



Bill to:
GARRISON LOGISTICS, INC
P.O. BOX 890,
Cullman,
AL,
35055

Invoice Date: 02/07/2024
Invoice #: 1537425
Terms: NET 30
Due Date: 03/07/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/06/2024		217 S Alex Rd, West Carrollton, OH, USA - 2919 Wade Hampton Blvd, Taylors, SC, USA			
			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

Garrison Logistics, Inc
P.O. Box 890
Cullman, AL 35056

Page 1
PHONE: 800-643-1128
NIGHTS: 888-640-8482
1537425

****MUST CHECK IN AS GARRISON**

Carrier:	ROYAL3 INC CHICAGO IL 60638	Contact:	NIKOLA STAMENKOVIC
Date:	02/06/2024	Phone:	(630) 485-7370
		Fax:	(630) 485-6980

Order	Order: 1537425	Commodity:	BEVERAGES
	Miles: 445.0	Weight:	40502.0
	Temp:	Trailer:	VAN (DAT)
	BOL: 876305261	Reference:	430251823

PU 1	Name: CROWN WHSE	Date: 02/06/2024 1200
	Address: 217 S ALEX RD	
	WEST CARROLLT OH 45449	Contact:
		Drvr Ld/Unld: Live load

Reference number: P8 37532945

Reference number: PO 430251823

Reference number: PO 80519047

SO 2	Name: SUNLAND WHSE	Date: 02/07/2024 0900
	Address: 2819 WADE HAMPTON BLVD	
	TAYLORS SC 29687	Contact: Leah
		Drvr Ld/Unld: Live unload

Reference number: AO 37532953

Payment	Carrier Freight Pay:	\$1,500.00
	Total Carrier Pay:	\$1,500.00

Instructions


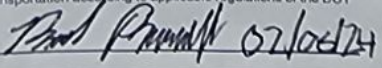
Special instructions:
Reefer Unit MUST Run on CONTINUOUS. Any early or late deliveries could result in a fine.

Asta Mijao

Attention: **Carlie White**

Ship Date: 2/6/2024 12:11:02PM


BILL OF LADING

SHIP FROM:		CROWN SHIPMENT:		CROWN ORDER NO:	
Crown WHSE Care of BA Sports Nutrition, LLC 217 S. Alex Rd. West Carrollton, OH 45449		017402		017402	
SHIP TO:		CUSTOMER SHIPMENT:		CUSTOMER PO:	
Sunland WHSE 2819 WADE HAMPTON BLVD BLDG A TAYLORS, SC 29687		430251823		430251823	
THIRD PARTY FREIGHT CHARGES BILL TO:		Carrier Name: ROYAL 3 Trailer number: PTLZ244746 Seal Number: 42925817 Pro Number: 430251823  Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: <u>X</u> Collect: _____ 3rd Party: _____			
BA SPORTS NUTRITION, LLC- Sunnie Lee 17-20 WHITESTONE EXPRESSWAY WHITESTONE, NY 11357 USA					
SPECIAL INSTRUCTIONS:					
CUSTOMER ORDER INFORMATION					
Customer Order Number		# PKGS	WEIGHT	PALLETS/SLIP	ADDITIONAL SHIPPER INFO
430251823		26	40,502		PALLETS OF SPORTS DRINK
GRAND TOTAL		26	40,502		
CARRIER INFORMATION					
HANDLING UNIT	PACKAGE	WEIGHT	H.M (X)	COMMODITY DESCRIPTION	PACKAGE
QTY TYPE	QTY TYPE			<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 300.</small>	NMFC # CLASS
	26 PLT	40,502			
GRAND TOTAL: 26					
				COD Amount: \$ _____ Fee Terms: Collect: _____ Prepaid: _____ <small>Customer check acceptable.</small>	
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.					
SHIPPER SIGNATURE / DATE		Trailer Loaded:		Freight Loaded:	
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 applicable regulations of the DOT.  02/06/24		<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<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 DOT emergency response guidebook or equivalent documentation in the vehicle.</small>			

Ship Date: 2/6/2024 12:11:02PM


BILL OF LADING

Page 1 of 1

SHIP FROM: Crown WHSE Care of BA Sports Nutrition, LLC 217 S. Alex Rd. West Carrollton, OH 45449		CROWN SHIPMENT: 017402	CROWN ORDER NO: 017402
SHIP TO: Sunland WHSE 2819 WADE HAMPTON BLVD BLDG A TAYLORS, SC 29687		CUSTOMER SHIPMENT: 430251823	
THIRD PARTY FREIGHT CHARGES BILL TO: BA SPORTS NUTRITION, LLC- Sunnie Lee 17-20 WHITESTONE EXPRESSWAY WHITESTONE, NY 11357 USA		CUSTOMER PO: 430251823	
SPECIAL INSTRUCTIONS:		Carrier Name: ROYAL 3 Trailer number: PTLZ244746 Seal Number: 42925817 Pro Number: 430251823  Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: <u>X</u> Collect: _____ 3rd Party: _____	

CUSTOMER ORDER INFORMATION				
Customer Order Number	# PKGS	WEIGHT	PALLETS/SLIP	ADDITIONAL SHIPPER INFO
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GRAND TOTAL		26	40,502	

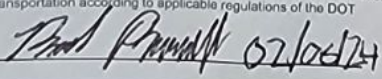
CARRIER INFORMATION				
HANDLING UNIT	PACKAGE	WEIGHT	H.M (X)	COMMODITY DESCRIPTION
QTY	TYPE	QTY	TYPE	PACKAGE
		26	PLT	40,502
GRAND TOTAL: 26				

	COD Amount: \$ _____ Fee Terms: Collect: Prepaid: _____ Customer check acceptable
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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 applicable regulations of the DOT. 	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Loaded: <input 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 DOT emergency response guidebook or equivalent documentation in the vehicle.
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