

**Bill to:**

INTEGRATED CONNECTION, LLC
1501 BOYSON SQUARE DR STE# 101,
Hiawatha,
IA,
52233

Invoice Date: 01/10/2024

Invoice #: #11757725

Terms: NET 30

Due Date: 02/10/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/06/2024		500 North Sara Road, Oklahoma City, OK 73127 - 115 Logistics Drive, Suite A Building 100, Lot LA, Shoemakersville, PA 19555			
			1	\$2,700.00	\$2,700.00
		other	1	\$1,500.00	\$1,500.00

TOTAL
\$4,200.00

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

TRUCKLOAD RATE CONFIRMATION

Integrated Connection (TSM)

306 6th Ave SE

CEDAR RAPIDS, IA 52401

(319) 363-1235

**INTEGRATED
CONNECTION**

Your Worldwide Logistics Solution

Carrier Name: ROYAL3 INC**Broker:** DANIELLE**Ready Date:** 1/6/2024**Date Needed:** 1/8/2024**Service Level:** Normal**Shipper Information:****Name:** OKLAHOMA CITY**Address:** 500 NORTH SARA ROAD

OKLAHOMA CITY, OK 73127

Load #: 117577725**Customer PO:** 2549545**Shipper Ref:** PU#35297075**Equipment Type:** 53 ft Van | Dry**Contact:****Phone:****Ready Time:** 3:00 AM -

3:00 AM

Consignee Information:**Name:** NIAGARA N04 - SHOEMAKERSVILLE PA**Address:** 115 LOGISTICS DRIVE, SUITE A

BUILDING 100, LOT 1A

SHOEMAKERSVILLE, PA 19555

Contact:**Phone:****Close Time:** 12:01 AM -

11:59 PM

Handling Units	Package Type	Pieces	HAZMAT	List of Items	Total Weight
1	Pallet	2,232		ITEMS	13,884

PICKUP INSTRUCTIONS:**DELIVERY INSTRUCTIONS:****Rate:** USD \$2,700.00**TOTAL:** USD \$2,700.00

This confirmation is for exclusive truck and guarantee truck service. If there are any problems or delays carrier must call 1-319-363-1235 24/7 to avoid any rate reduction - carrier/driver is to provide verbal POD upon delivery and hard copy POD within 24 hours The confirmation

governs the movement of the above-referenced freight as of the specified and hereby amends, is incorporated by reference and becomes a part of the certain transportation contract by and between "Broker" and "Contract carrier". Carrier Agrees to sign the confirmation and return it to the broker via FAX and carrier shall be conclusively presumed and compensatory that the freight would not have been tendered to Carrier at higher rates and that not shipments handled under such rates will subsequently be subject to a later claim for undercharges. IF AGREED SERVICES ARE FULFILLED, RATES ARE NOT NEGOTIABLE. Carrier is responsible for all delivery appointments.

The undersigned accepts the referenced shipment on behalf of the carrier and acknowledge as correct the information contained herein, the carrier agrees to the terms of the Master agreement previously executed between our companies. Invoicing by the carrier and payment by Integrated Connection (TSM), constitutes acceptance of this agreement and creates a valid contract for carriage shipment.

When loading, the driver must count and inspect his/ her load. The Driver / Carrier is responsible for piece count and condition of load at time of delivery. **For payment of freight charges, we must receive original and signed Bill of landing and Proof of Delivery with a carrier invoice.** Payment will be made 30 days after all required paperwork is received at Integrated Connection (TSM), facilities. We are not responsible for Overweight. If Dimensions, Weight, Quantity or type of commodity are different than those consigned in our Load Confirmation Agreement, the carrier or Broker contracted MUST notify Integrated Connection (TSM) Before picking up and request a WRITTEN AUTHORIZATION. Integrated Connection (TSM) will not pay any extra charges without AUTHORIZATION.

Please sign and return via fax (319) 365-9011 or email to Cargo@IC-L.com

*****Send Invoices to: Accountspayable@IC-L.com*****

Carrier Signature: _____ **Driver Name:** _____

MC#: _____ **Driver Phone#:** _____

STRAIGHT BILL OF LADING - SHORT FORM - Not Negotiable

Ship From:
Niagara Bottling - OKC
500 N. Sara Rd.
Oklahoma City, OK 73127
SID#: 2285

Ship To:
Niagara Bottling - N04
115 Logistics Drive, Suite A Building 100 Lot 1A
Shoemakersville, PA 19555
Customer Phone #
CID#:

Bill of Lading Number: 35297075
Date and Time: 1/6/2024 3:00:00 AM
Customer PO#: 2549545
Reference: OKC TRANSFER - N04
Delivery: 35297075
Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

Carrier Details
CARRIER NAME: INTEGRATED CONNECTION LLC
Trailer/Container Number: H03425
SCAC: (2 to 4 Carrier ID)
Pro number:
POD INSTRUCTIONS: Carrier FAX TO: (Niagara provide phone #) Or Email to: (Niagara provide email address)

QTY	Shipped	# Pallets	Product #	Description	Weight	Additional Shipper Info
2160	(THO)	72	CNP28TBLKES	ESSENTIA BLACK CAPS	33,569	
					33,569 lbs	TOTALS

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (Niagara provide phone#)

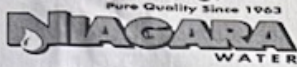
CARRIER SIGNATURE / PICKUP DATE
[Signature]
Print Name: X Devin Anderson
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

CARRIER
If the 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 the shipment without payment of freight and all other lawful charges.
Consignor Signature: _____ Date: _____
LTL ONLY
COD Amount: \$ _____ NMFC # _____ CLASS _____
Driver Name _____ Driver Initial: PA
Scale: 470205
Loader Signature: MC

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 guidebook or equivalent documentation in the vehicle.

MB

Niagara Bottling, LLC



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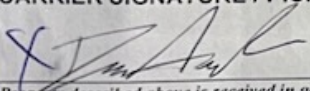
STRAIGHT BILL OF LADING - SHORT FORM - Not Negotiable

BILL OF LADING

Ship From: Niagara Bottling - OKC 500 N. Sara Rd. Oklahoma City, OK 73127 SID#: 2285 FOB: <input type="checkbox"/>		Bill of Lading Number: 35297075 Date and Time: 1/6/2024 3:00:00 AM Customer PO#: 2549545 Reference: OKC TRANSFER - N04 Delivery: 35297075 Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3 rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>	
Ship To: Niagara Bottling - N04 115 Logistics Drive; Suite A Building 100 Lot 1A Shoemakersville, PA 19555 Customer Phone # CID#: FOB: <input type="checkbox"/>		Receiving Stamp	
Carrier Details CARRIER NAME: INTEGRATED CONNECTION LLC Trailer/Container Number: H03425 SCAC: (2 to 4 Carrier ID) Pro number:		POD INSTRUCTIONS: Carrier FAX TO: (Niagara provide phone #) Or Email to: (Niagara provide email address)	

CUSTOMER ORDER INFORMATION					
QTY Shipped	# Pallets	Product #	Description	Weight	Additional Shipper Info
2160(THO)	72	CNP28TBLKES	ESSENTIA BLACK CAPS	33,569	
				33,569 lbs	TOTALS

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (Niagara provide phone#)

CARRIER			
CARRIER SIGNATURE / PICKUP DATE  Property described above is received in good order, except as noted. Print Name: X Devin Anderson		If the 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 the shipment without payment of freight and all other lawful charges. Consignor Signature _____ Date _____	
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.		COD Amount: \$	LTL ONLY
			NMFC # CLASS
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 guidebook or equivalent documentation in the vehicle.		Facility Checkout Apt Time: 1/6/2024 3:00:00 AM In Time: 1/6/2024 2:50:00 AM Loading Complete: 1/6/2024 3:50:00 AM Out Time: 1/6/2024 3:55:00 AM Driver Name _____ Driver Initial: PA ✓ Seal#: 4702305 ✓ Loader Signature: MC ✓	

MB

New seal#
138/8957

Driver Has dumped load.
Being sent to Rework.
Man
1-8-24.

1-9-24
John Lilling