



Bill to:
COWAN LOGISTICS , LLC
4555 HOLLINS FERRY ROAD,
BALTIMORE,
MD,

Invoice Date: 02/26/2024
Invoice #: S0000650301
Terms: NET 30
Due Date: 03/26/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/23/2024		9431 AllPoints Pkwy, Avon, IN 46123, USA - 10 Costco Dr, Monroe Township, NJ 08831, USA			
			1	\$1,600.00	\$1,600.00

TOTAL
\$1,600.00

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



Cowan Logistics, LLC | MC044801
LOAD AND RATE CONFIRMATION
DRIVER MUST CALL FOR DISPATCH



PHONE: 443-297-1317 | FAX: 443-575-4350 | EMAIL: mbarksdale@cowanlogistics.com

Daily check calls by 9 am required. "Loaded calls" and "Empty calls" required. Failure to call: \$25.00 per day per occurrence. 2/23/2024 10:11 AM

CARRIER: RIKI TRANSPORTATION INC	ORDER: 800858031	*MUST APPEAR ON ALL BILLING*	
CARRIER CODE: CGRIKBU	Driver: UNKNOWN	Truck: UNKNOWN	Weight: 35780
EMAIL: JOHNNY@RTBRZ.COM	Phone:	Container: UNKNOWN	Pieces: 2386.00
PHONE: (708) 303-5150 <i>ATTN: Johnny</i>	MinTemp: F	Trailer: UNKNOWN	
FAX:	MaxTemp: F	Chassis: UNKNOWN	
		Req. Trl Type: 53' Van	

REMARKS: Load bars or straps required.
Driver must track via
TruckerTools + upload POD via
the app at time of delivery.
Failure to upload POD timely
may result in delayed payment.

NOTES: MUST PROVIDE PRIOR TO PU:
1. tractor VIN **1M1AN4GY0NM023464**
2. Tractor license plate # **P1151481**
3. Trailer license plate # **5003266**

Driver must turn in POD and request
any accessories within 24 hrs or
Charges WILL BE DENIED.
must notify of detention 1 hour prior

PICK UP	DROP TIME:	02/23/2024 12:00
PHARMAVITE 9431 Allpoints Parkway PLAINFIELD, IN 46168	Directions:	
	Ref Numbers: Ref Numbers provided after driver calls in empty for dispatch	
	Stop Notes:	
NOTES:		
DELIVERY	DROP TIME:	02/26/2024 07:30
COSTCO DEPOT 175 10 Costco Dr MONROE TOWNSHIP, NJ 08831	Directions:	
	Ref Numbers: Ref Numbers provided after driver calls in empty for dispatch	
	Stop Notes:	
NOTES:		

CARRIER PAY:

Load Broker Line Haul : \$1,600.00
TOTAL: \$1,600.00

Comcheck fees:
5% fee on Advances
\$3 Fee on Lumper Advances
We DO NOT give advances to first time carriers. We DO NOT make final payments via comcheck.

Bill To Address:

Cowan Logistics, LLC
4555 Hollins Ferry Rd.
Baltimore, MD 21227



PLEASE FAX TO: 443-575-4350
OR EMAIL TO MBARKSDALE@COWANLOGISTICS.COM
Broker: Barksdale, Michael

Driver First & Last Name: **Carlos Garcia** Driver Cell Phone #: **561-567-1364**

Truck #: **831** Trailer #: **H03248** Type of Trailer: _____ Manufacture Year of Trailer: _____

Estimated Empty information Prior to Pick-up: City, State: _____ Date: _____ Time: _____

CARRIER SIGNATURE: _____

DATE: _____

By accepting this tender and executing this Load and Rate Confirmation, I agree to the assignment of my Broker- Carrier agreement with Cowan Logistics, a division of Cowan Systems, LLC to Cowan Logistics, LLC and that the terms of that Broker Carrier Agreement apply to this load. If I have already signed a carrier contract with Cowan Logistics, LLC, acceptance of this tender is subject to the Cowan Logistics, LLC Broker Carrier Agreement.



Cowan Logistics, LLC TERMS AND CONDITIONS

In addition to the provisions of your carrier agreement with Cowan Logistics, LLC, the following terms shall apply to all transportation services supplied hereunder:

1. THIS LOAD MAY NOT BE DOUBLE BROKERED. Carrier is reminded that it is strictly prohibited from subcontracting this load to any other carrier or broker. Cowan Logistics, LLC reserves the right to pay the delivering carrier directly and the carrier named on this confirmation shall remain primarily liable as provided herein.
2. Carrier agrees that it will look solely to Broker for the payment of its charges and that it will not contact or pursue Broker's customers, shippers or consignee for payment of freight, accessorial or other charges owed to carrier.
3. Carrier agrees that, at the time of transport, Carrier's driver is in compliance with all FMCSA regulations and applicable laws.
4. Carrier must request all accessorial pay (including lumpers) directly with broker listed on bottom of rate confirmation at time of occurrence. Payment for any accessorial will not be made without Cowan's Broker approving the charge by way of an updated rate confirmation. Carrier must receive an updated rate confirmation listing all charges prior to submitting their invoice to the carrier settlements department at Cowan. Carriers will have 2 hours free time for detention and must notify Cowan Logistics, LLC 1 hour prior to free time running out for detention to be considered. Failure of carrier to report or provide supporting documentation will result in non-payment of accessories. All accessories must be preapproved by your Cowan Logistics Broker (bottom right of page) within 24 hours of event to be reimbursed.
5. All drivers must notify Cowan Logistics, LLC of any overages, shortages, or damages as they occur.
6. All problems/reschedules must be handled through our office.
Driver/dispatchers are not to call shippers/receivers.
7. Carrier shall be named on the bill of lading as the carrier of record.
8. BOL, proof of delivery, signed Rate Confirmation Sheet, any revised rate confirmation showing accessorial charges and other supporting documentation must accompany all invoices.
9. TONUs are not eligible unless driver has called in empty for pickup numbers on day of pick up.

All PODs must be faxed within 24 hours of delivery. Email your invoices to carrierinvoices@cowanlogistics.com with the Cowan Order # in the subject line. Please inquire about our ACH or Quick Pay options. Contact our Carrier Settlements Department @ 410-247-0800 x 1507 or access our carrier payment portal for payment updates at <https://cowanlogistics.com/carrierpayments>



PLEASE FAX TO: 443-575-4350
OR EMAIL TO MBARKSDALE@COWANLOGISTICS.COM
Broker: Barksdale, Michael



HIGH VALUE LOAD AGREEMENT

Load #

Date:

LSM2:

Carrier Name: _____

Contact Name & Number: _____

Driver Name: _____

Driver Cell Number: _____

Truck # _____ Trailer # _____

Briefing must be completed and have signature faxed back to Cowan Logistics, LLC at (443) 575-4453.

ALL LOADS ARE GPS TRACKED

- Loads cannot be left unattended or unsecured over the weekend.
- Check seal to make sure it is intact and matches the BOL.
- The number of bundles loaded on truck should match what is on the BOL.
- Driver MUST padlock the load and be responsible for removing upon arrival to receiver.
- Load will not be taken out of route. The driver must proceed directly from shipper to receiver.
- Load cannot be taken by the house.
- Load cannot be dropped.
- If the load is not moving, the driver must be in truck, hooked to the load or the trailer must be stored in a secure yard.
- Truck should have enough fuel prior to loading to drive at least 200 miles from shipper before stopping.
- Driver cannot stop in W. Memphis, AR, Memphis, TN, Houston, TX or El Paso, TX
- Driver must avoid stopping in any metropolitan area.
- Driver cannot stop at any truck stop on the I-81 corridor in Virginia.
- Flatbeds must tarp to conceal product.
- Driver is not to discuss with anyone the type of freight that is on the trailer.
- Driver must make check calls each morning by 10:00 and each afternoon by 18:00 including weekends.
- If driver stops to eat, fuel or break, the tractor keys should be taken with the driver, the windows rolled up and the cab doors of the tractor locked. Drivers should also park either as close to the fuel island or fuel desk as possible. The truck and trailer must be observable. Most thefts occur when driver runs into a truck stop for a quick break.
- Driver needs to be conscious of other vehicles in order to determine if the truck is being followed.
- Disconnect brake air lines and lock if possible.
- Bills of Lading for the load should be kept out of sight.
- After every stop, inspect the trailer to determine if there was any attempt of tampering.
- Report any suspicious activity to the police immediately followed by a call to Cowan Logistics, LLC at 800-303-7974. We can be reached 24-7 with this number.
- These procedures are in place for the safety of the driver and security of the load.

I acknowledge receipt of and agree on behalf of the above-named Carrier to be bound by the terms and conditions of this High Value Load Briefing. I am authorized to sign and agree to this High Value Load Briefing on behalf of this Carrier.

Carrier Signature: John Djordjevic Date: _____



PLEASE FAX TO: 443-575-4350
OR EMAIL TO MBARKSDALE@COWANLOGISTICS.COM
Broker: Barksdale, Michael

Date: 02/23/2024

Page 1 of 1

BILL OF LADING

SHIP FROM

Name: PHARMAVITE LLC
Address: 9431 ALLPOINTS PKWY
City/State/Zip: PLAINFIELD, IN 46168
SID#: IND1

FOB: ☐

SHIP TO

Name: COSTCO COMPANIES INC Loc#:
Address: 10 COSTCO DRIVE
City/State/Zip: MONROE TOWNSHIP, NJ 08831
CID#: 292

FOB: ☐

SEND FREIGHT BILL TO

Name: PHARMAVITE LLC
Address: 315 N RACINE AVE STE 501
City/State/Zip: CHICAGO, IL 60607

SPECIAL INSTRUCTIONS:

Deliver on: 02/26/2024

Bill of Lading Number: 040000000000000008



CARRIER NAME:

Trailer number:

Seal number(s):

SCAC:

Pro number:

465358285



37988945 CG

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	#PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
001750214089	9	79.74	Y N	2567517 / 2567516
001750214088	2377	35,704.34	Y N	LOAD #: 465358285
			Y N	STOP:
			Y N	
			Y N	

GRAND TOTAL 2,386 35,784.08

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	QTY	TYPE	WEIGHT	H.M.	COMMODITY DESCRIPTION	LTL ONLY
50	PLT	2,386	CS	35784.08	(X)	Supplements, RVNs, \$8.00 LBS.	NMFC# CLASS
				3,400.00		Pallet Weight Exempt	60000 70
50		2,386		39,184.08		GRAND TOTAL	

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 the 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, packed, marked and labeled and are in proper condition for shipment. The shipper is responsible for the applicable regulations of the DOT.

Trailer Loaded:

By Shipper ☒By Driver ☐

Freight Counted:

By Shipper ☒By Driver/pallets ☐By Driver/Pieces ☐

Shipper Signature

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 D.O.T. emergency vehicle. response guidebook or equivalent documentation for the vehicle.

Print and sign a copy for shipping facility, Receiving facility, and Carrier.

DATE 2/23/24

TIME IN 11:53

Appt Time 12

TRLR# H03898

DOOR# 16

NSP BY E.M.

TIME OUT 1:47 PM

RECEIVED BY

Shipped

Address:
City/State/
CID#:

Name:
Address:
City/State:

SPECIAL

Deliver

CUS

00175

00175

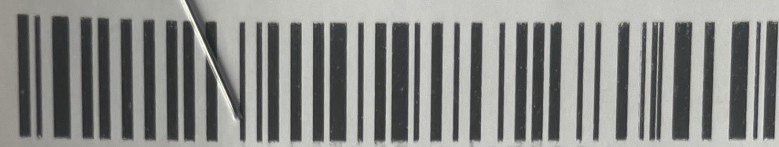
GR

H

DOOR: 406
APP TIME: 7:30 ARR TIME: 6:13
IN TIME: 6:13 OUT TIME: 7:25
1750214088 1750214089
28622-04 28622-05
SEAL: BL/TRL:

RECVR: NANCY M ALVARADO

PAGE 1 OF 1



00175022624073004

DOOR: 406
APP TIME: 7:30 ARR TIME: 6:13
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1750214088 1750214089
28622-04 28622-05
SEAL: BL/TRL:

RECVR: NANCY M ALVARADO

PAGE 1 OF 1



00175022624073004

- ☒ By Shipper
- ☐ By Driver
- ☐ By Driver

Print and

ing facility

Date: 02/23/2024

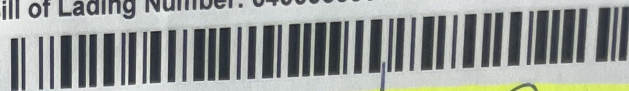
BILL OF LADING

SHIP FROM

Name: PHARMAVITE LLC
Address: 9431 ALLPOINTS PKWY
City/State/Zip: PLAINFIELD, IN 46168
SID#: IND1

FOB: ☐

Bill of Lading Number: 040000000000000008



2/23 @ 12pm

SHIP TO

Name: COSTCO COMPANIES INC Loc#:
Address: 10 COSTCO DRIVE
City/State/Zip: MONROE TOWNSHIP, NJ 08831
SID#: 292

FOB: ☐

CARRIER NAME:

Trailer number:

Seal number(s):

SCAC:

Pro number: 465358285



37988945 CG

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

SEND FREIGHT BILL TO

Name: PHARMAVITE LLC
Address: 315 N RACINE AVE STE 501
City/State/Zip: CHICAGO, IL 60607

SPECIAL INSTRUCTIONS:

Deliver on: 02/26/2024

☐ Master Bill of Lading: with attached underlying Bills of Lading

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Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packed, marked and labeled and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

2/23/24

Trailer Loaded:

☒ By Shipper☐ By Driver

Freight Counted:

☒ By Shipper☐ By Driver/pallets☐ 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 D.O.T. emergency response guidebook or equivalent documentation for the vehicle.

Print and sign a copy for shipping facility, Receiving facility, and Carrier.

DATE 2 / 23 / 24

TIME IN 11:53 Appt Time 12

TRLR# H03248 DOOR# 16

NSP BY E.M TIME OUT 1:47 PM

561-567-1364

ECO Pallets Inc.

Shipped