

**Bill to:**

MAGELLAN TRANSPORT LOGISTICS
2511 St Johns Bluff Road, Suite 107,
Jacksonville,
FL,
32246

Invoice Date: 02/27/2024

Invoice #: 1336139

Terms: NET 30

Due Date: 03/27/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/24/2024		35 Milk Mills Rd., New Concord, OH 43762 - 22050 Garvey Lane, Lakeville, MN 55044, USA			
			1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

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**



MAGELLAN Transport Logistics

Bill To Information

Please send invoices and backup information to:
Email: accounting@magellanlogistics.com
Fax: 866-728-9147

Sent By: William Pardee
Email: wpardee@magellanlogistics.com
Phone: (904) 441-0700
Fax:
Office: MI

Rate/Route Confirmation for Zigi Freight, Inc. \$1,400.00

Shipment Details					
Shipment #	1336139	Pallet Count	24	Carrier Miles	820.90
Cust Ref/PO #		Eq Type	53' Van or Reefer	Temperature	-
Todays Date	2/23/2024 13:04	Eq ID	000000		
Description of Merch:	RETAIL GOODS 24.00 Cases @ 43500.00 Pounds				

Carrier Details					
Carrier	Zigi Freight, Inc.	Driver Name	Santos Garay danyer (305) 988-4939		Mike X 113
MC	944686	Dispatch Phone	(630) 485-7370		
DOT #	2828543	Fax			
SCAC		Carrier Ref			

Stop Details						
Stop	Type	Pcs/Type/Wt	Address	Appt Date	Appt Time	PU/Delv #
1	Pickup	24 Cases 43500 lbs	US88 - C P New Concord 35 Rix Mills Rd New Concord, OH, 43762	2/24/24	18:30	Driver MUST call Magellan for Dispatch
2	Delivery	24 Cases 43500 lbs	COSTCO DEPOT 1376 3601 SW 10TH STREET OWATONNA, MN, 55060 PN: 0	2/26/24	08:30	1700582605224038

Shipment Line Items				
Pcs/Type	Pallets	Weight	STCC	Description
24 Cases	24	43500 lbs		RETAIL GOODS

Carrier Rate Agreement						
Item #	Charge Description	Unit Price	Unit Type	Unit Quantity	Rate	Note
1	Linehaul	\$1,200.00	Flat Rate	1	\$1,200.00	
2	GPS Load Tracking	\$200.00	Flat Rate	1	\$200.00	
Total:					\$1,400.00	

Shipment Notes	
Customer Note	<ul style="list-style-type: none"> - Missed pickups or deliveries w/out prior notification will result in a \$250 rate deduction per occurrence. - *** \$1,000 fine if the load is moved via intermodal/rail or if the seal is broken without Magellan's prior expressed permission. - Detention is FREE for the first 2 hours, then \$25 an hour after that with a MAX of \$150. - ** Reefer Trailers MUST be ARB compliant if picking up or delivering in CA - ** Driver MUST accept tracking text from Magellan Transport. If the driver cancels tracking enroute to receiver \$200 fine will be administered. - Magellan Transport must be notified of any accesorials within 48 hours of occurrence or reimbursement may be denied. - CARRIERS ARE NOT ALLOWED TO LOAD AMAZON TRAILERS THAT ARE GOING TO WALMART/SAM'S RECEIVERS. THE TRAILERS WILL BE REJECTED AT THE DC BECAUSE THEY ARE A COMPETITOR.

Terms of Agreement	
1.	Carrier shall be prohibited from using other motor carriers, brokers, or "substituted services" which includes but not limited to double brokering, rail, and partial unless approved by Magellan. Magellan will not compensate Carrier for shipments on which Carrier has utilized other motor carriers, brokers, or any substituted services for Shipper's Goods. Any broken/damaged seal, transload, or use of substitute service without prior approval from Magellan or Law Enforcement will result in 100% forfeiture of payment and a \$2,500 fine to the Carrier
2.	GPS tracking is required via FourKites or Macropoint. Failure to accept and comply throughout shipment to delivery could result in a deduction of \$300. Load must track the entirety of the shipment with GPS. Drivers are required to keep the tracking app open at all times. Closing the application, low battery mode, and airplane mode all stop tracking. Must ensure mobile data and GPS/Location Services are switched on and set to Always Allow.
3.	Carrier Agrees with the Above Rate Confirmation for Said Movement and Any Further Changes Must be Called and Documented With a New Rate Confirmation to Acknowledge Acceptance of Charges.
4.	All drivers must call Magellan to Receive Pick Up #
5.	Pick-up dates and hours will not require carrier to violate HOS regulations. Routing instructions, if any, are for informational purposes only.
6.	Payment by Magellan Will Be Made Within 30 Days of Receipt of: Invoice with Magellan Load # and/or Customer Reference number on it, Bill of Lading, Proof of Delivery, and Any Pre-Approved Accessorial Charges.
7.	Missed pick-ups/deliveries are subject to late fees
8.	All lump sum receipt's must be turned in within 2 business days of the shipment being delivered or risk possibility of not being reimbursed. POD must be turned in within 5 days of shipment delivery or a late fee of \$150 will be charged.
9.	POD must be notated with in and out times notated to be eligible for detention

10. Damages or missing freight must be reported – any failure to do so can result in a deduction

11. All Drivers Must Check Call For Following Events: Arrival at Shipper, Loaded at Shipper, Daily Location Update by 9am, Arrival at Destination, Unloaded at Destination

Zigi Freight, Inc.

6850 W 63RD STREET, CHICAGO, IL (If this is not your information, notify dispatch immediately)


Signature _____ Date _____
Magellan Transport Logistics, Inc.

Signature _____ Date _____
Zigi Freight, Inc.

******GET PAID NOW***DON'T WAIT 30 DAYS******

MAGELLAN TRANSPORT LOGISTICS AND MAGELLAN TRANSPORT INC. WILL ISSUE QUICK PAY VIA COMCHECK IF FOLLOWING CRITERIA ARE MET: QUICK PAY IS REQUESTED UPON BOOKING; CARRIER HAS COMPLETED AND RETURNED RAPID PAY FORM; UPON DELIVERY, POD AND INVOICE SENT TO MAGELLAN; CARRIER HAS SUCCESSFULLY DELIVERED AND BEEN PAID ON 1 PREVIOUS LOAD; AND APPROVAL HAS BEEN RECEIVED FROM VERIFIED EMAIL. NO APPROVAL FROM VERIFIED EMAIL – NO COD COST IS 5% (MINIMUM \$20) OF INVOICE, EXCLUDING ACCESSORIALS; WE WILL ISSUE A COMCHECK AS SOON AS PAPERWORK IS VERIFIED; CALL BOOKING DISPATCHER TO SET UP PAYMENT UPON DELIVERY. APPROVAL WILL STILL BE DETERMINED ON A CASE-BY-CASE BASIS AT THE SOLE DISCRETION OF MAGELLAN.



Date: 02/24/2024		BILL OF LADING		Page: 1	
SHIP FROM			Bill of Lading Number: 7001445270		
Name: Colgate					
Address: 35 Rix Mills Road			CP Delivery#2266949925		
City/State/Zip: New Concord, OH 43762			CARRIER NAME: MAGELLAN TRANSPORT		
SID#: _____			Trailer number: 232153		
FOB: <input type="checkbox"/>			Seal_Nbr: 4920394		
SHIP TO			PO#: 013760220003		
Name: PRICECOSTCO Location #: _____			CP DELIVERY#: 2266949925		
Address: 3601 10th St SW			SHIPMENT#: 7001445270		
City/State/Zip: OWATONNA, MN 55060-0000			SCAC: MGXB		
CID#: _____			Pro number: _____		
FOB: <input type="checkbox"/>			Freight Charge Terms:		
THIRD PARTY FREIGHT CHARGES BILL TO			(freight charges are prepaid unless marked otherwise)		
Name: Colgate c/o Transplace			Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>		
Address: P.O. Box 425					
City/State/Zip: Lowell, AR. 72745					
SPECIAL INSTRUCTIONS:					
DELIVERY BY 02/27/2024			<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of		
TIME 03:00 AM			(check box) Lading		

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO			
013760220003		24	38510.452 lbs	Y	N	2266949925 Stop# 1			
GRAND TOTAL		24	38510.452						
CARRIER INFORMATION									
SHIPPED		PACKAGE		WEIGHT	VOLUME	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY
QTY	TYPE	QTY	TYPE				<small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC.</small>		NMFC # CLASS
24	PAL	24	CAS	40070.452 lbs	1308.036		Toilet Preparations		59420-2 85
24		24		40070.452	1308.036		GRAND TOTAL		
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: *The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.							COD Amount: \$ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>		
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		
SHIPPER SIGNATURE/DATE This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.				Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <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 the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good Order, except as noted.			

Carrier Royal 13
Driver Name Santos
Driver Signature [Signature]
Date 2/24/24

BILL OF LADING - ME 878015547

Page 1 of 1

Date: 2/27/24

SHIP FROM

Name: COSTCO 1376
Address: 22050 GARVEY LN
City/State/Zip: LAKEVILLE, MN 55044
Contact: ODFL LVM

Phone: 555-555-1212

Shipment Number: 878015547



RA# 60496669

SHIP TO

Name: C/O NATIONAL DISTRIBUTION CENTER
Address: 35 RIX MILLS RD
City/State/Zip: NEW CONCORD, OH 43762
Delivery Date: 03-12-2024
Contact: Kim Zilka

Phone: (740) 826-0063

CARRIER NAME: OLD DOMINION FREIGHT LINE, INC.

Trailer number:

Seal number(s):

SCAC: ODFL Mileage : 774 Miles

Pro number:

BILL FREIGHT CHARGES TO:

Colgate
c/o Uber Freight US LLC, P.O. Box 425
Lowell, AR 72745 USA

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

Prepaid: Prepaid Add: Collect: 3rd Party:

☐
(check box)Master Bill of Lading: with attached
underlying Bills of Lading

SPECIAL INSTRUCTIONS:

CONSIGNEE NOTES: Please schedule your delivery appointments for New Concord at the following website -

<http://50.204.97.39/PrdLens749>

US88 group email / after hours: ColgateUS88OutboundScheduling@nfiindustries.com

CARRIER INFORMATION

HANDLING		QUANTITY		WEIGHT	H.M.(x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC	CLASS
		1	Pallet	1758.35 LBS		SKU US03802A - POL ULTRA 102Z PL SP ORIGINAL 240CT		50
0		1		1758.35 LBS		GRAND TOTAL		

CUSTOMER ORDER INFORMATION

Shipment Number	Customer PO Number	# Pkgs	Weight	Pallet/Slip	Additional Shipper info
7001445270		1	1758.35 LBS		SKU US03802A - POL ULTRA 102Z PL SP ORIGINAL 240CT
GRAND TOTAL		1	1758.35 LBS	0	

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

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 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

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 the applicable regulations of the DOT.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

02-27-2024

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

Consignee Stamp/Signature

BILL OF LADING - ME 878015547

Page 1 of 1

Date: 2/27/24

SHIP FROM

Name: COSTCO 1376
Address: 22050 GARVEY LN
City/State/Zip: LAKEVILLE, MN 55044
Contact: ODFL LVM

Phone: 555-555-1212

Shipment Number: 878015547



RA# 60496669

CARRIER NAME: OLD DOMINION FREIGHT LINE, INC.

SHIP TO

Name: C/O NATIONAL DISTRIBUTION CENTER
Address: 35 RIX MILLS RD
City/State/Zip: NEW CONCORD, OH 43762
Delivery Date: 03-12-2024
Contact: Kim Zilka

Phone: (740) 826-0063

Trailer number:

Seal number(s):

SCAC: ODFL Mileage: 774 Miles

Pro number:

BILL FREIGHT CHARGES TO:

Colgate
c/o Uber Freight US LLC, P.O. Box 425
Lowell, AR 72745 USA

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

Prepaid: Prepaid Add: Collect: 3rd Party:

☐
(check box)Master Bill of Lading: with attached
underlying Bills of Lading

SPECIAL INSTRUCTIONS:

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<http://50.204.97.39/PrdLens749>

US88 group email / after hours: ColgateUS88OutboundScheduling@nfilindustries.com

ODFL

39701381749

LVM

CARRIER INFORMATION

HANDLING		QUANTITY		WEIGHT	H.M.(x)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC	CLASS
		1	Pallet	1758.35 LBS		SKU US03802A - POL ULTRA 102Z PL SP ORIGINAL 240CT		50
0		1		1758.35 LBS		GRAND TOTAL		

CUSTOMER ORDER INFORMATION

Shipment Number	Customer PO Number	# Pkgs	Weight	Pallet/Slip	Additional Shipper Info
7001445270		1	1758.35 LBS		SKU US03802A - POL ULTRA 102Z PL SP ORIGINAL 240CT
GRAND TOTAL		1	1758.35 LBS	0	

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

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 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

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 the applicable regulations of the DOT.

The carrier shall not make delivery of this shipment without payment of freight
and all other lawful charges.

Shipper Signature

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE


02-27-2024

Carrier acknowledges receipt of packages and required placards. Carrier certifies
emergency response information was made available and/or carrier has the DOT
emergency response guidebook or equivalent documentation in the vehicle.

Consignee Stamp/Signature

[Signature]
Dpt ODFL 2/27/2024



Date: 02/24/2024		BILL OF LADING		Page: 1	
SHIP FROM		Bill of Lading Number: 7001445270			
Name: Colgate					
Address: 35 Rix Mills Road		CP Delivery#2266949925			
City/State/Zip: New Concord, OH 43762		CARRIER NAME: MAGELLAN TRANSPORT			
SID#: _____		Trailer number: 232153			
FOB: <input type="checkbox"/>		Seal_Nbr: 4920394			
SHIP TO		PO#: 013760220003			
Name: PRICECOSTCO Location #: _____		CP DELIVERY#: 2266949925			
Address: 3601 10th St SW		SHIPMENT#: 7001445270			
City/State/Zip: OWATONNA, MN 55060-0000		SCAC: MGXB			
CID#: _____		Pro number: _____			
THIRD PARTY FREIGHT CHARGES BILL TO		Freight Charge Terms:			
Name: Colgate c/o Transplace		(freight charges are prepaid unless marked otherwise)			
Address: P.O. Box 425		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>			
City/State/Zip: Lowell, AR. 72745		2-26 830-4 PM			
SPECIAL INSTRUCTIONS:		Master Bill of Lading: with attached underlying Bills of Lading			
DELIVERY BY 02/27/2024		<input type="checkbox"/> (check box) Lading			
TIME 03:00 AM					

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO			
013760220003		24	38510.452 lbs	Y	N	2266949925 Stop# 1			
GRAND TOTAL		24	38510.452						
CARRIER INFORMATION									
SHIPPED		PACKAGE		WEIGHT	VOLUME	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY
QTY	TYPE	QTY	TYPE				<small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC.</small>		NMFC # CLASS
24	PAL	24	CAS	40070.452 lbs	1308.036		Toilet Preparations		59420-2 85
24		24		40070.452	1308.036		GRAND TOTAL		
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows:						COD Amount: \$			
*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.						Fee Terms: Collect <input type="checkbox"/> Prepaid: <input type="checkbox"/>			
						Customer check acceptable: <input type="checkbox"/>			
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			
SHIPPER SIGNATURE/DATE				Trailer Loaded:		Freight Counted:		CARRIER SIGNATURE/PICKUP DATE	
This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.				<input checked="" type="checkbox"/> By Shipper		<input type="checkbox"/> By Shipper		Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.	
				<input type="checkbox"/> By Driver		<input type="checkbox"/> By Driver/pallets said to contain			
						<input type="checkbox"/> By Driver/Pieces			
				Property described above is received in good Order, except as noted.					

Carrier Royal 3
Driver Name Santos
Driver Signature [Signature]
Date 2/24/24

Seal intact

DOOR: 304 2/26/24
APP TIME: 8:30 ARR TIME: 8:00
IN TIME: 8:23 OUT TIME: 9:11
13760220003
8356-07

SEAL: BL/TRL:

RECVR: KE DAUFFENBACH

013760220003 COMMENTS:
ITEM 1032422
RFS 1 PLT DUE TO VEN DMG
PDD 13 PLT
RCV 12 PLT
OK BY DENNIS

PAGE 1 OF 1



DOOR: 304 OWATONNA DRY 2/26/24
APP TIME: 8:30 ARR TIME: 8:00
IN TIME: 8:23 OUT TIME: 9:11
13760220003
8356-07

SEAL: BL/TRL:

RECVR: KE DAUFFENBACH

013760220003 COMMENTS:
ITEM 1032422
RFS 1 PLT DUE TO VEN DMG
PDD 13 PLT
RCV 12 PLT
OK BY DENNIS

PAGE 1 OF 1

