



Bill to:
ZIP LINE LOGISTICS

Invoice Date: 03/03/2024
Invoice #: 0536191
Terms: NET 30
Due Date: 04/03/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/01/2024		2388 Monroe Dr, Gainesville, GA 30507 - 390 Highridge Park Rd, Pottsville, PA 17901, 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



RATE CONFIRMATION

**** No Accessorials will be paid without Zipline's prior written authorization ****

*** Carrier must call Zipline when empty to acknowledge receipt of dispatch information
@ (888) 469-4754***

TONU will not be paid unless driver has called in and been dispatched by Zipline directly

* Carrier must report any overages, shortages, damaged product and other irregularities
immediately to Zipline*

Delivery and pick up dates and times will not require Carrier to violate any safety regulations, including hours of service. At all times Carrier must ensure safe and legal operations.

Carrier shall notify Shipper or Receiver through Zipline of any anticipated delays in meeting the scheduled date or times indicated for this shipment. Any directions given by ZIPLINE or its Customers to Carrier, whether orally or in writing, are solely for informational purposes. Carrier is solely responsible for making all decisions relating to delivering every load. Carrier must operate their vehicle lawfully and safely over all roads, highways, bridges or routes. Carrier is solely responsible for all fines, penalties, and citations that may be assessed as a result of their delivering this load, including but not limited to any violation of any regulation, law or ordinance in operating their vehicle or regarding their trailer and its contents.

This Rate Confirmation is subject to the terms of Zipline's Broker-Carrier Agreement, constitutes an addendum to it, and is intended to emphasize, rather than limit it. This Rate Confirmation is inclusive of all charges. Carrier agrees that it reflects the entire amount due and that no other amount will be invoiced to Zipline. Carrier agrees to all terms in this Rate Confirmation through its electronic signature. Carrier's invoice must include all original paperwork, including an original Bill of Lading, delivery receipt, and this signed rate confirmation. All invoices must reference the Zipline's PRO # referenced above.

Carrier hereby restates all obligations under Zipline's Broker-Carrier Agreement and reaffirms its intent to be bound thereby.

Zipline Logistics, LLC

(888) 469-4754

www.ziplinelogistics.com

1600 Dublin Road

Suite 1200

Columbus, OH 43215

FOR BILLING: PLEASE SEND PAPERWORK TO INVOICES@ZIPLINELOGISTICS.COM

If there are any questions, please contact us at accounting@ziplinelogistics.com

Order ID:
0536191



Page 1

Zipline Logistics, LLC
1600 Dublin Road South Suite 1200
Columbus, OH 43215
P: (614) 458-1145
F: (614) 386-1783

Carrier: ROYAL3 INC
CHICAGO IL 60638
Date: 02/29/2024

Contact: Al
Phone: (630) 485-7370 x142
Fax:

Driver:
Phone:
Email:

****FULL TRUCKLOAD SHIPMENT - REQUIRES EXCLUSIVE USE OF TRAILER, CANNOT MOVE WITH OTHER FREIGHT****

Order:	0536191	Miles:	705.0	Commodity:	Food Ingredients
UN #:		Skid Count:	27	Temp:	-
Pick Up No.:	8464215	Pieces:		Weight:	44174.0
Delivery No.:	1180934267	Trailer:	Van (DAT)	Value:	100000.00

PU 1	Name:	Corpstar 1001	Date:	03/01/2024 1100 - 03/01/2024 1100
	Address:	2388 Monroe Dr		
	Address 2:		Phone:	
	City/St/Zip:	GAINESVILLE GA 30507	Driver Load:	No Driver Touch

Cust Ref #: PO 2015279755
Cust Ref #: PU 8464215

Weight: Pieces:

SO 2	Name:	Wal-Mart #7030	Date:	03/03/2024 0900 - 03/03/2024 0900
	Address:	390 Highridge Park Rd		
	Address 2:		Phone:	(570) 544-1398
	City/St/Zip:	POTTSVILLE PA 17901	Driver Load:	No Driver Touch

Cust Ref #: PO 1180934267

Payment	Carrier Freight Pay:	\$1,500.00
	On-Time Delivery Required	100.00
	Total Carrier Pay:	\$1,600.00

Instructions

Corpstar 1001 - Must use Dry Trailer. Cannot be loaded on Reefer trailer

Corpstar 1001 - CARGWAMN: DRIVERS NEED TO DOUBLE CHECK THAT TRAILER IS SEALED ONCE LOADED AT SHIPPER.

IF SEAL IS NOT INTACT, DRIVER MUST INFORM ZIPLINE AND SHIPPER FOR ALTERNATIVE SOLUTION.

Wal-Mart #7030 - ORDERS MUST BE DELIVERED ON THE DUE DATE SET BY ZIPLINE, DO NOT RESCHEDULE, DO NOT ATTEMPT TO DELIVER A DAY EARLY OR A DAY LATE WITHOUT PRIOR APPROVAL, AS THIS RESULTS IN CHARGEBACK TO THE CUSTOMER.

VIOLATION OF THE ABOVE WILL RESULT IN A \$150 FINE.

****All Invoices and supporting documentation are processed through HubTran. Please send documents to Invoices@ziplinelogistics.com for processing and payment.**

Zipline leverages Trucker Tools and Macropoint for track and trace visibility. If you do not already utilize, please consider doing so to alliviate the need for manual callins, and access the many other resources that these services provide for drivers.

Please Sign: *Al Milanovic*

(X) Accept

() Decline

Driver Name: Eric

Driver Cell: 5126951220

Driver Email:

Tractor #: 769

Trailer #: H03261

PACKING LIST

Ship From: 285M
GAINESVILLE GA US CORPSTR 1001
2380 MONROE DR
GAINESVILLE GA 30607-7343
GA

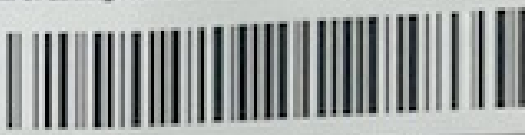


Ship To: 2500028278
WAL MART 7030 POTTSVILLE
390 HIGHROCK PARK RD
POTTSVILLE, PA, US , 17901-8100

Delivery Number: 813518801
Shipment Date: MAR.01.2024
Delivery Date: MAR.03.2024
Carrier S/CAC: ZPL
Carrier Name: ZPLINE LOGISTICS, LLC
Container/Trailer Id: HC03281
Seal Numbers: 4403402

Master BOL Number: 2015279755
Sub BOL Number: 20152797550020
Load Sequence: 0020
Shipping Conditions: Full Truck Load
Incoterms: CIP,POTTSVILLE


Item	Material Sales Order Item Level notes	Material Description Customer PO Number	Customer- Material	Batch U PC	Qty	Net Weight/ UoM	Gross Weight/ UoM	Volume COO UoM
20	110029341 0008484215	QV ANIM-VEG SHORTNO	572479065	082523	55.000 CV	1,575.000 LB	1,729.350 LB	58.300 FT3
		1180934267		078742352985				
30	110030958 0008484215	128oz QV Veg	575499325	0039808005	128.000 CV	5,898.240 LB	6,322.814 LB	208.438 FT3
		1180934267		078742210001				
40	110030948 0008484215	128oz QV Corn	575499326	0039532370	128.000 CV	5,890.560 LB	6,049.608 LB	206.170 FT3
		1180934267		078742228792				
50	110030995 0008484215	128oz QV Cando	575499327	0039842861	512.000 CV	23,470.080 LB	25,159.926 LB	821.433 FT3
		1180934267		078742122052				
60	110031004 0008484215	128oz QV Peanut	575499328	0039727470	32.000 CV	1,464.960 LB	1,567.507 LB	51.274 FT3
		1180934267		078742016931				

Bill of Lading

SHIP FROM (ORIGIN)		Bill of Lading Number: 2015279755	
Name: CARGILL INCORPORATED Address: 2380 MONROE DR. GAINESVILLE GA 30607-7343 USA Order#(s): 8454215			
SHIP TO (CONSIGNEE)		CARRIER NAME: ZIPLINE LOGISTICS, LLC	
Name: WALMART INC. Address: 390 HIGHRISE PARK RD. POTTSVILLE PA 17901-8100 US		Trailer number: H03281 Seal number(s): 443402 SCAC: ZIPL Pre number: ROYAL TREE Equipment Type: TL Pkg Amb - 53'	
BILL TO:		Gross Weight: 74149.302 LB	
Name: Dressings, Sauces and Oils		Tare Weight: 32000.000 LB	
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3 rd PARTY <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading	
SPECIAL INSTRUCTIONS ATTN: MATERIAL SPECIFIC SHIP INSTRUCTIONS (E.G. TEMP REQ) CAN BE REVIEWED ON THE PACKING LIST AND/OR THE CERTIFICATE OF ANALYSIS SEE ATTACHED SUPPLEMENT			
CUSTOMER ORDER INFORMATION			
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	ADDITIONAL SHIPPER INFO
1180934257	850 CV	38298.840 LB	
GRAND TOTAL	850 CV	38298.840 LB	
CARRIER INFORMATION			
HANDLING UNIT	PACKAGE	WEIGHT	COMMUNITY DESCRIPTION
QTY TYPE	QTY TYPE		LTL ONLY
			NMFC # CLASS
56 PAL	850 CV	43149.302 LB	GRAND TOTAL
When the B/L is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property or goods. The agreed or declared value of the property is specifically stated in the Shippers B/L as not exceeding _____		COD Amount \$ 0.00 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(a)(1)(A) and (B). The carrier shall not make delivery of the shipment without payment of freight and all other lawful charges.	
SHIPPER SIGNATURE / DATE 		CARRIER SIGNATURE / PICKUP DATE 	
Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets used to contain <input type="checkbox"/> By Driver/Pieces	
Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidelines or equivalent documentation in the vehicle. Property shown that above is received in good order, except as noted.			

Bill of Lading

Date: Mar 1, 2024

SHIP FROM (ORIGIN):		Bill of Lading Number: 2015279755
Name: CARGILL INCORPORATED Address: 2380 MONROE DR. GAINESVILLE GA 30507-7343 USA Order#(s): 8464215		
SHIP TO (CONSIGNEE):		CARRIER NAME: ZIPLINE LOGISTICS, LLC
Name: WALMART INC. Address: 390 HIGHRIDGE PARK RD, POTTSVILLE PA 17901-8100 US		Trailer number: H03261 Seal number(s): 443402
		SCAC: ZIPL Pro number: ROYAL TREE Equipment Type: TL Pkg Amb - 53'
BILL TO:		Gross Weight: 74149.302 LB
Name: Dressings, Sauces and Oils		Tare Weight: 32000.000 LB
		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd PARTY <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:

ATTN: MATERIAL SPECIFIC SHIP INSTRUCTIONS (E.G. TEMP REQ) CAN BE REVIEWED ON THE PACKING LIST AND/OR THE CERTIFICATE OF ANALYSIS
SEE ATTACHED SUPPLEMENT

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	ADDITIONAL SHIPPER INFO
1180934267	850 CV	38298.840 LB	
GRAND TOTAL	850 CV	38298.840 LB	

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION 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 (e) of NMFC Item 360	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
26	PAL	850	CV	42149.302 LB		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: \$ 0.00

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.

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 Department of Transportation.

Trailer Loaded:

☐ By Shipper

☐ By Driver

Freight Counted:

☐ By Shipper

☐ By Driver/pallets said to contain

☐ 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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

Page 2 of 2

Bill of Lading Number: 2015279755

© 2004 Blackwell Publishing Ltd, *Journal of Clinical Pharmacy and Therapeutics*, 29, 117–124

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SUP (Circle One)		ADDITIONAL SHIPPER INFO
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
PAGE SUB TOTAL					

© Andrew D. Hall, 2004

HANDLING UNIT		PACKAGE		CARRIER INFORMATION					
QTY	TYPE	QTY	TYPE	WEIGHT		R.M.	COMMODITY DESCRIPTION	NMFC #	CLASS
1				70.000	LB		PALLET CHEP BLUE 40X48IN USBLOCK		50
25				1250.000	LB		PALLET RT BLACK 40X48IN IOPS		50
		32	CV	1567.537	LB		125oz OV Peanut		55
		50	CV	1725.350	LB		OV ANIMATED SHORTING		55
		128	CV	8048.805	LB		125oz OV Corn		55
		128	CV	8022.914	LB		125oz OV Veg		55
		512	CV	25158.926	LB		125oz OV Canola		55
26		850	CV	42145.302	LB		PAGE SUB TOTAL		

[illegible]

© 2004 Blackwell Publishing Ltd, *Journal of Internal Medicine* 255: 111–117

Bill of Lading

Date: 08/15/2011 Bill of Lading Number: 0000000000	
Shipper: [Name] Address: [Address] City: [City] State: [State] Zip: [Zip]	
Consignee: [Name] Address: [Address] City: [City] State: [State] Zip: [Zip]	Freight Status: [Status] Freight Type: [Type] Freight Rate: [Rate] Freight Basis: [Basis] Freight Terms: [Terms] Freight Charges: [Charges] Freight Status: [Status] Freight Charges: [Charges]
Total Weight: [Weight] Total Volume: [Volume]	Total Weight: [Weight] Total Volume: [Volume]

WE warrant that the information on this bill of lading is true and correct to the best of our knowledge and belief.

SHIPMENT INFORMATION			
SHIPMENT NUMBER	QUANTITY	WEIGHT	UNIT OF MEASURE
0000000000	100	1000	KG

SHIPMENT INFORMATION				
SHIPMENT NUMBER	QUANTITY	WEIGHT	UNIT OF MEASURE	SHIPMENT STATUS
0000000000	100	1000	KG	0000000000

Shipper Signature: [Signature] Date: [Date]	Consignee Signature: [Signature] Date: [Date]
Carrier Signature: [Signature] Date: [Date]	Receiver Signature: [Signature] Date: [Date]

PACKING LIST

1997-1998
 1998-1999
 1999-2000
 2000-2001
 2001-2002

Box 76
Box, North Pitts Pottsville
Box, North Pitts Pottsville
Box, North Pitts Pottsville
Box, North Pitts Pottsville

Delivery Number	01000001
Shipment Date	2008-01-09
Delivery Date	2008-01-09
Carrier S/A/C	000
Carrier Name	EXPRESS LOGISTICS, LLC
Container/Trailer ID	HL0000
Trail Numbers	HL0000

Water BOCs Number	2015276768
Base BOCs Number	2015276768000
Level Sequence	0020
Shipping Conditions	Full Truck Load
Incoterms	C&F PORT TIANJIN

[illegible]

TRAILER CONTROL RECORD 2357457

DCR DC 7030

SLN#	ZPL	2546253	05030524 05 50	05030524 04 30
TRAILER#	CARRIER	DELIVERY#	APPT TIME	ARRIVAL DT

ARRIVAL INFORMATION

TRAILER SEAL # (H&D)	SEALED BY (H&D)	DATE/TIME
AP (ARRIVAL) SEAL #	CURRENT SEAL # (H&D)	
ACTUAL WEIGHT TONS	WEIGHT	WEIGHT
NET WEIGHT TONS	WEIGHT	WEIGHT

RECEIVING OFFICE

GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5
---------	---------	---------	---------	---------

RECEIVING DOCK

GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5
RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY
RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY
RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY	RECEIVED BY

TRAILER SEALS - (H&D) (H&D) (H&D) (H&D) (H&D)

RETURN/TRANSFER

GROUP 1	GROUP 2	GROUP 3	GROUP 4	GROUP 5
---------	---------	---------	---------	---------

RE-ENTRY

RE-ENTRY

TRAILER RELEASED BY (H&D)

AP (ARRIVAL)

RECEIVED TONS

WEIGHT

Report to R

RECEIVING INFORMATION



Item #	SLN#	Date	AP
--------	------	------	----

Item #	05030524 05 50	Date	05/03/24
Carrier	ZPL	Date	05/03/24
SLN#	2546253	Date	05/03/24
Weight	05030524 05 50	Date	05/03/24
Item #	05030524 05 50	Date	05/03/24
Item #	05030524 05 50	Date	05/03/24

I have read and understand the printed copy of this - Trail's Agreement (by law or regulation)
 Date Signature _____



Item # 2546253

DC 7030

212

Item Report

PO Number: 118004297 Vendor: 800258023 Total Cases: 800 Total Pallets: 27

Delivery Number: 23494253 Warehouse Area Group: Dry Grocery Purchaser Company Name: WMT USA

PLEASE PALLETTE ACCORDING TO LISTING DIRECT ALL OUTSTANDING TO RECEIVING CLERK - THANK YOU

UPC	TI	HE	Description	Cases	Pallets	Item Number	Pack	Size	Inventory	Code	Date	PUT
000000000000	5	1	OV AVAIL VEO SPICETED	80	2	070470000	12	400Z	P 00010			N
000000000000	5	15	OV VEO SPICETED 400	8	0	070470000	12	400Z	P 00010			N
000000000000	8	4	OV PEANUT OIL 1280	32	1	070470000	8	0280Z	P 00010			N
000000000000	8	4	OV COCON OIL 1280	32	4	070470000	8	0280Z	P 00010			N
000000000000	8	4	OV CANOLA OIL 1280	32	16	070470000	8	0280Z	P 00010			N
000000000000	8	4	OV VEO OIL 1280	32	4	070470000	8	0280Z	P 00010			N

WALMART INC.
DC 7000
DELIVERY COMPLAINT REPORT

Report Date: 01/10/2010 Report Time: 01:10 Report User: 1001 Admin Page

This email and any files transmitted with it are confidential and intended solely
for the individual or entity to whom they are addressed. If you have received
this email in error, please notify the sender immediately. Thank you.

Document generated by
Walmart Inc.
Copyright © 2010 Walmart Inc.