



Bill to:
GLOBALTRANZ ENTERPRISES
7350 N DOBSON RD STE 130,
Scottsdale,
AZ,
85250

Invoice Date: 01/26/2024
Invoice #: 4441715
Terms: NET 30
Due Date: 02/26/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/24/2024		808 Van Buren St, Kingsford, MI 49802 - 21999 W Highway 54 Goodard, KS 67052			
			1	\$3,300.00	\$3,300.00

TOTAL
\$3,300.00

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: 4441715
Manifest Number:
Movement Number: 6447417
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: 42000.0
Commodity: Dry food goods
Pieces: 1440

Temp:
BOL: M-00903693258

Stop Information

PU 1 Name: *CRYSTAL FALLS SPRING, INC Date: 01/24/2024 0700
Address: 808 Van Buren St 01/24/2024 1500
KINGSFORD MI 49802 Pieces 1440
Phone: Weight 41040.0
Contact

Reference number: PO 93258

Stop Information

SO 2 Name: *Kroger Western DC - 189-Goddard Date: 01/26/2024 0930
Address: 21999 W Highway 54 01/26/2024 0930
GODDARD KS 67052 Pieces 1440
Phone: (316) 794-2212 Weight 41040.0
Contact Warehouse

Reference number: PO 93258

LOAD MONEY

Base Rate: \$3,300.00

Total Pay: 3300.00

Instructions

*CRYSTAL FALLS SPRING, INC - KROGCOO1: Per GlobalTranz/World Wide Express, OPPS must be notified after 60 minutes of appointment time that the carrier has been waiting at the Shipper/Receiver . Any detention request submitted without notifying OPPS before detention time has started to accrue, will be denied.

*CRYSTAL FALLS SPRING, INC - KROGCOO1: All Kroger shipments are expected to make on time delivery. If assigned carrier misses the on time delivery date / time they will be charged \$100 late fee. All Carriers that are 2 days late they will be charged a late fee of \$250.

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.

Kroger Grocery Purchase Order

Purchase Order Number: 93258

Purchase Order Date: 2024-01-11

Header

Status: Original
Buyer Internal ID for Seller: 03609472
Buyer Name or Department: CHRIS WIETMARSCHEN
Buyer Name or Department Phone: 513-387-1093
Requested Delivery Date: 2024-01-25
Requested Ship/Pickup Date: 2024-01-23
Shipment Method of Payment: Customer Pickup/Backhaul
Transportation Method: Customer Pickup
Routing: 8/29/23 ZW

Bill To

KROGER (KRG LLC)
NASHVILLE - RASC
P.O. BOX 305103
NASHVILLE, TN, 372305103, US
DUNS+4: 0069428820000

Ship To

KROGER (KRG LLC)
DILLON STORES GODDARD DC
21999 W HWY 54
GODDARD, KS, 67052, US
DUNS+4: 0069428823601

Seller

CRYSTAL FALLS SPRINGS INC
DUNS+4: 0000000000000

Transportation

THIS PURCHASE ORDER IS SUBJECT TO THE TERMS AND CONDITIONS
ON [HTTP://EDI.KROGER.COM](http://EDI.KROGER.COM)

Detail

GTIN-14	Quantity Ordered	Ordered Unit of Measure	List Cost	† Gross Line Total
10011110862287	1440	Case	\$9.66	\$13,910.40
Description: ST 101 ARTSIAN WATER		Buyer Item Code: 95023		
Pack: 12				

Summary

Quantity Ordered: 1440
Quantity Ordered Unit of Measure: Case
Weight: 41040
Weight Unit of Measure: Pound
Volume: 1066
Volume Unit of Measure: Cubic Feet
Amount: \$13,910.40
† Line Item Count: 1
† Sum of Gross Line Total: \$13,910.40

† Data is a calculated value and is for reference only.

Tractor # In 743

PO #

STRAIGHT BILL OF LADING—SHORT FORM—ORIGINAL—NOT NEGOTIABLE

DESIGNATE WITH AN (X)
BY TRUCK ☐ FREIGHT ☐

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading.

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that any service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

From **Crystal Falls Springs, Inc**
At **346 Rock Crusher Rd, Crystal Falls MI 49920**

DATE
1-24-24SHIPPER'S NO.
20598

CARRIER

CARRIER'S NO.

BY

ROUTE

DELIVERING CARRIER

CONSIGNEE
AND
DESTINATION

Dillon/Croddard DC
Dillon Stores
21999 W. Hwy 54
Croddard, KS 67052

CAR OR VEHICLE
INITIALS & NO.

NO. PACKAGES	HM	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	ERG #	*WEIGHT (SUBJECT TO CORR.)	CLASS OR RATE	✓	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. Per (Signature of Consignor) If charges are to be prepaid, write or stamp here, "To be Prepaid." Received \$ to apply in prepayment of the charges on the property described hereon.
1440 cases		(24p) 12pk 1L ST water		42480			
		PO 93258					
		Seal 2882818					
		Trailer 244804					

KROGER RECEIVING STAMP

DATE 1-26-24 TOTAL # OF CASES ON BOL 1440

PLACARDS SUPPLIED ☐ YES ☐ NO

DRIVER'S SIGNATURE

EMERGENCY RESPONSE PHONE NO.

SHIPPER'S CERTIFICATION: 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 the Department of Transportation.

SIGNATURE

OVER/SHORT CASES #

TOTAL CASES RECD # 1440

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's
weight". † Shipper's imprints in lieu of stamp; not a part of Bill of Lading approved by the U.S. Dept. of Transportation.
Note - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding

THIS SHIPMENT IS CORRECTLY DESCRIBED.

CORRECT WEIGHT IS

LBS.

†The fibre boxes used for this shipment conform to the specifications
set forth in the box makers certificate thereon, and all other
requirements of the National Motor Freight Tariff.

RECEIVER SIGNATURE

Shipper, Per

WITNESS SIGNATURE

Agent, Per

C.O.D. SHIPMENT

C.O.D. Amt.

Collection Fee

Total Charges

Permanent post-office address of shipper

ALL CORRECTIONS ON RCN MUST BE INITIALED AND DATED BY RECEIVER

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