

**Bill to:**

TQL (TOTAL QUALITY LOGISTICS)  
PO BOX 799,  
MILFORD,  
OH,  
45150

Invoice Date: 02/29/2024

Invoice #: PO# 27287563

Terms: NET 30

Due Date: 03/29/2024

| Date       | Customer Ref # | Origin - Destination                                                                                | Quantity | Rate       | Amount     |
|------------|----------------|-----------------------------------------------------------------------------------------------------|----------|------------|------------|
| 02/27/2024 |                | 445 E Rd, Chapman, NE 68827, USA - 9345 Princeton Glendale Rd, West Chester Township, OH 45011, USA |          |            |            |
|            |                |                                                                                                     | 1        | \$1,900.00 | \$1,900.00 |

|              |
|--------------|
| <b>TOTAL</b> |
| \$1,900.00   |

**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**

**DRIVER/CARRIER INFORMATION SHEET TQL PO# 27287563****Pickup Dates**  
2/27/24**Delivery Dates**  
2/29/24**TQL CONTACT INFO**

| Name           | Phone               | Email           | Fax        |
|----------------|---------------------|-----------------|------------|
| William Carter | 800-580-3101 x51788 | WCarter@TQL.com | 5135535412 |

**CARRIER CONTACT**

| Name            | Dispatcher | Driver           |
|-----------------|------------|------------------|
| ROYAL3 INC (il) | sterring   | heriberto Soldat |

**LOAD INFORMATION**

| Mode | Trailer Type | Trailer Size | Temperature | Pallet/Case Count | Hazmat        | Load Requirements |
|------|--------------|--------------|-------------|-------------------|---------------|-------------------|
| FTL  | Van          | 53 ft        |             | 0 pallets/0 cases | Non-Hazardous |                   |

**Special Temp Instructions****CARRIER RESPONSIBLE FOR**

|                  |                                 |                        |      |                         |       |
|------------------|---------------------------------|------------------------|------|-------------------------|-------|
| <b>Unloading</b> | None w/ valid unloading receipt | <b>Pallet Exchange</b> | None | <b>Estimated Weight</b> | 37000 |
|------------------|---------------------------------|------------------------|------|-------------------------|-------|

**PICKUPS**

| Shed                                                                 | City         | State          | Zip   | PU#       | Date      | Time                |
|----------------------------------------------------------------------|--------------|----------------|-------|-----------|-----------|---------------------|
| OVERHEAD DOOR (GRAND ISLAND, NE)                                     | Grand Island | NE             | 68801 | 114714669 | 2/27/2024 | Appt 16:00 to 18:30 |
| <b>Information:</b><br>2514 E US Highway 30<br>Grand Island NE 68801 |              |                |       |           |           |                     |
| <b>Commodities:</b>                                                  |              |                |       |           |           |                     |
| Quantity                                                             | Unit         | Commodity      | Notes |           |           |                     |
| 1                                                                    | Truckload    | Dock equipment |       |           |           |                     |

**DROPS**

| Consignee                                                                | City         | State | Zip   | Delivery PO | Date      | Time       |
|--------------------------------------------------------------------------|--------------|-------|-------|-------------|-----------|------------|
| ODC GREATER CINCINNATI (HAMILTON, OH)                                    | West Chester | OH    | 45011 |             | 2/29/2024 | Appt 08:00 |
| <b>Information:</b><br>9345 Princeton Glendale Road<br>Hamilton OH 45011 |              |       |       |             |           |            |



**Note to  
Carrier**

\*Close toed shoes required by the driver at all times\*  
TQL CARRIER DASHBOARD TRACKING REQUIRED AND MUST BE MAINTAINED THROUGHOUT TRANSIT  
\*Carrier agrees to communicate expected delivery ETA's to TQL\*  
\*MUST FOLLOW ADDRESSES ON SHIPPERs BOL UNLESS TOLD OTHERWISE\*  
\*CARRIER MUST SUBMIT ALL PAGES OF POD/BOL FOR PAYMENT\*  
TRACKING REQUIRED

**Carrier Requirements:**

Deliveries are preset. TQL must be notified in advance of early or late arrivals. Failure to communicate arrival times or arrival too early or late may result fines/fees being assessed.

TQL PO# 27287563

THIS AGREEMENT IS SUBJECT TO THE TERMS OF THE BROKER/CARRIER AGREEMENTS SIGNED BY THE CARRIER AND TQL. THIS AGREEMENT IS AN ADDENDUM TO THE BROKER/CARRIER AGREEMENT. THIS DOCUMENT IS ONLY FOR INFORMATIONAL PURPOSES.





## TQL RATE CONFIRMATION FOR PO# 27287563

FIND YOUR NEXT LOAD BY VISITING  
[CARRIERDASHBOARD.TQL.COM](https://carrierdashboard.tql.com)

TO ENSURE PROMPT PAYMENT, SUBMIT THIS RATE CONFIRMATION, COMPLETE BOL(S)/POD, RECEIPTS AND OTHER APPLICABLE PAPERWORK WITHIN 24 HOURS OF DELIVERY TO [CINVOICES@TQL.COM](mailto:CINVOICES@TQL.COM). FOR OTHER OPTIONS, SEE NEXT PAGE.

### TQL CONTACT INFO

| Name           | Phone               | Email           | Fax        |
|----------------|---------------------|-----------------|------------|
| William Carter | 800-580-3101 x51788 | WCarter@TQL.com | 5135535412 |

### CARRIER CONTACT

Office Staffed 24/7

| MC#/DOT#         | Name            | Phone        | Terms  | Fax          |
|------------------|-----------------|--------------|--------|--------------|
| 944686 / 2828543 | ROYAL3 INC (il) | 630-485-7370 | 28DAYS | 630-845-7370 |

#### Address

COMPASS FUNDING SOLUTIONS PO BOX 205154 DALLAS, TX 75320-5154

| Dispatcher | Driver           | Truck # | Trailer # |
|------------|------------------|---------|-----------|
| sterling   | heriberto Soldat | 768     | w99432    |

### LOAD INFORMATION

| Rate       | Type      | Unit | Quantity | Total      |
|------------|-----------|------|----------|------------|
| \$1,900.00 | Line Haul | Flat | 1        | \$1,900.00 |

Rates that are based on weight or count will be calculated from the quantities loaded.

**Total: \$1,900.00 USD**

| Mode                      | Trailer Type | Trailer Size | Linear Feet | Temperature | Pallet/Case Count | Hazmat        | Load Requirements |
|---------------------------|--------------|--------------|-------------|-------------|-------------------|---------------|-------------------|
| FTL                       | Van          | 53 ft        |             |             | 0 pallets/0 cases | Non-Hazardous |                   |
| Special Temp Instructions |              |              |             |             |                   | LxWxH         |                   |

| Pick-up Location | Date      | Time                |
|------------------|-----------|---------------------|
| Grand Island, NE | 2/27/2024 | Appt 16:00 to 18:30 |

#### Commodities:

| Pick Up # | Quantity | Unit      | Commodity      | Notes |
|-----------|----------|-----------|----------------|-------|
| 1         | 1        | Truckload | Dock equipment |       |

| Delivery Location | Date      | Time       |
|-------------------|-----------|------------|
| West Chester, OH  | 2/29/2024 | Appt 08:00 |

### CARRIER RESPONSIBLE FOR

|           |                                 |                 |      |                  |       |
|-----------|---------------------------------|-----------------|------|------------------|-------|
| Unloading | None w/ valid unloading receipt | Pallet Exchange | None | Estimated Weight | 37000 |
|-----------|---------------------------------|-----------------|------|------------------|-------|



T Q Y L



**Note to  
Carrier**

\*Close toed shoes required by the driver at all times\*

TQL CARRIER DASHBOARD TRACKING REQUIRED AND MUST BE MAINTAINED THROUGHOUT TRANSIT

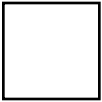
\*Carrier agrees to communicate expected delivery ETA's to TQL\*

\*MUST FOLLOW ADDRESSES ON SHIPPERs BOL UNLESS TOLD OTHERWISE\*

\*CARRIER MUST SUBMIT ALL PAGES OF POD/BOL FOR PAYMENT\*

TRACKING REQUIRED





If this box is checked, Carrier is required to mail original paperwork to TQL at the below address.

**CARRIER INVOICE #**

**FOR STANDARD MAIL**

TQL  
PO Box 799  
Milford, OH 45150

**OVERNIGHT INVOICING**

TQL  
1701 Edison Drive  
Milford, OH 45150

**QUICK PAY**

If your default payment terms are not Quick Pay and you would like Quick Pay on this load, please check one of the boxes below. Send your invoice to the Quick Pay email or fax listed below or via one of the document scanning options.

☐ 1 Day Quick Pay 5%

☐ 7 Day Quick Pay 3%

**METHODS TO SUBMIT PAPERWORK**

Submit completed and signed paperwork within 24 hours of delivery.

**EMAIL**

Quick Pay - [Quickpay@tql.com](mailto:Quickpay@tql.com)  
Standard - [cinvoices@tql.com](mailto:cinvoices@tql.com)

**DOCUMENT SCANNING**

[TQL Carrier Dashboard](#) - Send paperwork  
for FREE via our web and mobile app

**FAX**

Quick Pay - 513-688-8895  
Standard - 513-688-8782

**TRANSFLO Express** allows you to scan and send invoices  
and POD's to TQL for \$3.50 from participating truck stops.

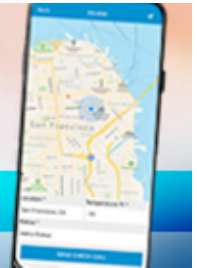
TQL must approve all accessorial terms/charges in advance and in writing. Payment of detention is determined on a load-by-load basis. Unauthorized charges will not be paid. Detention payment does not begin for at least 3 hours unless otherwise agreed to in writing. To qualify for additional compensation, the Carrier MUST notify TQL at least 30 minutes before beginning detention time and when arriving-on-time/departing from all shippers/receivers (unless the shipper/receiver will notate check in/out times on the paperwork).



**BOOK SELECT LOADS ONLINE WITH BOOK IT NOW**  
**ON TQL CARRIER DASHBOARD**

**SIGN IN >**

**USE TQL TRACKING**  
TO CUT DOWN ON CHECK CALLS



THIS IS AN AGREEMENT BETWEEN TQL AND CARRIER. CARRIER SHALL HAUL THE LOAD AT THE RATE ABOVE. CARRIER SHALL CALL TQL FOR LOAD INFORMATION. IF LOAD IS CHANGED OR CANCELED BY TQL, NO "TRUCK ORDER NOT USED" WILL BE PAID UNLESS TQL HAS PROVIDED THE CARRIER WITH LOAD DETAILS (PICK-UP NUMBER, SHIPPER NAME/ADDRESS AND DRIVER INFORMATION SHEET) AND APPROVED THE CARRIER TO BEGIN DRIVING TOWARDS THE PICK-UP LOCATION. THE SAFE, LEGAL AND PROPER OPERATION OF CARRIER SUPERSEDES ANY REQUEST, DEMAND, PREFERENCE, INSTRUCTION OR INFORMATION PROVIDED BY TQL OR ITS CUSTOMERS WITH RESPECT TO ANY SHIPMENT. IF ANY EMPLOYEE OF TQL OR ITS CUSTOMER REQUESTS, DEMANDS, OR INSTRUCTS CARRIER TO TAKE ANY ACTION THAT VIOLATES ANY LAW, CARRIER SHALL REFUSE TO TRANSPORT THE LOAD AND IMMEDIATELY CONTACT TQL BEFORE TAKING ANY FURTHER ACTION. CARRIER AGREES THAT WHEN IT CHOOSES TO TRANSPORT A LOAD IT DOES SO ON ITS OWN VOLITION, EXERCISING ITS OWN DISCRETION WITHOUT COERCION OR UNDUE INFLUENCE BY ANY INDIVIDUAL OR ENTITY. BY SIGNING THIS RATE CONFIRMATION AND/OR PERFORMING SERVICES FOR BROKER, CARRIER AFFIRMS THAT IT MAINTAINS KNOWLEDGE OF AND COMPLIANCE WITH ALL FEDERAL, STATE, AND LOCAL LAWS AND REGULATIONS, WHICH INCLUDES, BUT IS NOT LIMITED TO, ANY LAWS OR REGULATIONS RELATED TO CARB COMPLIANCE, THE CALIFORNIA TRANSPORT REFRIGERATION UNIT (TRU) OR AIRBORNE TOXIC CONTROL MEASURE (ATCM). CARRIER AFFIRMS THAT ALL OF ITS APPLICABLE EQUIPMENT TRAVELLING TO, FROM, OR WITHIN CALIFORNIA IS IN COMPLIANCE WITH CARB RULES AND REGULATIONS OR ANY OTHER SIMILAR REGULATIONS IN OTHER STATES WHEN TRAVELLING TO, FROM, OR WITHIN SUCH OTHER STATES. CARRIER FURTHER AFFIRMS THAT ALL EQUIPMENT IN ITS FLEET, INCLUDING ANY TRU EQUIPMENT, FURNISHED WILL BE IN COMPLIANCE WITH THE IN-USE REQUIREMENTS OF ALL OF CALIFORNIA'S TRU REGULATIONS AND, IF APPLICABLE, ANY ADDITIONAL REQUIREMENTS REQUIRED OF BROKER'S CUSTOMER. CARRIER WILL BE RESPONSIBLE FOR ANY AND ALL FINES ASSESSED AGAINST ANY PARTY FOR CARRIER'S FAILURE TO ADHERE, IN WHOLE OR IN PART, TO ANY REGULATION OR LAWS. THIS RATE CONFIRMATION IS INCLUSIVE OF ALL CHARGES.

IF THIS SHIPMENT RELATES TO A GOVERNMENT OR QUASI-GOVERNMENT CONTRACT (WHICH MAY INCLUDE, WITHOUT LIMITATION, FEDERAL, STATE, MUNICIPAL, OR POSTAL CONTRACTS), THEN THE SHIPMENT IS SUBJECT TO THE NOTICES AND COMPLIANCE REQUIREMENTS FOUND AT [HTTPS://WWW.TQL.COM/GOVERNMENT-CONTRACTOR-NOTICES.PDF](https://www.tql.com/government-contractor-notices.pdf) OR A HARD COPY WILL BE PROVIDED UPON WRITTEN REQUEST TO [COMPLIANCE@TQL.COM](mailto:COMPLIANCE@TQL.COM).

BY SIGNING THIS DOCUMENT, THE CARRIER AND ITS DRIVER AGREE THAT THEY MAY LEGALLY RECEIVE SMS (TEXT) MESSAGES ORIGINATING FROM TQL. RESPONDING TO OR READING A TQL SMS MESSAGE WHILE DRIVING A TRUCK OR MOTOR VEHICLE CAN CAUSE SERIOUS INJURY, DEATH, OR PROPERTY DAMAGE TO YOU OR OTHERS. DO NOT READ OR REPLY TO A MESSAGE UNLESS YOUR VEHICLE IS STATIONARY AND PARKED. THE CARRIER, DRIVER, AND ANY OTHER EMPLOYEE AND/OR AGENT FOR CARRIER ASSUME ALL RESPONSIBILITY FOR ABIDING BY THESE INSTRUCTIONS AND AGREE THAT THEY WILL COMPLY WITH ALL APPLICABLE FEDERAL, STATE AND LOCAL LAWS INCLUDING, BUT NOT LIMITED TO: RECEIVING, READING AND/OR SENDING SMS MESSAGES, PHONE CALLS, AND/OR ANY OTHER INFORMATION TO OR FROM THE BROKER. CARRIER AGREES TO INDEMNIFY AND HOLD TQL HARMLESS TO THE FULLEST EXTENT PERMITTED BY LAW FOR ANY AND ALL CLAIMS OF ANY NATURE ARISING OUT OF OR RELATING TO THE HAULING OF THIS LOAD, THE VIOLATION OF THE TERMS OF THE BROKER-CARRIER AGREEMENT OR THIS RATE CONFIRMATION.



T Q Y L



**Carrier Requirements:**

Deliveries are preset. TQL must be notified in advance of early or late arrivals. Failure to communicate arrival times or arrival too early or late may result fines/fees being assessed.

**TQL PO# 27287563**

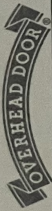
\_\_\_\_\_  
Carrier Representative Signature

\*By electronically signing below and acknowledging acceptance, I confirm I have the authority to act on behalf of, and bind the undersigned individual and/or entity and have agreed to the terms

Name\* S/ **Sterling Medica**



The Genuine. The Original.



Trip Name : 114714669

| Date: 27 FEB-2024                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Page 1 of 4                                                                                                                                                                                                                                                                       |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>SHIP FROM</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <b>MASTER BILL OF LADING</b>                                                                                                                                                                                                                                                      |  |
| Name: Overhead Door Corp. Grand Island Plant<br>Address: 2514 E. Highway 30<br>City/State/Zip: Grand Island/NE 68801                                                                                                                                                                                                                                                                                                                                                                   |  | Bill of Lading Number: 84718-1000375544-0<br><br>84718-1000375544-0                                                                                                                              |  |
| SID#: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | CARRIER NAME: TOTAL QUALITY LOGISTICS INC                                                                                                                                                                                                                                         |  |
| Name: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Trailer number: W94943                                                                                                                                                                                                                                                            |  |
| Address: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Seal number: E9870888                                                                                                                                                                                                                                                             |  |
| City/State/Zip: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | SCAC: TOYL                                                                                                                                                                                                                                                                        |  |
| CID#: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Pro Number: _____                                                                                                                                                                                                                                                                 |  |
| Name: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | Freight Charge terms: (freight charges are prepaid unless marked otherwise): Prepay & Add                                                                                                                                                                                         |  |
| Special Instructions: Underlying Bill of Lading Numbers:<br>84718-1000837465, 84718-1000837466, 84718-1000837467, 84718-1000837468, 84718-1000837469, 84718-1000837470, 84718-1000837471, 84718-1000837472, 84718-1000837473, 84718-1000837474, 84718-1000837475, 84718-1000837476, 84718-1000837477                                                                                                                                                                                   |  | <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading                                                                                                                                                                                          |  |
| "Multiple Stop Load"                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | Lading                                                                                                                                                                                                                                                                            |  |
| Trip Stop Summary                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Weight: 22697.26 Pieces: 562                                                                                                                                                                                                                                                      |  |
| Step 1 9345 Princeton Glendale Rd, Hamilton, OH 45011-9707                                                                                                                                                                                                                                                                                                                                                                                                                             |  | COD Amount: \$ _____                                                                                                                                                                                                                                                              |  |
| 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 _____"                                                                                                                                                                                                         |  | FREIGHT: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/><br>Customer check acceptable: <input type="checkbox"/>                                                                                                                                               |  |
| <b>NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).</b><br>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. |  | Signature _____ Shipper                                                                                                                                                                                                                                                           |  |
| <b>SHIPPER SIGNATURE / DATE</b><br>This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and is in proper condition for transportation according to the applicable regulations of the DOT.                                                                                                                                                                                                                               |  | <b>CARRIER SIGNATURE / PICKUP DATE</b><br>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. |  |
| Trailer Loaded: Freight Counted:<br><input type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver<br><input type="checkbox"/> By Driver/pallets said to contain<br><input type="checkbox"/> By Driver/Placards                                                                                                                                                                                                                                                             |  | Property described above is received in good order, except as noted.                                                                                                                                                                                                              |  |

62/27/2024

The Genuine. The Original.



Trip Name : 114714669

Page 2 of 4

**BILL OF LADING**

Date: 27-FEB-2024

**SHIP FROM**

Name: Overhead Door Corp. Grand Island Plant  
Address: 2514 E. Highway 30

City/State/Zip: Grand Island/NE/68801

SID#:

FOB: ☐

**SHIP TO**

Name: ODC Greater Cincinnati-Hamilton  
Address: 9345 Princeton Glendale Rd

Location:

City/State/Zip: Hamilton/OH/45011-9707

CID#:

FOB: ☐

**THIRD PARTY FREIGHT CHARGES BILL TO**

Name: Overhead Door  
Address: C/O Redwood Logistics, P.O. Box 40088, Bay Village  
State/Zip: OH/44140-0088

Special Instructions:

CARRIER NAME: TOTAL QUALITY LOGISTICS INC

Trailer number: W94943

Seal number: E9870888

SCAC: TOYL

Pro Number:

Freight Charge terms: (freight charges are prepaid unless marked otherwise): Prepay & Add

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

**CUSTOMER ORDER INFORMATION**

**ADDITIONAL SHIPPER INFO**

| CUSTOMER ORDER NUM | PURCHASE ORDER | #PCS | WEIGHT  | PALLETS/SLIP (CIRCLE ONE) |   |
|--------------------|----------------|------|---------|---------------------------|---|
| 2577366            | 110508         | 108  | 3317.71 | Y                         | N |
| 2581281            | 110537         | 12   | 239.88  | Y                         | N |
| 90041157           | 109513         | 1    | 120.62  | Y                         | N |
| 2593328            | 110631         | 8    | 323.09  | Y                         | N |
| 2546323            | 110280         | 8    | 684.27  | Y                         | N |
| 2592982            | 110627         | 11   | 241.54  | Y                         | N |
| 2544244            | 110570         | 16   | 343.82  | Y                         | N |
| 2581333            | 110539         | 18   | 410.4   | Y                         | N |
| 2581304            | 110538         | 18   | 410.39  | Y                         | N |
| 2587932            | 110585         | 21   | 459.9   | Y                         | N |
| 2583854            | 110555         | 14   | 356.44  | Y                         | N |
| 2590010            | 110601         | 2    | 86.21   | Y                         | N |
| 2604143            | 110703         | 5    | 253     | Y                         | N |
| 2544116            | 110568         | 9    | 252.26  | Y                         | N |
| 2583739            | 110554         | 11   | 241.55  | Y                         | N |
| 2570054            | 110468         | 4    | 328.88  | Y                         | N |
| 2578483            | 110516         | 12   | 248.46  | Y                         | N |
| 2576688            | 110504         | 35   | 2231.74 | Y                         | N |
| 2600269            | 110674         | 2    | 117.68  | Y                         | N |
| 2604608            | 110707         | 1    | 32.58   | Y                         | N |
| 2599368            | 110672         | 390  | 7648.04 | Y                         | N |
| 2604616            | 110704         | 10   | 201.43  | Y                         | N |
| 2584016            | 110565         | 11   | 298.3   | Y                         | N |
| 2591293            | 110610         | 4    | 150.22  | Y                         | N |
| 2581483            | 110542         | 5    | 395.21  | Y                         | N |
| 2568162            | 110450         | 60   | 1236.43 | Y                         | N |
| 2561940            | 110409         | 1    | 94.68   | Y                         | N |
| 2581247            | 110536         | 21   | 523.88  | Y                         | N |
| 2580511            | 110528         | 10   | 104.59  | Y                         | N |



The Genuine. The Original.



Trip Name : 114714669

|                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                        |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Date: 27-FEB-2024                                                                                                                                                                                                                                         |  | Page 4 of 4                                                                                                                                                                                                                                                                                                                                            |  |
| <b>SHIP FROM</b>                                                                                                                                                                                                                                          |  | <b>BILL OF LADING</b>                                                                                                                                                                                                                                                                                                                                  |  |
| Name: Overhead Door Corp. Grand Island Plant<br>Address: 2514 E. Highway 30<br>City/State/Zip: Grand Island/NE/68801<br>SID#:                                                                                                                             |  | Bill of Lading Numbers: 84718-1000837465, 84718-1000837466, 84718-1000837467, 84718-1000837468, 84718-1000837469, 84718-1000837470, 84718-1000837471, 84718-1000837472, 84718-1000837473, 84718-1000837474, 84718-1000837475, 84718-1000837476, 84718-1000837477                                                                                       |  |
| <b>SHIP TO</b>                                                                                                                                                                                                                                            |  | CARRIER NAME: TOTAL QUALITY LOGISTICS INC                                                                                                                                                                                                                                                                                                              |  |
| Name: ODC Greater Cincinnati-Hamilton<br>Address: 9345 Princeton Glendale Rd<br>City/State/Zip: Hamilton/OH/45011-5707<br>CID#:                                                                                                                           |  | Trailer number: W94943<br>Seal number: E9870888<br>SCAC: TOYL<br>Pro Number:                                                                                                                                                                                                                                                                           |  |
| <b>THIRD PARTY FREIGHT CHARGES BILL TO</b>                                                                                                                                                                                                                |  | Freight Charge terms: (freight charges are prepaid unless marked otherwise) Prepay & Add<br><input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading                                                                                                                                                                    |  |
| Name: Overhead Door<br>Address: C/O Redwood Logistics, P.O. Box 40088, Bay Village<br>State/Zip: OH/44140-0088<br>Special instructions:                                                                                                                   |  | CARRIER SIGNATURE / PICKUP DATE<br>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.<br><br>Property described above is received in good order, except as noted. |  |
| <b>SHIPPER SIGNATURE / DATE</b><br>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. |  | <b>Trailer Loaded: Freight Counted:</b><br><input type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver<br>Driver/pallets said to contain<br><input type="checkbox"/> By Driver/Pieces                                                                                                                                                    |  |

The Genuine, The Original.



Trip Name : 114714669

| MASTER BILL OF LADING                                                                                                                                                                                                                                                                                                                                                                                                              |  | Page 1 of 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Date:</b> 27 FEB 2024<br><b>Name:</b> Overhead Door Corp. Grand Island Plant<br><b>Address:</b> 2514 E. Highway 30<br><b>City/State/Zip:</b> Grand Island NE 68001<br><b>SID#:</b><br><b>Name:</b><br><b>Address:</b><br><b>City/State/Zip:</b><br><b>CID#:</b>                                                                                                                                                                 |  | <b>SHIP FROM</b><br><b>Bill of Lading Number:</b> 84718-1000375544-0<br><br><b>CARRIER NAME:</b> TOTAL QUALITY LOGISTICS INC<br><b>Trailer number:</b> V94843<br><b>Seal number:</b> E9870888<br><b>SCAC:</b> TOTL<br><b>Pro Number:</b><br><b>Freight Charge terms:</b> (weight charges are prepaid unless marked otherwise) Prepay & Add<br><b>Master Bill of Lading:</b> with attached underlying Bills of Lading<br><b>Freight Charge terms:</b> (weight charges are prepaid unless marked otherwise) Prepay & Add |  |
| <b>SHIP TO</b><br><b>Location:</b><br><b>City/State/Zip:</b><br><b>CID#:</b>                                                                                                                                                                                                                                                                                                                                                       |  | <b>SHIP TO</b><br><b>Location:</b><br><b>City/State/Zip:</b><br><b>CID#:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |
| <b>THIRD PARTY FREIGHT CHARGES BILL TO</b><br><b>Name:</b>                                                                                                                                                                                                                                                                                                                                                                         |  | <b>THIRD PARTY FREIGHT CHARGES BILL TO</b><br><b>Name:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| <b>Special Instructions:</b> Underlying Bill of Lading Numbers:<br>84718-100037465, 84718-100037466, 84718-100037467, 84718-100037468, 84718-100037469, 84718-100037470, 84718-100037471, 84718-100037472, 84718-100037473, 84718-100037474, 84718-100037475, 84718-100037476, 84718-100037477                                                                                                                                     |  | <b>Multiple Stop Load*</b><br><b>Stop 1:</b> 9345 Princeton Gandale Rd Hamilton OH 45011-9707<br>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 _____"                                                                                                                                        |  |
| <b>NOTE:</b> Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).<br>RECEIVED: Subject to provisions determined by the carrier and its agents, the carrier shall not make delivery of this shipment without payment of freight and other lawful charges.<br>The carrier shall not make delivery of this shipment without payment of freight and other lawful charges. |  | <b>NOTE:</b> Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).<br>RECEIVED: Subject to provisions determined by the carrier and its agents, the carrier shall not make delivery of this shipment without payment of freight and other lawful charges.<br>The carrier shall not make delivery of this shipment without payment of freight and other lawful charges.                                                                                     |  |
| <b>SHIPPER SIGNATURE / DATE</b><br>This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and is in proper condition for transportation according to the applicable regulations of the DOT.                                                                                                                                                                           |  | <b>SHIPPER SIGNATURE / DATE</b><br>This is to certify that the above named materials are property classified, described, packaged, marked and labeled, and is in proper condition for transportation according to the applicable regulations of the DOT.                                                                                                                                                                                                                                                               |  |
| <b>TRAILER LOADED: Freight</b><br><b>Counted:</b><br><input type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver<br><input type="checkbox"/> By Driver/pallets<br><input type="checkbox"/> By Driver/Pieces                                                                                                                                                                                                          |  | <b>TRAILER LOADED: Freight</b><br><b>Counted:</b><br><input type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver<br><input type="checkbox"/> By Driver/pallets<br><input type="checkbox"/> By Driver/Pieces                                                                                                                                                                                                                                                                                              |  |
| <b>CARRIER SIGNATURE / PICKUP DATE</b><br>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.                                                                                                                                                  |  | <b>CARRIER SIGNATURE / PICKUP DATE</b><br>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.                                                                                                                                                                                                                                      |  |
| <b>Property described above is received in good order, except as noted</b>                                                                                                                                                                                                                                                                                                                                                         |  | <b>Property described above is received in good order, except as noted</b>                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |

02/27/2024  
 Pickup 10:50 PM  
 Out 12:00 AM  
 Delivery 10:00 AM  
 Out 11:30 AM