

**Bill to:**

AXLE LOGISTICS, INC
520 W SUMMIT HILL DRIVE ,
Knoxville,
TN,
37902

Invoice Date: 02/06/2024

Invoice #: 1556522

Terms: NET 30

Due Date: 03/06/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/05/2024		1804 W. PACIFIC AVE KNOX, IN 46534 - 5236 S Campbell Ave SPRINGFIELD, MO 65810			
			1	\$1,500.00	\$1,500.00

TOTAL
\$1,500.00

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**

Axle Logistics

Rate Confirmation Agreement

Lumper WILL NOT be paid without preapproval.

No double brokering allowed

Double brokering without prior written authorization will result in forfeiture of payment by Axle to Carrier.

Carrier agrees that it has or will implement tracking technology from pickup to delivery to fit shipper's criteria.

** Carrier's dispatch team agrees to contact Axle's offices upon discovery of any overages, shortages, or damaged product to report discrepancy before leaving the customer's premises.**

****Axle requests that Carrier name "Axle Logistics, LLC" as an ADDITIONAL INSURED on Carrier's Auto Liability policy****

Payment of undisputed freight charges requires:

- Current Certificates of insurance (auto liability, cargo, and worker's comp).
- Carrier authority, signed Axle Logistics Broker-Carrier Agreement, W-9 information, signed Axle Logistics load confirmation, signed BOL and carrier invoice.
- Documents must be submitted to:
 - o Email to: invoices@axlelogistics.com
 - o Fax to: 866-534-6005
 - o Mail to: Axle Logistics, LLC 835 N Central St, Knoxville, TN 37917

This Rate Confirmation is deemed accepted by Carrier unless it is rejected within 4 hours of receipt. Notwithstanding the foregoing, receipt of shipment by Carrier constitutes acceptance of and agreement to the terms of this Rate Confirmation.

Any communications regarding this load must be addressed to Axle Logistics' offices and not to its customer.

All charges are included in this Rate Confirmation. No additional charges or fees will be paid.

Detention will be paid ONLY if Axle Logistics is notified ONE HOUR PRIOR to detention occurring and times are clearly marked on BOL's. Axle Logistics Detention Rate: \$30.00 an hour after 2 hours MAX 5 hours to be paid. Detention will not be paid if late/missed appointment occurs. Axle Logistics will not pay detention or layover fees for weather related delays.

To the extent a customer maintains the right to and does impose late fees for missed/late pickups/deliveries, such fines are the responsibility of Carrier. Carrier agrees to the attached requirements from the shipper, if any. If there is any discrepancy between the bill of lading and/or any shipping instructions and the cargo actually tendered (especially for temperature controlled cargo), Carrier shall instruct its driver to contact Axle's offices for further instruction from the shipper. Notwithstanding the foregoing, Carrier agrees that it has the ultimate responsibility to safely and securely load all freight in accordance with all applicable law.

Fuel Advance Option: Fuel Advances will only be issued to the contact information for Carrier listed with the FMCSA and Carrier must have elected that it allows fuel advances. Carriers are eligible for 40% of agreed upon rate and no more than \$600.00 a day.

There will be a 4% fee for all advances given including lumpers. **Quick Pay Option:** Quick Pay must be submitted to quickpay@axlelogistics.com and will be paid within 2 business days after receipt of all required documents via ACH. Carriers who utilize Axle Logistics' Quick Pay option must be enrolled in Axle Logistics' Quick Pay program. *There will be a 4% fee for all Quick Pays given.

Carrier is exclusively responsible for following all federal, state, and provincial safety and Hours of Service guidelines to legally and safely transport shipments tendered by Axle Logistics. By accepting this Rate Confirmation, Carrier warrants and agrees that it will follow all rules and regulations concerning its choice of driver(s), including assigning a driver who can perform the transportation services without violating the Hours of Service or Drivers Regulations contained in 49 CFR 395 applicable at the time of acceptance of the shipment. Any property damage or bodily injury that occurs during the course of transit is the exclusive responsibility of Carrier, who is an independent contractor and not an agent or affiliate of Axle Logistics. Freight must not be trans-loaded without prior written approval or payment may be forfeited by Carrier. This Rate Confirmation incorporates the terms and conditions of the Broker-Carrier Agreement signed by Axle Logistics and Carrier or, if the Broker-Carrier Agreement has not been signed by Axle Logistics and Carrier, then the terms and conditions of Axle Logistics' standard Broker-Carrier Agreement that may be found by registering at <https://gohighway.com/go/axle-logistics>. In the event of a conflict between this Rate Confirmation and any Broker-Carrier Agreement between Axle Logistics and Carrier, this Rate Confirmation shall govern as to the provisions in conflict. Carrier understands and agrees that, for shipments sealed at origin or after each additional pickup/drop, the lack of a seal or any seal irregularities noted at destination shall be sufficient to render the shipment unsafe and a total loss, without the need for inspection, at the discretion of the shipper or consignee. Carrier acknowledges that any routing instructions from the shipper are provided for convenience only and that Carrier is solely responsible for choosing the route. Carrier has exclusive responsibility for all cargo tendered hereunder from the time of loading until delivery to the consignee evidenced by a signed delivery receipt.

Axle Logistics, LLC
835 N. Central Street
Knoxville, TN 37917
865-223-6603
www.axlelogistics.com

AXLE LOGISTICS, LLC
835 N. Central Street



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Knoxville, TN 37917

*** Load Confirmation ***

1555622

Dispatcher Barrett Breitweiser Phone: (800) 693-1779 Fax: (866) 754-9442 Email: barrett.breitweiser@axlelogistics.com

Carrier:	Royal3 Inc Lombard IL 60148	Contact:	Stephen Vacic
Date:	02/05/24	Phone:	(630) 485-7370
		Fax:	

Order	Order: 1555622	Commodity:	AGRICULTURE PRODUCTS
	Miles: 572.0	Weight:	44990.0
	Temp:	Trailer:	Van (DAT)
	BOL: 171001746	Reference:	133558

PU 1	Name: KNOX FERTILIZER COMPANY	Date: 02/05/24 08:00AM
	Address: 1804 W. PACIFIC AVE	02/05/24 04:00PM
	KNOX IN 46534	Contact: shipping/RCV: tell trailer type
	Phone: (574) 772-6275	Drvr Ld/Unld: No driver loading or unload
	Reference number: 4B SITEONE LANDSCAPE SUPPLY	
	Reference number: AD 080255239	
	Reference number: PO 41119281	
	Reference number: PU 171001746	
	Reference number: TN 203239277	
	Reference number: ZZ V17224	

SO 2	Name: SiteOne 182	Date: 02/06/24 08:00AM
	Address: 5236 S Campbell Ave	02/06/24 03:00PM
	SPRINGFIELD MO 65810	Contact: RCV- Eric (DA)
	Phone: (417) 881-6675	Drvr Ld/Unld: Driver Assist
	Reference number: PO 41119281	
	Reference number: PU 171001746	
	Reference number: ZZ 182	

Payment	Carrier Freight Pay:	\$1,500.00
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Attn: Barrett Breitweiser

Instructions

KNOX FERTILIZER COMPANY - Shipper Contact: Wade Allen - TE: N/A

KNOX FERTILIZER COMPANY - Contact: KIM MACMILLAN - TE: (574) 772-6275 x255

KNOX FERTILIZER COMPANY - Contact: KIM MACMILLAN - TE: (574) 772-6275 x255

KNOX FERTILIZER COMPANY - SITEROGA: === DISPATCH COMMENT ===

** If flatbed at least 4ft tarps are needed **

SiteOne 182 - Contact: SCHEDULING - TE: 417-881-6675

SiteOne 182 - DRIVER ASSIST



Stephen Vacic

☒ Accept

☐ Decline

David

(470) 909-1432

stephen@royal3inc.com

762

W97037



Attn: Barrett Breitweiser

Date: 01/30/2024

Bill of Lading

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SHIP FROM

Name: **LESCO, INC.**
 Address: **1804 W. Pacific Ave.**
 City/State/Zip: **KNOX, INDIANA, 46534**
 SID# **LESCO**

☐ FOB

SHIP TO

Name: **SITEONE LANDSCAPE SUPPLY #182** Location:
 Address: **5236 S CAMPBELL AVENUE**
(417)881-6675
 City/State/Zip: **SPRINGFIELD, MO, 658102407**
 CID# **182**

☐ FOB

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
 Address:
 City/State/Zip

SPECIAL INSTRUCTIONS:

DRIVER ASSIST REQUIRED

Bill of Lading Number: 00891460001335589



(402) 00891460001335589

Carrier Name: **CUSTOMER PICK UP**Trailer Number: **289479**Seal Number(s): **7965892**SCAC: **CPU**

PRO NUMBER:

Freight Charge Terms:

☐ Prepaid ☒ Collect ☐ Third Party
☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (Circle One)	ADDITIONAL SHIPPER INFORMATION
41119281	880	44000 lbs	(Y) N	Ord# 0000178255 0000133558
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTALS		880	44000 lbs	

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H M (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
15	Pallet	600	Each	30000 lbs		JD58803 - 510366 *36-0-6 80%OPTIXR WDMN 50#		50
4	Pallet	160	Each	8000 lbs		JD55603 - 098623 28-3-10 50%OPTI45 4.5FE 50#		50
3	Pallet	120	Each	6000 lbs		JD53423 - 510132 * LES 24-0-6 65%OPTI45 50#		50
22		880		44000 lbs		GRAND TOTALS		

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:
 The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____

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.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

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.

Trailer Loaded

Freight Counted

☒ By Shipper
☐ By Driver

☒ By Shipper
☐ By Driver / pallets
 said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

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.


Trucking

ADI SmartBOL Enterprise v7.2.32

Date: 01/30/2024

Bill of Lading

Page 1 of 1

SHIP FROM				SHIP TO				THIRD PARTY FREIGHT CHARGES BILL TO					
Name: LESCO, INC. Address: 1804 W. Pacific Ave. City/State/Zip: KNOX, INDIANA, 46534 SID# LESCO <input type="checkbox"/> FOB				Name: SITEONE LANDSCAPE SUPPLY #182 Address: 5236 S CAMPBELL AVENUE (417)881-6675 City/State/Zip: SPRINGFIELD, MO, 658102407 CID# 182 <input type="checkbox"/> FOB				Name: Address: City/State/Zip:					
SPECIAL INSTRUCTIONS: DRIVER ASSIST REQUIRED				Bill of Lading Number: 00891460001335589  (402) 00891460001335589				Carrier Name: CUSTOMER PICK UP Trailer Number: 289479 Seal Number(s): 7965892					
				SCAC: CPU				PRO NUMBER:					
				Freight Charge Terms: <input type="checkbox"/> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Third Party <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading									
CUSTOMER ORDER INFORMATION													
CUSTOMER ORDER NUMBER			# PKGS		WEIGHT		PALLET/SLIP (Circle One)		ADDITIONAL SHIPPER INFORMATION				
41119281			880		44000 lbs		Y N Y N Y N Y N Y N Y N		Ord# 0000178255 0000133558				
GRAND TOTALS			880		44000 lbs								
HANDLING UNIT				PACKAGE		WEIGHT		H.M (X)		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE							Commodities requiring special or additional care or attention in handling or stowing must be marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360		NMFC#	CLASS
15	Pallet	600	Each	30000 lbs		JD58803 - 510366 *36-0-6 80%OPTIXR WDMN 50#							50
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GRAND TOTALS				880		44000 lbs							
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: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____								COD Amount: _____ Fee Terms: <input type="checkbox"/> Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> 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.								The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.					
SHIPPER SIGNATURE / DATE 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. 65 FEB 2024								Trailer Loaded <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver / pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP DATE 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. 2-5-24	

Trucking

ADI SmartBOL Enterprise v7 2.32