

**Bill to:**

AVA LOGISTICS LLC
3495 LAKESIDE DR. STE # 254,
Reno,
NV,
89501

Invoice Date: 02/27/2024

Invoice #: AA108155

Terms: NET 30

Due Date: 03/27/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/26/2024		301 S Simmons St, Stockton, IL 61085, USA - 7421 Ranco Rd, Richmond, VA 23228, USA			
			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**



Rate Contract AA108155

Contact Info

Phone (800) 516-9694
Fax (888) 744-2501
Email ap@avalogistics.com
Address 3495 Lakeside Dr.
Suite 254
Reno, NV 89509

Service Provider Info

Provider Royal3 Inc
MC# 944686
Attention AI

Rates and charges in this agreement shall supersede all other agreements.

Transportation	\$2,500.00
Amount Due (USD)	\$2,500.00

Service Provider Responsibility

1. Cancellation of driver less than 12 hours prior to scheduled pickup may result in service charges.
2. Co-brokerage of this shipment is prohibited.
3. Only the listed receiver of the booked freight can remove a seal. If anyone else removes the seal, payment will be denied.
4. Late Pickup / Delivery Subject to \$150.00 Reduction

Bill To

Email **ap@avalogistics.com**
Address AVA Logistics
3495 Lakeside Dr. STE 254
Reno, NV 89509
United States of America
Fax (888) 744-2501

Service Provider Signature

Name _____

Signature _____

Date _____

FACTORING COMPANIES: E-mail ap@avalogistics.com for PAYMENT STATUS or RATE CONFIRMATION.

Payment Terms: 30 days from receipt of invoice and POD to the nearest Tuesday or Thursday, unless otherwise agreed to in writing



Load Tender AA108155

Carrier Details				Load Details			
Provider	Royal3 Inc			Equipment	53 Van		
MC #	944686			Items	Bagged and Palletized fertilizer		
Attention	Al			Est. Weight	~44,000lbs		
Phone	630-566-2080			PO / Ref #	22022		
				MacroPoint	NOT REQUIRED		
				Load Notes	NO REEFERS		
Primary Pickup				Final Delivery			
Date	02/26/2024			Date	02/27/2024		
From	0800 - 1400			From	0800 - 1300		
Location	Dura/Stockton storage warehouse 301 S Simmons St Stockton IL 61085			Location	Virginia Green Henrico 7421 Ranco Rd Richmond VA 23228		
Contact	Nakita			Contact	Tim Mayes		
Phone	815-541-0285			Phone	804-285-6200		
Reference #	12966			Email	Branch.Shiflett@viriniagreen.com		
Instructions				Reference #	12966		
				Instructions			
Contact							
Main			General		Billing		
Name	Nolan Sheehan		Phone	(800) 516-9694 Ext 1	Phone	(800) 516-9694 Ext 3	
Phone	(800) 516-9694 Ext 212		Email	brokerage@avalogistics.com	Email	ap@avalogistics.com	
Email	nolan@avalogistics.com						

AVA Logistics does not provide directions.

Only the listed receiver of the booked freight can remove a seal. If anyone else removes the seal, payment will be denied.

Co-brokerage of this shipment is prohibited.

BILL OF LADING

PEARL VALLEY ORGANIX
968 S. KENT RD.
PEARL CITY, IL 61062
UNITED STATES
(815)-242-7650

BATCH CODE ORDER NO ORDER DATE PAGE
REL 00098286 2/26/2024 1
CUSTOMER PO NUMBER
12966

SHIP TO
HENRICO
VIRGINIA GREEN LAWN CARE
7421 RANCO RD
HENRICO, VA 23228

SOLD TO
VIRGGREEN
VIRGINIA GREEN LAWN CARE
TIM MAYERS
7421 RANCO ROAD
HENRICO, VA 23228

SLS1	SLS2	LOCATION ID	SHIP VIA / FREIGHT	PACKING LIST NO	DELIVERY/SHIPPED DATE	SHIP DATE
VA		MAIN		20555	2/26/2024	2/21/2024
ITEM ID	UNIT	BIN	ORDERED	SHIPPED	BACKORDERED	
HG 020403FW BG	BAG		880.0000	880.0000	0.0000	
HEALTHY GRO 2-4-3 FW 50# BAGS						
PAL	EACH		22.0000	22.0000	0.0000	
GRADE A PALLETS						
FREIGHT-HG	EACH		1.0000	1.0000	0.0000	
HG PRO FREIGHT						

Shipping Instructions: 1) Hold all trailer loads at or below Pearl Valley Temperature Standards. 2) Pre-cool trailers prior to arrival at dock. 3) Once loaded, immediately exit dock area. 4) If at anytime trailer temperature exceeds 5° (F) +/- of Temperature Standard, Pearl Valley is to be notified, Adherence to the Temperature Standard is essential to the health and safety of all Pearl Valley customers. Thank you for your compliance.

Pearl Valley Temperature Standards: read and check Driver is to maintain Trailer Temperature at: Chill 33°F to 40°F OR Frozen -10°F to 20°F. If fertilizer, temperature standards do not apply.

All damaged product must be reported within 24 hours by proof of digital picture to orders@pearlvalleyfarms.com.

The following must be provided by all drivers: Printed first and last name. Full signature. Printed name of carrier. Date and time of pick-up. (If the preceding information is not provided, a service charge of \$200.00 will be charged to the company who has hired the driver. The service charge will then be deducted from the freight payment.) If transportation is arranged through a third party transportation broker, the carrier/ba-lee shall look exclusively to the third party transportation broker for payment of all freight/delivery charges.

Load Locks: ☐ Yes ☐ No

I verify that the load is secured and sealed.

Seal #: _____ Driver Initials: _____ License Plate #: _____

Driver: _____ (PLEASE PRINT) _____ (SIGNATURE)

Date: _____ Time of Pick-Up: _____ A.M. P.M.

Carrier: _____

Pallets in to Plant: _____ Pallets out of Plant: _____ CA SEFS COMPLIANT

Cases/Pounds	
Shipper	
Pallets in to Customer:	(DELIVERIES ONLY)
Pallets out from Customer:	
Received by Customer:	
Date: _____ Time: _____	A.M. P.M.

BILL OF LADING

PEARL VALLEY ORGANIX
968 S. KENT RD.
PEARL CITY, IL 61062
UNITED STATES
(815)-242-7650

BATCH CODE

REL

ORDER NO

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ORDER DATE

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Andrew Nugent
2-27-24

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Pearl Valley Temperature Standards: read and check

☐ Shell Eggs ☐ Frozen Eggs ☐ Fertilizer

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Pallets in to Plant _____ Pallets out of Plant: _____ CA SEFS COMPLIANT

Cases/Pounds	
Shipper	
Pallets in to Customer:	(DELIVERIES ONLY)
Pallets out from Customer:	
Received by Customer:	
Date: _____	Time: _____ A.M. P.M.