



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

Invoice Date: 02/16/2024
Invoice #: 28465843
Terms: NET 30
Due Date: 03/16/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/14/2024		92 CASSIDY POINT, ci/ewh000481/n-ewh000533 Portland, ME 04102 - 509 Cavanaugh St, po 4506263479 Alpena, MI 49707			
			1	\$2,500.00	\$2,500.00

TOTAL
\$2,500.00

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

GLOBALTRANZ®

CARRIER RATE
CONFIRMATION

BOL#: 28465843



GENERAL DISPATCH
GTZ DISPATCH: (480) 339-5673 lwalden@globaltranz.com
GTZ DISPATCH FAX:
CARRIER PAYMENTS:
INVOICE/POD/RATE CON submit to: TLINVOICES@globaltranz.com
NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

PO#: 628471
REF#: sous14-395/ sous14-442
PRO#:
CARRIER QUOTE:

SERVICE:	ACCESSORIAL(S):	COMMODITY:
SERVICE TYPE: Full TRAILER TYPE: Van SIZE: 53	<ul style="list-style-type: none">E TrackStraps	DESCRIPTION:348 cs bottled water po 4506263479,762 cs bottled water po 628471 WEIGHT: 32736 lbs PALLETs:13 PIECES:1110

CARRIER INFORMATION:		
CARRIER NAME: BRZ LEGAL NAME:RIKI TRANSPORTATION INC. MC#:086875 [CA458]	DISPATCHER: Linda PHONE: (708) 852-5654 FAX: EMAIL: dispatch@rtbrz.com	DRIVER: (Required)_____ DRIVER PHONE: (Required)_____ TRAILER NUMBER:

IMPORTANT LOAD NOTES:

ORIGIN:		
FACILITY: ICELAND GLACIAL C/O EIMSKIP STREET: 92 CASSIDY POINT, t-eiwh000481/n-eiwh000533 CITY/STATE/ZIP: Portland, ME 04102 FAX:	PICKUP DATE: 02-14-2024 REF #: HOURS: 08:00 - 12:00 CONTACT: NOEL M PICKUP #: APPOINTMENT REQUIRED: Yes APPOINTMENT MADE: Yes CONF #: t-eiwh000481/n-eiwh000533	
PICKUP NOTES: driver needs to arrive with 7 straps and request tail load sous14-395/eiwh000481 & nose load sous14-442/eiwh000533	PHONE:	

STOP # 2 : DROP		
FACILITY: D And B Grocers STREET: 35400 Central City Parkway, PO 628471 CITY/STATE/ZIP: Westland, MI 48185 FAX:	DELIVERY DATE: 02-16-2024 HOURS:08:00 - 08:00 CONTACT: DELIVERY APPTS PHONE: NaN	REF #: DELIVERY #: APPOINTMENT REQUIRED: Yes APPOINTMENT MADE: Yes CONF #: 628471
DELIVERY NOTES:		

DESTINATION:		
FACILITY: Huron Distributors Inc STREET: 509 Cavanaugh St, po 4506263479 CITY/STATE/ZIP: Alpena, MI 49707 FAX:	DELIVERY DATE: 02-16-2024 HOURS: 08:00 - 17:00 CONTACT: receivign FCFS 7am to 5pm PHONE:	REF #: DELIVERY#: APPOINTMENT REQUIRED: Yes APPOINTMENT MADE: Yes
DELIVERY NOTES:		



RATE INFORMATION:
BASE RATE:\$2,500.00
TOTAL RATE: \$2,500.00

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 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 or the Carrier's Carrier Rate Confirmation, the Agreement shall govern and then any terms as set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match the Rate Confirmation. Broker does not authorize hand written or verbal changes to the rate confirmation. If this rate confirmation does not accurately reflect the load terms, carrier must obtain a revised rate confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in additional line haul deductions.

page 2


**CARRIER RATE
CONFIRMATION**
BOL#: 28465843



GENERAL DISPATCH
GTZ DISPATCH: (480) 339-5673 lwalden@globaltranz.com
GTZ DISPATCH FAX:
CARRIER PAYMENTS:
INVOICE/POD/RATE CON submit to: TLINVOICES@globaltranz.com
NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

To be eligible for Accessorials / Incidentals, Carrier 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.

Detention:

- Carrier must be on time for pickup/delivery.
- Detention accrual begins 2 hours after appointment time at shipper/receiver IF:
 - 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 cancellations must be confirmed by Broker
- Layovers: \$200 Dry Van or \$250 Running Reefers.
- TONU: \$200

Submitting Payments:

- Email Invoice, Rate Confirmation, Proof of Delivery & Receipts to TLinvoices@globaltranz.com
- 3% / 3-Day Quick Pay available upon request
- For Payments question contact aptrrequests@globaltranz.com or by calling (480) 339-5735

Straight Bill Of Lading



VÖRUHÓTELID

Page 1 of 1

Picking Completed: 14/02/24
18:59:17

Client IWH
Order eIWH000533
Ref.Order
Reference 15145

Ship from
Customer IWH c/o Eimskip Logistics
Address 92 Cassidy Point Drive
City 04102 Portland, ME

Bill to
Customer
Address
City

Ship to
Customer Huron Distributors Inc.
Address
city 49707 Alpena

Comments
4506263479

Product	Description	Lot	Production Date	Qty	Weight	BBD	Carrier
IG100FP12U	12x1000 spring water	L23321		90	2,652.0 lbs		12115573
IG100FP12U	12x1000 spring water	L23321		90	2,652.0 lbs		12115572
IG050FP24U	24x500 spring water	L23331		84	2,478.0 lbs		12128227
IG050FP24U	24x500 spring water	L23331		84	2,478.0 lbs		12128243

Total

Product	Lot	Qty	Weight
IG100FP12U	L23321	180	
IG050FP24U	L23331	168	

Pallets 4 348 10,260.6 lbs

Signature Driver

Trailer number 1403241

Signature Recipient

Seal number 44879794

Straight Bill Of Lading



Page 1 of 1

Picking Completed:

Client IWH
Order eIWH000481
Ref.Order
Reference

Bill to

Customer
Address
City

Ship from
Customer IWH c/o Eimskip Logistics
Address 92 Cassidy Point Drive
City 04102 Portland, ME

Ship to

Customer D and B Grocers
Address 35400 Central City Pkwy
city 48185 Westland

Comments
628471

Product	Description	Lot	Production Date	Qty	Weight	BBD	Carrier
IG100FP12U	12x1000 spring water	L23321		90	2,652.0 lbs		12115574
IG050FP06U	4x6x500 spring water	L23326		84	2,478.0 lbs		12119899
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119953
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119971
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119954
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119956
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119955
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119952
IG050FP06U	4x6x500 spring water	L23327		84	2,478.0 lbs		12119951

Total

Product	Lot	Qty	Weight
IG100FP12U	L23321	90	
IG050FP06U	L23326	84	
IG050FP06U	L23327	588	

Pallets 9 762 22,476.3 lbs

Signature Driver

Trailer number H 03 241

Signature Recipient

Seal number 44879793

GLOBALTRANZ

Straight Bill of Lading - Short Form - Original - Not Negotiable

GTZ BOL NO : 28465843

TAIL LOAD EIWH000481

Shipper Address	ICELAND GLACIAL C/O EIMSKIP 92 CASSIDY POINT eiwh000481 Portland, ME 04102	Carrier : BRZ Shipment Date: 02/14/24 Carrier Pro#: Ref # : sous14-395/ Carrier Quote # : P/O # : 628471 Customer BOL NO: 
Country	USA	
Contact Name	NOEL M	
Phone Number	(207) 232-3200	
Contact Email		
Fax Number		

Consignee Address	D AND B GROCERS 35400 CENTRAL CITY PKWY PO 628471 WESTLAND, MI 48185	Third Party Billing Information: All charges are prepaid to: GlobalTranz PO Box 6348 Scottsdale AZ 85261 Direct billing inquiries to : (866) 275-1407 GTZ BOL NO : 28465843
Country		
Contact Name		
Phone Number		
Contact Email		
Fax Number		

Stop # 1: DropName:
Street:
City/State/Zip:**Comments/Special Instructions:**Pickup Remarks : driver needs to arrive with 7 straps and request tail load sous14-395/eiwh000481 & nose load sous14-442/eiwh000533
Delivery Remarks :

Pallets	Pieces	IsHazard	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
9	762		762 cs bottled water po 628471	22476	0	40	48	70		false

The authorized signatories signing this document on behalf of its company consents and bind its company to the terms and conditions found on www.carrierrate.com.

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature:

Deion Roberts

Date:

2-14-24

Trailer#:

Driver's Signature:

Date:

Trailer#:

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

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.

Consignor's Signature: _____

Consignee Signature: _____

Print Name: _____

Company Name: _____

Date: _____

Permanent post-office address of the Shipper:

* Mark with "X" to designate material as defined in Title 49 CFR

Remit-to
D&B Grocers Inc.
35400 Central City Parkway
Westland, MI 48185



INVOICE NO. AR91521
INVOICE DATE: 2/16/2024

LUMPER RECEIPT

Bill-to 191
TRANSPORTATION DEPARTMENT
FED ID 38-3153502
WESTLAND, MI 48185

Ship-to L1017
ICELANDIC-LUMPER

USA

Terms **C30-Net 30**

Due Date **3/17/2024**

EFS#1944141246 PO#628471

DESCRIPTION	QTY	UNIT PRICE	EXTENDED PRICE
Logistics - Lumper/Restack	1	\$250.00	\$250.00

Total Tax

0.00

Total Amount

\$250.00



GLOBALTRANZ

Straight Bill of Lading - Short Form - Original - Not Negotiable

GTZ BOL NO : 28465843

NOSE LOAD EIWH000533

Shipper ICELAND GLACIAL C/O EIMSKIP
Address 92 CASSIDY POINT
ciwh000533
Portland, ME 04102
Country USA
Contact Name NOEL M
Phone Number (207) 232-3200
Contact Email
Fax Number

Carrier : BRZ
Shipment Date: 02/14/24
Carrier Pro#:
Ref # sous14-442
Carrie
P/O # : 4506263479
Customer BOL NO: EIWH000533



Consignee Huron Distributors Inc
Address 509 Cavanaugh St
po 4506263479
Alpena, MI 49707
Country USA
Contact Name receivign FCFS 7am to 5pm
Phone Number (989) 354-9450
Contact Email
Fax Number

Third Party Billing Information:
All charges are prepaid to:
GlobalTranz
PO Box 6348
Scottsdale AZ 85261
Direct billing inquiries to : (866) 275-1407
GTZ BOL NO : 28465843

Stop # 1: Drop

Name:
Street:
City/State/Zip:

Comments/Special Instructions:

Pickup Remarks : driver needs to arrive with 7 straps and request tail load sous14-395/ciwh000481 & nose load sous14-442/ciwh000533
Delivery Remarks :

Pallets	Pieces	IsHazmat	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
4	348		348 cs bottled water po 4506263479	10260	0	40	48	70		false

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Shipper's Signature: Deion Roberts

Date: 2-19-24

Trailer#:

Driver's Signature:

Date:

Trailer#:

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

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.

Consignor's Signature:

Consignee Signature:

DOUG HELMAN

Print Name:

DOUG HELMAN

Date:

2-16-2024

Permanent post-office address of the Shipper:

* Mark with "X" to designate material as defined in Title 49 CFR

Straight Bill Of Lading



Page 1 of 1

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Total

Product	Lot	Qty	Weight
IG100FP12U	L23321	180	
IG050FP24U	L23331	168	

Pallets 4 348 10,260.6 lbs

Signature Driver

Trailer number 403241

Signature Recipient

Seal number 44879794

Straight Bill Of Lading



Page 1 of 1

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Ship from
Customer IWH c/o Eimskip Logistics
Address 92 Cassidy Point Drive
City 04102 Portland, ME

Bill to
Customer
Address
City
Ship to
Customer D and B Grocers
Address 35400 Central City Pkwy
city 48185 Westland

Comments

628471



SUBJECT TO COUNT &
INSPECTION

NAME
DATE

MATTHEW HESANO
2/16/24

Product	Description	Lot	Production Date	Qty	Weight	BBD	Carrier
IG100FP12U	12x1000 spring water	L23321		90	2,652.0 lbs		12115574
IG050FP06U	4x6x500 spring water	L23326		84	2,478.0 lbs		12119899
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Pallets 9 762 22,476.3 lbs

Signature Driver

Trailer number H 03 241

Signature Recipient

Seal number 44879793