



**Bill to:**  
Right peak  
,  
,  
,

Invoice Date: 02/21/2024  
Invoice #: 101049  
Terms: NET 30  
Due Date: 03/21/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/20/2024		1307 N Lombard Rd, Lombard, IL 60148 - 600 BARTLETT DRIVE, York, PA 17406			
			1	\$1,900.00	\$1,900.00

<b>TOTAL</b>
\$2,100.00

**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**



Right Peak  
5757 N Sheridan Rd Unit 8D  
Chicago, IL  
MC: 1493265 P: 773-572-0009 F:

LOAD NUMBER

101049

2/20/2024

## DISPATCH CONFIRMATION

Carrier: **Zigi Freight Inc**  
**Chicago, IL**

Ph/Fax: **630-485-7370**

Attn:

**630-485-7370**

MCID: **944686**

Reference:

Trailer:

Driver:

Cell:

Truck:

### Load Info

### The Following Pay Is Authorized For This Load

Pieces: 0	Miles: 699	Pay Code	Pay Type	Rate	Total
Space: 0	Pallets:	Load	Flat	1,900.00	1,900.00
Act Wgt: 7000	Type: DANIEL			Total	1,900.00
As Wgt: 7000	Trailer:				
Value:					

Stop	From	To	Name Address	City Phone	St Zip	Ref Contact	Appt Appt Ref
1	PU	2/20 13:00	2/20 15:00	Right Peak Warehouse 1307 N Lombard Rd	Lombard	IL 60148	No 101049

### Notes

FOOD GRADE PLATED TRAILERS ONLY! Must scale up to legal.  
Accessorial Rates payable to Carrier that are applicable to dry van shipments shall be as follows:  
a. TONU: \$100 flat rate  
b. Layover: \$150 flat rate  
c. Detention: \$35/hour up to 5 total hours (Detention time begins 3 hours after the scheduled appointment time - Driver must be on time for appointment to qualify)  
d. Lumpers: Right Peak will reimburse lumpers with an approved lumper receipt ("Receipt"). Lumper charges must be submitted to Right Peak using the Receipt within twenty-four (24) hours of delivery to ensure timely and accurate reimbursement.  
e. It's the carrier's responsibility to plan the delivery accordingly, considering 2-3 hours of loading. In case, the missed delivery appointment will result in accessorial charges such as reloading, cross-docking services, etc - the carrier can be charged.  
Pictures of BOL, SEAL and loaded trailer after the pickup - otherwise \$100 fee

2	Del	2/21 06:00	2/21 06:00	UNFI Manchester 600 BARTLETT DRIVE	York	PA 17406	Yes
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### Notes

If Lumper is requested, Right Peak must get the receipt and be notified within 24 hours of the service being performed. Otherwise, lumper payment will not be PAID. 50\$ will be deducted per day if POD is not received within 24 hours after delivery. Loads that are late for the scheduled pick up or delivery appointment will be charged a late fee of \$500.00 (per day)  
DEL# 8101641 2764956

Commodity	Description Reference	Pieces	Weight
FAK		0	7,000
Totals		0	7,000

**DISPATCH CONFIRMATION**

Load No 101049 - 2/20/24

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Right Peak	2/20/24	Zigi Freight Inc	2/20/24
	DATE:		DATE:

BILL OF LADING – SHORT FORM – NOT NEGOTIABLE				
Ship From		Bill of Lading Number: 2024-69747-00		
TH Foods, Inc. 2210 Harrison Ave Rockford, IL 61103		Customer Order No.: 3625401		
		ARN:		
Ship To		Carrier Name		
YORK WAREHOUSE 225 Cross Farm Lane York, PA 17406		PICKUP		
Special Instructions: TH FOODS CASH TERMS CALC FROM DATE OF INVOICE		Pro Number:  PLACE PRO HERE		
Freight Charge Terms: Collect				
Carrier Information				
No. Pieces	Description	Class	NMFC No.	Weight
864.000	Foodstuffs	175	73260	3,405.36
Date: 02/19/2024		Shipped On:		
App. Time: 12:00		Total Pallet Count 16		
Arrival Time: 12:50		Double Stacked? Y N		
Departure Time:		N/A Chep Pallets		
Door #: 4		Seal # 10851139		
		Trailer #		
		Trailer Loaded: Freight Counted:		
		<input checked="" type="checkbox"/> By shipper <input checked="" type="checkbox"/> By shipper		
		<input type="checkbox"/> By driver <input type="checkbox"/> By driver/pallets said to contain		
		<input type="checkbox"/> By driver/pieces		
Shipper Signature / Date TH Foods, Inc. 02/19/2024 Shipper certifies that the above-named goods are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		Carrier Signature / Pickup Date  By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.		



**BILL OF LADING - SHORT FORM - NOT NEGOTIABLE**

<b>Ship From</b> TH Foods, Inc. 2210 Harrison Ave Rockford, IL 61103		<b>Bill of Lading Number:</b> 2024-69711-00	
		<b>Customer Order No.:</b> 3622954	
		ARN:	
<b>Ship To</b> Hudson Valley Warehouse 525 Neelytown Road Montgomery, NY 12549		<b>Carrier Name</b> PICKUP	
Special Instructions: TH FOODS CASH TERMS CALC FROM DATE OF INVOICE		Pro Number:  PLACE PRO HERE	
<b>Freight Charge Terms:</b> Collect			

Carrier Information				
No. Pieces	Description	Class	NMFC No.	Weight
830.000	Foodstuffs	175	73260	2,344.65

<b>Date:</b> 02/19/2024 <b>App. Time:</b> 12:00 <b>Arrival Time:</b> 12:50 <b>Departure Time:</b> <b>Door #:</b> 4	<b>Shipped On:</b> <b>Total Pallet Count</b> 12 <b>Double Stacked?</b> Y/N	<b>Seal #</b> 10851139 <b>Trailer #</b>
	N/A Chep Pallets	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver

<b>Shipper Signature / Date</b> <b>TH Foods, Inc.</b> <b>02/19/2024</b> Shipper certifies that the above-named goods are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	<b>Carrier Signature / Pickup Date</b>  By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.
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## BILL OF LADING - SHIPMENT - NOT NEGOTIABLE

Ship From

TH Foods, Inc.  
2210 Harrison Ave  
Rockford, IL 61103

Bill of Lading Number: 2024-69739-00

Customer Order No.: 3625081

ARN:

Ship To

United Natural Foods  
433 Oak Glen Road  
Howell, NJ 07731

Carrier Name

PICKUP

Special Instructions:

TH FOODS  
CASH TERMS CALC FROM DATE OF INVOICE

Pro Number:

PLACE  
PRO  
HERE

Freight Charge Terms: Collect

## Carrier Information

No. Pieces	Description	Class	NMFC No.	Weight
444.000	Foodstuffs	175	73260	1,871.21

Date: 02/19/2024

App. Time: 12:00

Arrival Time: 12:50

Departure Time:

Door #: 4

Shipped On:

Total Pallet Count 11

Double Stacked? ☒ N

N/A Chep Pallets

Seal # 10851139

Trailer #

Trailer Loaded:

- ☒
- By shipper
- 
- ☐
- By driver

Freight Counted:

- ☒
- By shipper
- 
- ☐
- By driver/pallets said to contain
- 
- ☐
- By driver/pieces

Shipper Signature / Date

TH Foods, Inc.

02/19/2024

Shipper certifies that the  
above-named goods are properly  
classified, packaged, marked,  
and labeled, and are in proper  
condition for transportation  
according to the applicable  
regulations of the DOT.

Carrier Signature / Pickup Date

By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.



**BILL OF LADING – SHORT FORM – NOT NEGOTIABLE**

**Ship From**

**Bill of Lading Number: 2024-69739-00**

TH Foods, Inc.  
2210 Harrison Ave  
Rockford, IL 61103

**Customer Order No.: 3625081**

ARN:

**Ship To**

**Carrier Name**

United Natural Foods  
433 Oak Glen Road  
Howell, NJ 07731

PICKUP

Special Instructions:  
TH FOODS  
CASH TERMS CALC FROM DATE OF INVOICE

Pro Number:

PLACE  
PRO  
HERE

**Freight Charge Terms: Collect**

**Carrier Information**

No. Pieces	Description	Class	NMFC No.	Weight
444.000	Foodstuffs	175	73260	1,871.21

Date: 02/19/2024

**Shipped On:**

Total Pallet Count 11

Seal # 10851139

App. Time: 12:00

Double Stacked? ☒ Y ☐ N

Trailer # \_\_\_\_\_

Arrival Time: 12:50

Departure Time: \_\_\_\_\_

N/A Chep Pallets

**Trailer Loaded:**

**Freight Counted:**

☒ By shipper

☒ By shipper

☐ By driver

☐ By driver/pallets said to contain

☐ By driver/pieces

**Shipper Signature / Date**

**TH Foods, Inc.**

**02/19/2024**

Shipper certifies that the above-named goods are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

**Carrier Signature / Pickup Date**

By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.

UNFI - York, PA

By: [Signature]

Date: 2/26/2024

CS Rec: 11 pdm

<b>BILL OF LADING – SHORT FORM – NOT NEGOTIABLE</b>				
<b>Ship From</b>		<b>Bill of Lading Number: 2024-69747-00</b>		
TH Foods, Inc. 2210 Harrison Ave Rockford, IL 61103		<b>Customer Order No.: 3625401</b>		
		ARN:		
<b>Ship To</b>		<b>Carrier Name</b>		
YORK WAREHOUSE 225 Cross Farm Lane York, PA 17406		PICKUP		
Special Instructions: TH FOODS CASH TERMS CALC FROM DATE OF INVOICE		Pro Number:  <div style="text-align: center; opacity: 0.5; font-size: 2em;">PLACE PRO HERE</div>		
		<b>Freight Charge Terms: Collect</b>		
<b>Carrier Information</b>				
<b>No. Pieces</b>	<b>Description</b>	<b>Class</b>	<b>NMFC No.</b>	<b>Weight</b>
864.000	Foodstuffs	175	73260	3,405.36
<b>Date:</b> <u>02/19/2024</u> <b>App. Time:</b> <u>12:00</u> <b>Arrival Time:</b> <u>12:50</u> <b>Departure Time:</b> _____ <b>Door #:</b> <u>4</u>		<b>Shipped On:</b> _____ <b>Total Pallet Count</b> <u>16</u> <b>Double Stacked?</b> <input checked="" type="checkbox"/> Y <input type="checkbox"/> N  <u>N/A</u> <b>Chep Pallets</b>		
		<b>Seal #</b> <u>10851139</u> <b>Trailer #</b> _____  <b>Trailer Loaded:</b> <b>Freight Counted:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By shipper <input type="checkbox"/> By driver <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces		
<b>Shipper Signature / Date</b> <b>TH Foods, Inc.</b> <b>02/19/2024</b> Shipper certifies that the above-named goods are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		<b>Carrier Signature / Pickup Date</b>  By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.		

**UNFI York PA**  
By: Steele  
Date: 2/21/2024  
CS Rec: 16/21



BILL OF LADING – SHORT FORM – NOT NEGOTIABLE				
<b>Ship From</b>		<b>Bill of Lading Number: 2024-69711-00</b>		
TH Foods, Inc. 2210 Harrison Ave Rockford, IL 61103		<b>Customer Order No.: 3622954</b>		
		ARN:		
<b>Ship To</b>		<b>Carrier Name</b>		
Hudson Valley Warehouse 525 Neelytown Road Montgomery, NY 12549		PICKUP		
Special Instructions: TH FOODS CASH TERMS CALC FROM DATE OF INVOICE		Pro Number:		
		PLACE PRO HERE <i>Dn G</i>		
<b>Freight Charge Terms: Collect</b>				
Carrier Information				
<b>No. Pieces</b>	<b>Description</b>	<b>Class</b>	<b>NMFC No.</b>	<b>Weight</b>
830.000	Foodstuffs	175	73260	2,344.65
<b>Date:</b> <u>02/19/2024</u> <b>App. Time:</b> <u>12:00</u> <b>Arrival Time:</b> <u>12:50</u> <b>Departure Time:</b> _____ <b>Door #:</b> <u>4</u>		<b>Shipped On:</b> _____ <b>Total Pallet Count</b> <u>12</u> <b>Double Stacked?</b> <u>Y/N</u>  <u>N/A</u> <b>Chep Pallets</b>		
		<b>Seal #</b> <u>10851139</u> <b>Trailer #</b> _____  <b>Trailer Loaded:</b> <b>Freight Counted:</b> <input checked="" type="checkbox"/> By shipper <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces		
<b>Shipper Signature / Date</b> <b>TH Foods, Inc.</b> <b>02/19/2024</b> Shipper certifies that the above-named goods are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		<b>Carrier Signature / Pickup Date</b>  By signing this Bill of Lading, Carrier acknowledges receipt of the above-named goods in good condition and with no apparent damage. No services or transportation of Shipper's goods shall be subcontracted to any other carrier without Shipper's prior approval. Carrier will pay full replacement cost for any goods that are lost or damaged during the transportation that is covered by this Bill of Lading or while in the control of Carrier, its agents, authorized subcontractors or carriers. Carrier will indemnify, defend and hold Shipper and its employees, officers and agents harmless from any and all claims, liabilities or damages caused by Carrier's willful or negligent acts in providing any services to Shipper or non-delivery to Shipper's customer.		

**UNFI - York, PA**

By: *Stephen B...*  
 Date: 2/21/24  
 CS Rec: 12 pallets