

**Bill to:**

GLOBALTRANZ ENTERPRISES, INC  
7350 N DOBSON RD STE130,  
SCOTTSDALE,  
AZ,

Invoice Date: 01/20/2024

Invoice #: 4447911

Terms: NET 30

Due Date: 02/20/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/20/2024		168 E. Wingo Rd, Byhalia, MS 38611 - 465 Stateline Road, Southaven, MS 38671			
			1	\$750.00	\$750.00

TOTAL
\$750.00

**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**

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 4447911**  
**Manifest Number:**  
**Movement Number: 6453785**  
**Contact: Jeff Beausejour**  
**Email: jbeausejour@globaltranz.com**  
**Phone:**

**Page 1**

**THIS RATE CONFIRMATION HAS BEEN TENDERED TO, REVIEWED BY AND RATE APPROVED BY:**

ROYAL3 INC  
CHICAGO IL 60638  
MC#: 944686

**Phone:**  
**Fax:**

**REMIT TO INFO:**

Please have Driver call:

Worldwide Express Globaltranz

Email Invoice/POD: TLcarrierDOCS@globaltranz.com

**Trailer Type:** Van (DAT)  
**Door Type:**  
**Weight:** 43766.4  
**Commodity:** Bottled Beverage (Non-Alcoholic)  
**Pieces:** 1200

**Temp:**  
**BOL:** DEL011924404

**Stop Information**

<b>PU 1</b>	<b>Name:</b> Niagara MIS	<b>Date:</b> 01/20/2024 1430
	<b>Address:</b> 168 E. Wingo Rd	01/20/2024 1430
	BYHALIA MS 38611	
	<b>Phone:</b>	<b>Weight</b> 43766.4
	<b>Contact</b>	
	<b>Reference number:</b> CN 0	
	<b>Reference number:</b> DJ 35315965	
	<b>Reference number:</b> DJ 35315966	
	<b>Reference number:</b> DJ 35315967	
	<b>Reference number:</b> DO 35315965	
	<b>Reference number:</b> DO 35315966	
	<b>Reference number:</b> RV NO DRIVER ASSIST	
	<b>Reference number:</b> RV NO DRIVER ASSIST	
	<b>Reference number:</b> PU 35315966	
	<b>Reference number:</b> PU 35315967	
	<b>Reference number:</b> PO DEL011924437	
	<b>Reference number:</b> PO DEL011924464	
	<b>Reference number:</b> PU 35315965	
	<b>Reference number:</b> SCA GELJ	
	<b>Reference number:</b> SUB GELJ	
	<b>Reference number:</b> RV NO DRIVER ASSIST	
	<b>Reference number:</b> DO 35315967	

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 4447911**  
**Manifest Number:**  
**Movement Number: 6453785**  
**Contact: Jeff Beausejour**  
**Email: jbeausejour@globaltranz.com**  
**Phone:**

**Page 2**

**Reference number:** MB NB31238823  
**Reference number:** OQ 17932568  
**Reference number:** OQ 17932572  
**Reference number:** OQ 17932576  
**Reference number:** PO DEL011924404

**Stop Information**  
**SO 2**

Name:	Kroger	Date:	01/20/2024 1800
Address:	7942 Winchester Rd		01/20/2024 2100
	MEMPHIS TN 38125		
Phone:	901-758-3609	Weight	13761.6
Contact	Main		
<b>Reference number:</b>	DJ 35315966		
<b>Reference number:</b>	DO 35315966		
<b>Reference number:</b>	OQ 17932572		
<b>Reference number:</b>	PO DEL011924437		
<b>Reference number:</b>	PU 35315966		
<b>Reference number:</b>	RV NO DRIVER ASSIST		

**Stop Information**  
**SO 3**

Name:	Kroger	Date:	01/20/2024 1800
Address:	3095 Goodman Rd E		01/20/2024 2100
	SOUTHAVEN MS 38672		
Phone:	662-536-3741	Weight	16130.4
Contact	Main		
<b>Reference number:</b>	DJ 35315967		
<b>Reference number:</b>	DO 35315967		
<b>Reference number:</b>	OQ 17932576		
<b>Reference number:</b>	PO DEL011924464		
<b>Reference number:</b>	PU 35315967		
<b>Reference number:</b>	RV NO DRIVER ASSIST		

**Stop Information**  
**SO 4**

Name:	KROGER DSD,025404,SOUTHAVEN,M	Date:	01/20/2024 1800
Address:	465 STATELINE ROAD		01/20/2024 2100
	SOUTHAVEN MS 38671		
Phone:		Weight	13874.4
Contact			
<b>Reference number:</b>	DJ 35315965		
<b>Reference number:</b>	DO 35315965		
<b>Reference number:</b>	OQ 17932568		

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 4447911**  
**Manifest Number:**  
**Movement Number: 6453785**  
**Contact: Jeff Beausejour**  
**Email: jbeausejour@globaltranz.com**  
**Phone:**

**Page 3**

---

**Reference number:** PO DEL011924404  
**Reference number:** PU 35315965  
**Reference number:** RV NO DRIVER ASSIST

---

<b>LOAD MONEY</b>	<b>Base Rate:</b>	\$750.00
	<b>Total Pay:</b>	<div style="border: 1px solid black; padding: 2px;">750.00</div>

---

### Instructions

Niagara MIS - NB31238823

Niagara MIS - Spec Handling: Domestic Spec Service: Temperature Protection

Niagara MIS - Spec Handling: Domestic Spec Service: Temperature Protection

Niagara MIS - DEL011924404

Niagara MIS - DEL011924437

Niagara MIS - DEL011924464

Niagara MIS - NIAGONCA: - FourKites is required on all Niagara shipments - Weight cannot be cut. If any issue with weights (either gross or axle), contact Globaltranz.

- When Carrier is unable to execute delivery within 5 calendar days of the ship date, the product may become adulterated and Carrier will be liable for any resulting freight damage claim.

- Any loads that are RMA'd will need to be returned to specified facility no later than 48 hrs from the time the RMA# has been provided - failure to abide could result in a claim for the product loss. Any loads that are RMA'd need to be returned with a seal and seal number added to the BOL. If the Customer has broken the Seal and they are unable to provide us with one the customer or driver will need to add a lock to secure the load. NO loads will be accepted at ANY shipper with out a Proper Seal or Lock as this is an FDA regulation. If a transload is to occur, it must take place at a food-grade facility.

- If a driver is being detained and delivery is going to be compromised, Globaltranz MUST be notified prior to loading completion or leaving the shipper to confirm the driver will be received.

- Carrier agrees that food that has been transported under conditions that are not in compliance with the shipper's or Globaltranz' instructions, as provided to Carrier by the shipper or Globaltranz, will be considered "adulterated" within the meaning of 21 USC 342(i). Carrier understands that adulterated shipments may be refused at destination without diminishing Carrier's liability in the event of a cargo claim.

Niagara MIS - NIAGONCA: Late Pick Up is the Actual Pick Up Appointment

Kroger - DEL011924437

Kroger - DEL011924464

KROGER DSD,025404,SOUTHAVEN,MS,USA - DEL011924404



---

**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.

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 cancelations must be confirmed by Broker.

Layovers \$200 Dry Van or \$250 Running Reefers.

TONU \$200.

**Submitting Payments:**

Email invoice, Rate Confirmations, Proof of Delivery and Receipts to TLcarrierDOCS@globaltranz.com.

2.5% Quick Pay available upon request.

For Payments question contact TLcarrierREQUEST@globaltranz.com or by calling 224-515-7250.

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 Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Carrier Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce 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 Carrier Rate Confirmation. Broker does not authorize handwritten or verbal changes to this Carrier Rate Confirmation. If this Carrier Rate Confirmation does not accurately reflect the load terms, Carrier must obtain a revised Carrier Rate Confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in line haul deductions.



Date: 01/20/24 01:58 PM CST

**BILL OF LADING**

Page 1 of 3

SHIP FROM		Bill of Lading Number: 17932572	
Name:	MIS	Master Bill of Lading Number:	55815315
Address:	168 E Wingo Road	Customer PO#:	DEL011924437
City/State/Zip:	Byhalla, MS 38611	Reference #:	NO DRIVER ASSIST
SID#:	55815315	Delivery #:	35315966
	FOB: <input type="checkbox"/>	Shipment #:	55815315

SHIP TO		CARRIER DETAILS	
Name:	KROGER DSD	Carrier Name:	GLOBALTRANZ ENTERPRISES, INC.
Location #:		Address:	2211 Old Earhart Road Suite 100
Address:	7942 WINCHESTER ROAD	City/State/Zip:	Ann Arbor MI 48105
City/State/Zip:	MEMPHIS, TN 38125	SCAC:	GELJ Pro number:
CID#:		Trailer number:	W97037
Customer Phone:		Seal Number	3252369

Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To : Orders@niagarawater.com

**Customer Order Information**

Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
168	4032	168	2	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	4738 lbs
192	7680	192	4	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	9024 lbs

**Totals**

360	11712	360	6					13762 lbs
-----	-------	-----	---	--	--	--	--	-----------

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

**CARRIER****CARRIER SIGNATURE/PICKUP DATE**

*Larry Thomas*

Property described above is received in good Order, except as noted.

**Print**

Name: Larry Thomas

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.

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 this shipment without payment of freight and all other lawful charges.

Consignor Signature

Date

COD Amount: \$

LTL ONLY

NMFC #

CLASS

0

**FACILITY CHECKOUT**

Appt Time: 01/20/24 02:30 PM CST

Check In Time: 01/20/24 12:25 PM CST

Check Out: 01/20/24 01:58 PM CST

Delivery Time: 01/20/24 06:00 PM CST

Driver Name: Larry Thomas

Driver Initials: *Larry Thomas*

NBL Initials:

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.

**CARRIER INSTRUCTIONS**

Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.



Date: 01/20/24 01:58 PM CST

## BILL OF LADING

Page 2 of 3

<b>SHIP FROM</b>		<b>Bill of Lading Number:</b> 17932576	
Name:	MIS	<b>Master Bill of Lading Number:</b> 55815315	
Address:	168 E Wingo Road	<b>Customer PO#:</b> DEL011924464	
City/State/Zip:	Byhalia, MS 38611	<b>Reference #:</b> NO DRIVER ASSIST	
SID#:	55815315	<b>Delivery #:</b> 35315967	
FOB: <input type="checkbox"/>		<b>Shipment #:</b> 55815315	

<b>SHIP TO</b>		<b>CARRIER DETAILS</b>	
Name:	KROGER DSD	<b>Carrier Name:</b> GLOBALTRANZ ENTERPRISES, INC.	
Location #:		<b>Address:</b> 2211 Old Earhart Road Suite 100	
Address:	3095 GOODMAN ROAD	<b>City/State/Zip:</b> Ann Arbor MI 48105	
City/State/Zip:	SOUTHAVEN, MS 38672	<b>SCAC:</b> GELJ <b>Pro number:</b>	
CID#:		<b>Trailer number:</b> W97037	
Customer Phone:		<b>Seal Number:</b> 3252369	

Freight Charge (freight charges are prepaid unless marked otherwise) Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To: Orders@niagarawater.com

## Customer Order Information

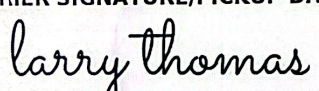
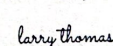
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
192	7680	192	4	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	9024 lbs
252	6048	252	3	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	7106 lbs

## Totals

444	13728	444	7					16130 lbs
-----	-------	-----	---	--	--	--	--	-----------

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

<b>CARRIER</b>		<b>FACILITY CHECKOUT</b>	
<b>CARRIER SIGNATURE/PICKUP DATE</b>  Property described above is received in good Order, except as noted. <b>Print Name:</b> Larry Thomas 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.		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 this shipment without payment of freight and all other lawful charges. <b>Consignor Signature</b> _____ <b>Date</b> _____ <b>COD Amount:</b> \$ _____ <b>LTL ONLY</b> <b>NMFC #</b> 0 <b>CLASS</b> _____	
		<b>Appt Time:</b> 01/20/24 02:30 PM CST <b>Check In Time:</b> 01/20/24 12:25 PM CST <b>Check Out:</b> 01/20/24 01:58 PM CST <b>Delivery Time:</b> 01/20/24 06:46 PM CST <b>Driver Name:</b> Larry Thomas <b>Driver Initials:</b>  <b>NBL Initials:</b> _____	

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.

## CARRIER INSTRUCTIONS

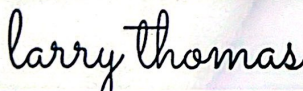
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.



Date: 01/20/24 01:58 PM CST

## BILL OF LADING

Page 3 of 3

<b>SHIP FROM</b>				<b>Bill of Lading Number:</b> 17932568				
Name: MIS				<b>Master Bill of Lading Number:</b> 55815315				
Address: 168 E Wingo Road				<b>Customer PO#:</b> DEL011924404				
City/State/Zip: Byhalia, MS 38611				<b>Reference #:</b> NO DRIVER ASSIST				
SID#: 55815315      FOB: <input type="checkbox"/>				<b>Delivery #:</b> 35315965				
				<b>Shipment #:</b> 55815315				
<b>SHIP TO</b>				<b>CARRIER DETAILS</b>				
Name: KROGER DSD				<b>Carrier Name:</b> GLOBALTRANZ ENTERPRISES, INC.				
Location #:				<b>Address:</b> 2211 Old Earhart Road Suite 100				
Address: 465 STATELINE ROAD				<b>City/State/Zip:</b> Ann Arbor MI 48105				
City/State/Zip: SOUTHAVEN, MS 38671				<b>SCAC:</b> GELJ <b>Pro number:</b>				
CID#:      FOB: <input type="checkbox"/>				<b>Trailer number:</b> W97037				
Customer Phone:				<b>Seal Number</b> 3252369				
<b>Freight Charge Terms:</b>		(freight charges are prepaid unless marked otherwise)		<b>Prepaid</b> <input type="checkbox"/> <b>Collect</b> <input type="checkbox"/> <b>3rd Party</b> <input type="checkbox"/> <b>Customer Pick Up</b> <input type="checkbox"/>				
POD INSTRUCTIONS: Carrier FAX (909) 494-4456    Or Email To : Orders@niagarawater.com								
<b>Customer Order Information</b>								
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
144	5760	144	3	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	6768 lbs
252	6048	252	3	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	7106 lbs
<b>Totals</b>								
396	11808	396	6					13874 lbs
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456					Receiving Stamp:			
<b>CARRIER</b>								
<b>CARRIER SIGNATURE/PICKUP DATE</b>				If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. <b>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</b> Consignor Signature _____ Date _____		<b>FACILITY CHECKOUT</b>		
 <i>Larry Thomas</i> Property described above is received in good Order, except as noted.								
<b>Print Name:</b> Larry Thomas 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.				<b>COD Amount:</b> \$ _____ <b>LTL ONLY</b> <b>NMFC #</b> 0 <b>CLASS</b>		<b>Appt Time:</b> 01/20/24 02:30 PM CST <b>Check In Time:</b> 01/20/24 12:25 PM CST <b>Check Out</b> 01/20/24 01:58 PM CST <b>Delivery Time:</b> 01/20/24 07:02 PM CST <b>Driver Name:</b> Larry Thomas <b>Driver Initials:</b> <i>Larry Thomas</i> <b>NBL Initials:</b> _____		
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.								
<b>CARRIER INSTRUCTIONS</b>								
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.								



Date: 01/20/24 01:58 PM CST

## BILL OF LADING

Page 1 of 3

SHIP FROM		SHIP TO		CARRIER DETAILS	
Name:	MIS	Name:	KROGER DSD	Carrier Name:	GLOBALTRANZ ENTERPRISES, INC.
Address:	168 E Wingo Road	Location #:		Address:	2211 Old Earhart Road Suite 100
City/State/Zip:	Byhalia, MS 38611	Address:	7942 WINCHESTER ROAD	City/State/Zip:	Ann Arbor MI 48105
SID#:	55815315	City/State/Zip:	MEMPHIS, TN 38125	SCAC:	GELJ Pro number:
FOB:	<input type="checkbox"/>	CID#:		Trailer number:	W97037
		Customer Phone:		Seal Number	3252369

<b>Freight Charge Terms:</b> (freight charges are prepaid unless marked otherwise)		Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>	
--	--	--	--

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To : Orders@niagarawater.com

## Customer Order Information

Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
168	4032	168	2	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	4738 lbs
192	7680	192	4	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	9024 lbs

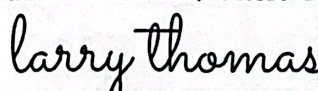
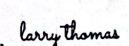
## Totals

360	11712	360	6					13762 lbs
-----	-------	-----	---	--	--	--	--	-----------

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

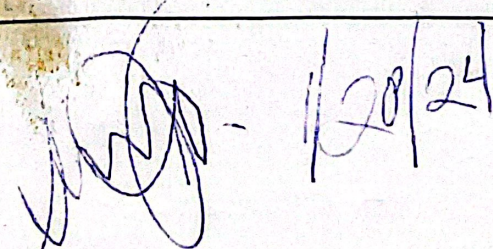
## CARRIER

<b>CARRIER SIGNATURE/PICKUP DATE</b>  Property described above is received in good Order, except as noted.		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 this shipment without payment of freight and all other lawful charges. Consignor Signature _____ Date _____		<b>FACILITY CHECKOUT</b> Appt Time: 01/20/24 02:30 PM CST Check In Time: 01/20/24 12:25 PM CST Check Out: 01/20/24 01:58 PM CST Delivery Time: 01/20/24 06:00 PM CST Driver Name: larry thomas Driver Initials:  NBL Initials: _____	
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 # 0 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.

## CARRIER INSTRUCTIONS

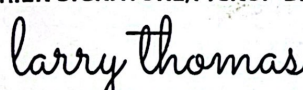
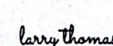
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.

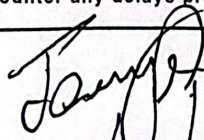




STRAIGHT BILL OF LADING - SHORT FORM - Not negotiable

Niagara Bottling, LLC

Date: 01/20/24 01:58 PM CST		<b>BILL OF LADING</b>		Page 2 of 3				
<b>SHIP FROM</b>			<b>SHIP TO</b>					
Name: MIS Address: 168 E Wingo Road City/State/Zip: Byhalia, MS 38611 SID#: 55815315      FOB: <input type="checkbox"/>			Bill of Lading Number: 17932576 Master Bill of Lading Number: 55815315 Customer PO#: DEL011924464 Reference #: NO DRIVER ASSIST Delivery #: 35315967 Shipment #: 55815315					
Name: KROGER DSD Location #: Address: 3095 GOODMAN ROAD City/State/Zip: SOUTHAVEN, MS 38872 CID#:      FOB: <input type="checkbox"/> Customer Phone:			<b>CARRIER DETAILS</b> Carrier Name: GLOBALTRANZ ENTERPRISES, INC. Address: 2211 Old Earhart Road Suite 100 City/State/Zip: Ann Arbor MI 48105 SCAC: GELJ      Pro number: Trailer number: W97037 Seal Number: 3252369					
<b>Freight Charge</b> (freight charges are prepaid unless marked otherwise) <b>Terms:</b>			Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>					
POD INSTRUCTIONS: Carrier FAX (909) 494-4456    Or Email To : Orders@niagarawater.com								
<b>Customer Order Information</b>								
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
192	7680	192	4	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	9024 lbs
252	6048	252	3	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	7106 lbs
<b>Totals</b>								
444	13728	444	7					16130 lbs
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456						Receiving Stamp:		
<b>CARRIER</b>						<b>FACILITY CHECKOUT</b>		
<b>CARRIER SIGNATURE/PICKUP DATE</b>  Property described above is received in good Order, except as noted.						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 this shipment without payment of freight and all other lawful charges. Consignor Signature _____ Date _____		
Print Name: Larry Thomas 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 # 0      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.						Appt Time: 01/20/24 02:30 PM CST Check In Time: 01/20/24 12:25 PM CST Check Out: 01/20/24 01:58 PM CST Delivery Time: 01/20/24 06:46 PM CST Driver Name: Larry Thomas Driver Initials:  NBL Initials:		
<b>CARRIER INSTRUCTIONS</b>								
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.								

  
 1/20/24



Date: 01/20/24 01:58 PM CST

## BILL OF LADING

Page 3 of 3

## SHIP FROM

Name: MIS  
Address: 168 E Wingo Road  
City/State/Zip: Byhalia, MS 38611  
SID#: 55815315

FOB: ☐

Bill of Lading Number: 17932568  
Master Bill of Lading Number: 55815315  
Customer PO#: DEL011924404  
Reference #: NO DRIVER ASSIST  
Delivery #: 35315965  
Shipment #: 55815315

## SHIP TO

Name: KROGER DSD  
Location #:  
Address: 465 STATELINE ROAD  
City/State/Zip: SOUTHAVEN, MS 38671  
CID#:   
Customer Phone:

FOB: ☐

## CARRIER DETAILS

Carrier Name: GLOBALTRANZ ENTERPRISES, INC.  
Address: 2211 Old Earhart Road Suite 100  
City/State/Zip: Ann Arbor MI 48105  
SCAC: GEJ Pro number:  
Trailer number: W97037  
Seal Number: 3252369

Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To: Orders@niagarawater.com

## Customer Order Information

Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
144	5760	144	3	KRG05L40PDRGP N		05L.DR.KROGER.40P.N.48. GP	001111009855	6768 lbs
252	6048	252	3	KRG05L24PDRGP N		05L.DR.KROGER.24P.N.84. GP	001111049213	7106 lbs

## Totals

396	11808	396	6					13874 lbs
-----	-------	-----	---	--	--	--	--	-----------

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

## CARRIER

## CARRIER SIGNATURE/PICKUP DATE

Larry Thomas

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

Print Name:  
Larry Thomas

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.

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 this shipment without payment of freight and all other lawful charges.  
Consignor Signature \_\_\_\_\_  
Date \_\_\_\_\_

COD Amount: \$

LTL ONLY

NMFC #

0

CLASS

## FACILITY CHECKOUT

Appt Time: 01/20/24 02:30 PM CST  
Check In Time: 01/20/24 12:25 PM CST  
Check Out: 01/20/24 01:58 PM CST  
Delivery Time: 01/20/24 07:02 PM CST  
Driver Name: Larry Thomas  
Driver Initials: Larry Thomas  
NBL Initials: \_\_\_\_\_

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.

## CARRIER INSTRUCTIONS

Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.