



Bill to:
WATCO SUPPLY CHAIN SERVICES, LLC
3905 Elliott Ave.,
Springdale,
AR,
72762

Invoice Date: 01/17/2024
Invoice #: 1261830
Terms: NET 30
Due Date: 02/17/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/16/2024		6650 WEST 68TH STREET BEDFORD PARK IL 60638 - 2900 W TRUMAN BLVD JEFFERSON CITY MO 65109			
			1	\$1,900.00	\$1,900.00

TOTAL
\$1,900.00

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

IMPORTANT!

Cargo Security and Supply Chain Protocol

1) Watco Logistics will identify you to our shipper/consignor as the ONLY Carrier allowed to pick up each load at time of booking.

2) Customer and its consignor and consignee will be advised to contact Watco Logistics for instructions prior to loading or accepting any shipment from an unapproved or unnamed third party.

Exhibit A to Broker-Carrier agreement

Carrier warrants that it will follow the procedures set forth herein to ensure security and chain of custody for all shipments.

Note: Watco Logistics will identify you to our shipper/consignor as the ONLY Carrier allowed to pick up each load at time of booking.

Carrier warrants that service will be provided exclusively using equipment which it owns, operates and insures. Carrier will direct its driver to sign shipping documents as evidence of receipt by Carrier and to immediately contact Watco Logistics for instructions if shipping documents are presented which refer to unidentified non-contracted third-party intermediaries or carriers. Carrier understands that this contract supersedes the terms of any shipping document or bill of lading which shall otherwise serve as a receipt for goods only.

Watco Logistics, acting as a Broker, is the sole party responsible for paying freight charges upon receipt of freight charges from the shipper. Carrier understands that failure to comply with this protocol may result in nonpayment of freight charges and other indemnity obligations for breach of warranty.

Note: Customer and its consignor and consignee will be advised to contact Watco Logistics for instructions prior to loading or accepting any shipment from an unapproved or unnamed third party.

**Watco Supply Chain Services LLC DBA Watco Logistics**621 W Apple Blossom Ave
Lowell, AR 72745Phone: 224-241-8084
After Hours: 224-241-8084
Fax:

Rate and Route Confirmation Load No: 1261830

Branch:	Agent 26 - Algonquin IL	CARRIER	
Name:	Brett Lipnisky	Name: RIKI TRANSPORTATION INC.	
Phone:	630-617-1263	Phone: 7083035150	
Assigned To:		Fax:	
Equip. Type:	Van / Size = 53 / Trailer# = LIVE LOAD		
Pieces:	24 pcs.		
Weight:	25320 lbs.		
Dimensions:	48x48x40 in (LxWxH)		
Commodity:	NON HAZ NON STACK CLEANING COMPOUNDS		
Cargo Value:	100000		

Customer Pick-Up and Reference			Consignee Delivery and Reference		
Pick-Up: 1	Shipper:	TRI-K C/O RIDER	Stop: 99	Consignee:	UNILEVER/ JEFFERSON CITY
Pick-Up No.: 72262	Address:	6650 WEST 68TH STREET	Del. No.:	Address:	2900 W TRUMAN BLVD
<u>Hours/Appt.</u>	City/St/Zip:	BEDFORD PARK IL 60638	<u>Hours/Appt.</u>	City/St/Zip	JEFFERSON CITY MO 65109
Date: 2024-01-16	Phone:	7084969007	Date: 2024-01-16	Phone:	573-893-3040
Time: 1300 1600	PO#:	Pieces = 24 Weight = 25320	Time: 2000 2359	PO#:	Pieces = 24 Weight = 25320
	4505551868			4505551868	
	PT1			PT1	
Notes:			Notes:		

Carrier Details & Revenue						
Carrier Details		Carrier Revenue				
Name:	RIKI TRANSPORTATION INC.	Item	Type	Quantity	Rate	Amount
DBA:	BRZ	Line Haul	Flat	1	1900.00	1900.00
Address:	8225 Leclair Ave	TOTAL				\$ 1900.00
City:	Burbank					
State:	IL					
Zip:	60459					

Notes:	
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NOTE: TO ENSURE PAYMENT, Watco Supply Chain Services REQUIRES A BILL OF LADING, POD AND THIS RATE CONFIRMATION SHEET BE ATTACHED TO YOUR FREIGHT BILL.

Detention: CARRIER must notify BROKER in advance of any accessorial and obtain a revised rate confirmation showing such accessorial from BROKER. If CARRIER arrives on time for the agreed pickup or delivery, agreed upon detention charges will apply after free hours as agreed to in Broker/Carrier agreement. Failure to notify BROKER and obtain a revised rate confirmation will result in non-payment of accessorial.

ALL FREIGHT BILLS MUST BE SENT TO:

Attn: Accounting
P.O. Box 16920
Jonesboro, AR 72403
870-336-1704
or **Email:** supplierinvoicing@watco.com
** All quick pay invoices need to be sent to quickpay@watco.com

Driver Name: _____ Phone #: _____ Tractor #: _____ Trailer #: _____

Carrier Signature: John Djordjevic Date: _____

Page 2

Bill of Lading Number:

CUSTOMER ORDER NUMBER

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SKID Y or N	ADDITIONAL SHIPPER INFO
73492	16		Y	LOT 234002200009
73492	39		Y	LOT 234002200010
73492	44		Y	LOT 234002200011
73492	3		Y	LOT 234002200012
73492	8		Y	LOT 234002200013
PAGE SUBTOTAL				

CARRIER INFORMATION

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Page 1 of 2

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MAEK

Date: 1-16-2024		BILL OF LADING		Page 1 of 2	
SHIP FROM			Bill of Lading Number: 1261830		
Name: TRI-K C/O RYDER Address: 6650 WEST 68TH STREET City/State/Zip: BEDFORD PARK IL, 60638 SID#: 708-496-9007 TRI-K ORDER 72262 FOB: <input type="checkbox"/>			BAR CODE SPACE		
SHIP TO			CARRIER NAME: RIKI TRANSPORTATION INC		
Name: UNILEVER/ JEFFERSON CITY Location #:			Trailer number:		
Address: 2900 W TRUMAN BLVD			Seal number(s):		
City/State/Zip: JEFFERSON CITY MO, 65109			SCAC:		
CID#: JEFFERSON CITY MO, 65109 FOB: <input type="checkbox"/>			Pro number: 1261830		
THIRD PARTY FREIGHT CHARGES BILL TO:			BAR CODE SPACE		
Name: Watco Address: P.O. Box 16920 City/State/Zip: Jonesboro, AR 72403			Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
SPECIAL INSTRUCTIONS: PO 4505551868 PT1 DELIVER SAME DAY 9-MIDNIGHT TRI-K ORDER 72262			Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3 rd Party XXXX		
			<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading		
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP Y or N	ADDITIONAL SHIPPER INFO
72262		35		Y	LOT 234002200021
72262		36		Y	LOT 234002200022
72262		78		Y	LOT 234002200023
72262		60		Y	LOT 234002200025
72262		59		Y	LOT 234002200026
72262		56		Y	LOT 234002200027
72262		86		Y	LOT 234002200028
72262		25		Y	LOT 234002200029
GRAND TOTAL					
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	WEIGHT	LTL ONLY
22				25320	NMFC # CLASS
				H.M. (X)	
				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 350.	
				NON HAZ PALLETIZED COMPOUND	
				1-17-23	
				RECEIVING STAMP SPACE	
				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:				COD Amount: \$	
*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding per				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 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 <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>				SHIPPER SIGNATURE	
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	
				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>	

Page 2

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CUSTOMER ORDER NUMBER

PKGS

WEIGHT

PALLET/SLIP	
Y	or N

ADDITIONAL SHIPPER INFO

		Y or N		ADDITIONAL SHIPPER INFO
73492	16	Y		LOT 234002200009
73492	39	Y		LOT 234002200010
73492	44	Y		LOT 234002200011
73492	3	Y		LOT 234002200012
73492	8	Y		LOT 234002200013

PAGE SUBTOTAL

CARRIER INFORMATION

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