONAL SHIPPER INFO						
137229	540	19,980.00								
GRAND TOTAL		540	19980							
CARRIER INFORMATION										
HANDLING UNIT		PACKAGES		WEIGHT	H.M.	COMMODITY DESCRIPTION	NMFC#	Class		
QTY.	TYPE	QTY.	TYPE							
30 00	SLIP	540	BA	19,980.00		HB65143CAL:1/7 65# NMF HB-300 1C4S (IT'S AN ALDI THING.)	153900 Sub 10	65		
30		540		19980		GRAND TOTAL	20040	PLT/Tare Weight 60		
"Product Essential for Supermarket & Food Manufacturing distribution".+++++ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>					COD Amount \$ _____ NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706©(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.					Subject to Section 7 of Conditions of applicable Bill of Lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. AJM Packaging      Shipper Signature _____					
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in perfect condition for transportation according to the applicable regulations at the DOT. 					Trailer loaded <input checked="" 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 checked="" type="checkbox"/> By driver/Pieces		CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges receipt of packages and 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.	
Attention Driver: This shipment is Shipper load and Driver count. You are responsible for an accurate count and load inspection at the origin and destination facilities. The carrier is liable for any overage, shortage and damage on this load. AJM Packaging will not be responsible for any unloading/accessorial charges unless they are authorized by our Corporate Traffic Department. Prior to assisting in any unloading, you must call 248-901-0040, Ext. 225, 235, 237. Driver cannot break seal. Carriers must call and schedule delivery appointments a minimum of 72 hours prior to arrival at the consignee. This shipment was tendered to the carrier sorted and segregated as to the quantity, size pack and description.										