



Bill to:
GREATWIDE DALLAS MAVIS, LLC
2150 CABOT BLVD,
Langhorne,
PA,
19047

Invoice Date: 03/04/2024
Invoice #: G3944796
Terms: NET 30
Due Date: 04/04/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/01/2024		139 Development Dr, Inwood, WV 25428, USA - 3601 SW 10th St, Owatonna, MN 55060, USA			
			1	\$1,650.00	\$1,650.00

TOTAL
\$0.00

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

Greatwide Dallas Mavis, LLCOrder#: **G3944796****Rate Confirmation**

PLEASE CONTACT THE BOOKING AGENCY AT (724) 562-6124 IF YOU HAVE ANY QUESTIONS.
CONTACT THE BOOKING AGENCY IF YOUR DISPATCH INSTRUCTIONS DIFFER FROM THE BILL OF LADING.

EFFECTIVE DATE:	03/01/2024	CARRIER:	BRZ
EQUIPMENT:	Van 53'	DRIVER:	
COMMODITY:		DRIVER CELL:	(954) 669-2400
HAZMAT:	No	DRIVER EMAIL:	
UN NUMBER:		TRACTOR:	813
DECLARED VALUE:		TRAILER:	H03246
WEIGHT:		CONTACT:	RADOSLAV KOVACEVIC
PIECES:		PHONE:	(708) 303-5150
BOL NUM:		EMAIL:	JOHN@RTBRZ.COM
PICKUP NUMBER:		TEMPERATURE:	-

PICK-UP DATE:

Name / Address

3/1/2024 4:00:00 PM -

MARTINSBURG POSTPONEMENT

139 DEVELOPMENT DR

INWOOD, WV 25428

Contact:**Phone:****Instructions:**

PICK UP # 877867957

DETENTION POLICY:

-YOU ARE RESPONSIBLE FOR NOTIFYING US 30 MINUTES PRIOR TO THE DRIVER REACHING DETENTION TIME. IF WE ARE NOT NOTIFIED, DETENTION WILL NOT BE SUBMITTED.

-YOU ARE RESPONSIBLE FOR SENDING A BOL WITH THE IN AND OUT TIMES WRITTEN ON IT WITHIN 24 HOURS OF DELIVERY. IF YOU DO NOT SEND A BOL, A DETENTION REQUEST WILL NOT BE SUBMITTED.

DETENTION DOES NOT APPLY ON FCFS

Greatwide Dallas Mavis, LLCOrder#: **G3944796****Rate Confirmation**

PLEASE CONTACT THE BOOKING AGENCY AT (724) 562-6124 IF YOU HAVE ANY QUESTIONS.
CONTACT THE BOOKING AGENCY IF YOUR DISPATCH INSTRUCTIONS DIFFER FROM THE BILL OF LADING.

DELIVERY DATE:

3/4/2024 6:30:00 AM - 3/5/2024 12:00:00 PM

Contact:**Name / Address**

COSTCO - OWATONNA

Phone:

3601 SW 10TH ST

OWATONNA, MN 55060

Instructions:

DELIVERY # _____

DRIVER IS RESPONSIBLE FOR PAYING LUMPER: PLEASE SUBMIT THE RECEIPT TO BROKERAGE@GREATWIDE-GRC.COM WITHIN 24 HOURS OF DELIVERY TO BE REIMBURSED.

DETENTION POLICY:

-YOU ARE RESPONSIBLE FOR NOTIFYING US 30 MINUTES PRIOR TO THE DRIVER REACHING DETENTION TIME. IF WE ARE NOT NOTIFIED, DETENTION WILL NOT BE SUBMITTED.

-YOU ARE RESPONSIBLE FOR SENDING A BOL WITH THE IN AND OUT TIMES WRITTEN ON IT WITHIN 24 HOURS OF DELIVERY. IF YOU DO NOT SEND A BOL, A DETENTION REQUEST WILL NOT BE SUBMITTED.

DETENTION DOES NOT APPLY ON FCFS

Thank you for agreeing to handle this load for the price below. These charges are confirmed by you billing to us with the paperwork required below.

Unless both parties agree in writing, there will be no changes to the charges contained within this rate confirmation. Accessorials will not be paid until Greatwide Dallas Mavis, LLC is paid.

Carrier Linehaul Rate:	\$1,650.00	Miles:	1042.3
All Combined Accessorials:	\$0.00		
Total Carrier Pay:	\$1,650.00		

Greatwide Dallas Mavis, LLC

Order#: **G3944796**

Rate Confirmation

PLEASE CONTACT THE BOOKING AGENCY AT (724) 562-6124 IF YOU HAVE ANY QUESTIONS.
CONTACT THE BOOKING AGENCY IF YOUR DISPATCH INSTRUCTIONS DIFFER FROM THE BILL OF LADING.

Agreement:

Submit copy of this rate agreement, bill of lading with signed proof of delivery, and carrier invoice to Greatwide Dallas Mavis, LLC either via email to imaging@greatwide-tm.com or fax to 1-800-853-8836.

Carrier shall not sub-contract, broker or arrange for any third party transportation. We must be notified immediately of any problems such as delays, OS&D, detention, diversion, reconsignment or refusals. No payment will be made to carriers on detention, truck order not used, or damaged claims until Greatwide Dallas Mavis, LLC is paid. When Loading and/or unloading, any charges or service failure claims will be deducted from your freight bill.

Greatwide Dallas Mavis, LLC's customer refuses to pay Greatwide Dallas Mavis, LLC due to missing or illegible paperwork. If carrier provides paperwork more than 180 days after date of delivery, carrier will only be paid if the customer pays Greatwide Dallas Mavis, LLC.

Bill freight to: Greatwide Dallas Mavis, LLC
2150 Cabot Boulevard West
Langhorne PA 19047

MC Number: 277164

Carrier must sign load confirmation and fax back to agency at: (724) 438-4256

GreatWide Agent: DPAGRC

Carrier: BRZ

Agency Contact: Bobbie Martin

Carrier Signature: John Djordjevic

Agency Phone (724) 438-4206

MC Number: 086875

Signature: _____

Confirm Date: 03/01/2024

Confirm Date: 03/01/2024

Fax Number:

To check on status of payment please go to <https://carrierportal.evansdelivery.com/>

Date: 03/01/2024

SHIP FROM		SHIP TO		BILL TO	
Name:	THE CLOROX SALES CO	Name:	COSTCO 1376 ONWATONNA MN	Name:	CLOROX FREIGHT FAVABLES
Address:	139 DEVELOPMENT DR	Address:	3601 10TH ST SW	Address 1:	C/O TRANSPLACE
City/State/Zip:	INWOOD WV, 25428	City/State/Zip:	ONWATONNA MN, 55060	Address 2:	PO BOX 423
SIC#:	817867957			City/State/Zip:	LOWELL AR 72745
FOB: <input checked="" type="checkbox"/>		Location #:		FOB: <input type="checkbox"/>	
Bill of Lading Number: 0900009158		CARRIER NAME: EVANS DELIVERY COMPANY		Freight Charge Terms: (Freight charges are prepaid unless marked otherwise)	
Trailer number: 03246		Seal number(s): 20050345		Prepaid: <input checked="" type="checkbox"/> Collect: <input type="checkbox"/> 3rd. Party: <input type="checkbox"/>	
SCAC: EDFF		Pro number: BME101267		Master Bill of Lading, with attached underlying Bills of Lading <input type="checkbox"/>	

SPECIAL INSTRUCTIONS:
 1. **NO RETURNS**
 2. **NO EXCHANGES**
 3. **NO REFUNDS**
 4. **NO CANCELLATIONS**
 5. **NO RETURNS**
 6. **NO EXCHANGES**
 7. **NO REFUNDS**
 8. **NO CANCELLATIONS**
 9. **NO RETURNS**
 10. **NO EXCHANGES**
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 12. **NO CANCELLATIONS**
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 95. **NO REFUNDS**
 96. **NO CANCELLATIONS**
 97. **NO RETURNS**
 98. **NO EXCHANGES**
 99. **NO REFUNDS**
 100. **NO CANCELLATIONS**

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER INFORMATION			# PKGS	WEIGHT	PALLSLIP	YES	NO	ADDITIONAL SHIPPER INFO	
								PO Type	Department #
13783213228			988	43,225.00				95743145	
GRAND TOTAL			988	43,225.00					
CARRIER INFORMATION									
HANDLING UNIT			PACKAGE		COMMODITY DESCRIPTION			LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	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 See Section 34(c) of NMFC Item 340			NMFC # CLASS
18	CH	988	CS	43,225.00					111555 03
18		988		43,225.00					55
					GRAND TOTAL				


the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value liability as follows:	CODE AMOUNT: \$
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_____ per _____
 Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).
 Fee Terms: Collect ☐ Prepaid: ☐
 Customer check acceptable: ☐

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

[Signature]

7-1-76

DRIVER'S SIGNATURE/DATE  3-1-24	Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Computed: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain	SHIPPER'S SIGNATURE _____	3-1-24
	We hereby certify that the above mentioned materials are classified, packaged, labeled and loaded, and are in conformity with the regulations of the DOT.				
CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and insured packages. Carrier certifies emergency response information was made available to the DOT. Emergency response information was the shipper's responsibility (reference book or equivalent)					

	<input type="checkbox"/> By Driver/Pieces	<u>P. St.</u> 3-1-24 Property described is conveyed to grantee, except as noted.
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OWATONNA DRY

DOOR: 319

APP TIME: 10:00 ARR TIME: 3/04/24 5:45
IN TIME: 10:18 OUT TIME: 11:02

13760213228

8407-20

SEAL:

BL/TRL:

RECVR: NICK WARD

PAGE 1 OF 1



01376030424100007

OWATONNA DRY

DOOR: 319

APP TIME: 10:00 ARR TIME: 3/04/24 5:45
IN TIME: 10:18 OUT TIME: 11:02

13760213228

8407-20

SEAL:

BL/TRL:

RECVR: NICK WARD

PAGE 1 OF 1



01376030424100007

BILL OF LADING

Date: 03/01/2024

SHIP FROM

Name: THE CLOROX SALES CO
Address: 139 DEVELOPMENT DR
City/State/Zip: INWOOD WV, 25428
SID#: 877867957

SHIP TO

Name: COSTCO 1376 OWATONNA MN
Address: 3601 10TH ST SW
City/State/Zip: OWATONNA MN, 55060

BILL TO:

Name: CLOROX FREIGHT PAYABLES
Address 1: C/O TRANSPLACE
Address 2: PO BOX 425
City/State/Zip: LOWELL, AR 72745

SPECIAL INSTRUCTIONS:
MABD: 03/05/2024
RAD: 03/05/2024
This bill is subject to the terms and conditions of the Underlying Bill of Lading number(s):
SBO#: 0046008778679570

Bill of Lading Number: 0900009158

CARRIER NAME: EVANS DELIVERY COMPANY

Trailer number: 03246

Seal number(s): 20053346

SCAC: EDFF

Pro number: BME101267

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

Prepaid: ☒ Collect: ☐ 3rd Party: ☐

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

CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
# PKGS	WEIGHT	PALL/S	NO	Destination	Department #
988	43,225.00	YES	NO	95743145	
GRAND TOTAL				43,225.00	

CARRIER INFORMATION				LTL ONLY	
HANDLING UNIT	PACKAGE	QTY	TYPE	WEIGHT	CLASS
19 CH	988	CS		43,225.00	
19	988			43,225.00	
GRAND TOTAL				111655 03	55

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: Collected: ☐ 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 the Transportation Contract or rate agreement in effect between Shipper and Contract Carrier (the word Contract Carrier being understood through this Bill of Lading as meaning the motor carrier, broker, or other intermediary that has obligated itself to transport the freight from origin to destination on the date of issue of this Bill of Lading, the property described below in apparent good order and condition, and the Shipper and Contract Carrier as well as any person or company who may be liable for the loss or damage to the property during transportation that the services to be performed will be subject to all of the terms and conditions contained in the Transportation Contract or rate agreement, and no other document. The Contract Carrier agrees to this for itself and its subcontractors, agents and assigns. The weights are certified by the Shipper to be true and accurate.

SHIPPER SIGNATURE/DATE

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

[Signature] 3-1-24

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 DOT emergency response guidebook or equivalent documentation in the vehicle.

[Signature] 3-1-24

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