

**Bill to:**

West Atlantic Logistics Corp

,
,
,

Invoice Date: 03/11/2024

Invoice #: 30017

Terms: NET 30

Due Date: 04/11/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/08/2024		300 Concord Pkwy S, Concord, NC 28027, USA - BILLBD, 16165 Airline Hwy, Baton Rouge, LA 70817, USA			
			1	\$1,550.00	\$1,550.00

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**



Carrier Rate Confirmation

Load #: 30017

Bill To: West Atlantic Logistics Corp
P O Box 167
Concord, NC 28026

Scheduled Pickup Date: 3/8/2024 7:00 AM

Scheduled Delivery Date: 3/11/2024 8:00 AM

Phone: (704)786-0874

FAX: (704)786-0863

Carrier: Royal 3 Inc
Phone: (630)485-7370
Fax:

Attention:
Equipment: 53ft Dry Van
Truck/Trailer#:

Driver:
Drivers #:
Cell #:

Load Instructions: TO18166 **FOOD GRADE TRAILER W/ETRAC & AT LEAST 2 LOAD LOCKS/STRAPS** **8AM DELIVERY**

Pickup Company Westrock Coffee

Sched Arrival 03/08/24 07:00

Sched Depart 03/08/24 16:00

Address 300 Concord Parkway S, Concord, NC 28027

Contact

Office Hours

Phone # (704)782-3121

Directions

Notes

Goods	Value	Qty	Pieces	Plts	Weight
SUPER SACKS		0	0.00	0.0	10,000.0

Drop Company Pod Pack International LLC

Sched Arrival 03/11/24 08:00

Sched Depart 03/11/24 08:00

Address 17100 Manchac Park Ln Ste B, Baton Rouge, LA 70817

Contact

Office Hours

Phone # (225)752-1160

Directions

Notes

Goods	Value	Qty	Pieces	Plts	Weight
SUPER SACKS		0	0.00	0.0	10,000.0

This confirmation governs the movement of the above-referenced freight as of the date specified and hereby amends, is incorporated by reference and becomes a part of that certain Transportation Contract by and between 'Broker' and 'Contract Carrier'. Carrier agrees to sign the confirmation and return it to Broker via FAX and Carrier shall be conclusively presumed to have agreed to the rates set forth herein. By its signature below Carrier further represents and warrants that said mutually agreed upon rates are reasonable and compensatory, that the freight would not have been tendered to CARRIER at higher rates, and that no shipments handled under such rates will subsequently be subject to a later claim for undercharges. FACSIMILE SIGNATURES ARE LEGAL AND THEREFORE BINDING. It is agreed that you and your driver are responsible for all shortages, damages, and any late delivery fees assessed to us due to failure to deliver when due. Detention will not be paid on missed appointments or at first come first serve facilities. This agreement will become null and void if there is any form of double brokerage. Trailer requirements for food materials: Clean: floor swept totally clean, no cob webs, Dry: No holes in roof or sides, no evidence of water damage, Food Grade FDA Compliant: No holes in the walls and ceiling, no grease on floor.

Pursuant to our verbal agreement of 3/7/2024 between Brian Treece of West Atlantic Logistics Corp hereafter referred to as the BROKER, and Royal 3 Inc hereafter referred to as CARRIER: both parties agree that BROKERS Load number 30017 will be moving between the locations above.

Charge	Amount
Contracted flat amount	\$1,550.00
Total Agreed to Charges	\$1,550.00

BY: Asta Mijao
Carrier: _____
Title: _____
Phone: _____ Fax: _____
Authorized Signature: _____

BY: _____ Brian Treece
Company: _____ West Atlantic Logistics Corp
Title: _____ Broker
Phone: (704)786-0874 Fax: (704)786-0863

SHIP FROM

Name: Westrock Coffee
Address: 300 Concord Parkway South
City/State/Zip: Concord, NC 28027
SID#:

FOB: ☐

Bill of Lading Number: _____

BAR CODE SPACE

SHIP TO

Name: Pod Pack Location #: _____
Address: 17100 Manchac Park Ln
City/State/Zip: Baton Rouge, LA 70817
CID#: _____ FOR

FOB: ☐

CARRIER NAME: Royal 3 Inc (WATL)

Trailer number:

Seal number(s): 567021

Anticipated Ship Date 3-8-24
Appointment Date 3-8 Appointment Time WASZ
Arrival Date 3-8-24 Arrival Time _____
Departure Time _____
Driver's Signature _____

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

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

Prepaid _____ Collect _____ 3rd Party _____

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
TO18166		7 Pallets	4339.7lbs	Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
				Y	N	
GRAND TOTAL		7 Pallets	4339.7lbs			

CARRIER INFORMATION

[illegible]

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: ☐ 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, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

IRume

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

W. Jones

3-11-2024

Date: 03/08/2024

BILL OF LADING

Page 1 of 1

SHIP FROM

Name: Westrock Coffee
Address: 300 Concord Parkway South
City/State/Zip: Concord, NC 28027
SID#:

FOB: ☐

Bill of Lading Number: _____

BAR CODE SPACE

SHIP TO

Name: Pod Pack
Address: 17100 Manchac Park Ln
City/State/Zip: Baton Rouge, LA 70817
CID#:

Location #: _____

FOB: ☐

CARRIER NAME: Royal 3 Inc (WATL)

Trailer number: _____

Seal number(s): 567021

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

Anticipated Ship Date 3-8-24
Appointment Date 3-8 Appointment Time WATL
Arrival Date 3-8-24 Arrival Time _____
Departure Time _____
Driver's Signature _____

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

Prepaid _____ Collect _____ 3rd Party _____☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

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			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	7 Pallets	4339.7lbs			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		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. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
7	Pallets			4339.7lbs		RC-CEDF-WB Clas Europ Decaf WB (Roasted)		
7				4339.7lbs		GRAND TOTAL		

RECEIVING
STAMP SPACE

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

per

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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SHIPPER SIGNATURE / DATE

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☐ By Shipper
☐ By Driver

Freight Counted:

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

CARRIER SIGNATURE / PICKUP DATE

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JReume

W. Jones

3-11-2024