



**Bill to:**  
LOGISTIC DYNAMICS, INC(LDI)  
155 PINEVIEW,  
Amherst,  
NY,  
14228

Invoice Date: 03/12/2024  
Invoice #: 1447119  
Terms: NET 30  
Due Date: 04/12/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/11/2024		3001 Midpoint Dr, Lancaster, TX 75134, USA - 4919 Westport Blvd, Montgomery, AL 36108, USA			
			1	\$1,350.00	\$1,350.00

<b>TOTAL</b>
\$1,350.00

**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

# LDi

Bill To: Logistic Dynamics LLC  
1140 Wehrle Dr.  
Buffalo, NY 14221

Please submit all load documents  
through [ldicarriers.com](http://ldicarriers.com) (MC  
Numbers only).

Remit POD, BOL and Invoice To:  
[payables@shipldi.com](mailto:payables@shipldi.com)  
For Quick Pay, Remit Documents To:  
[quickpay@shipldi.com](mailto:quickpay@shipldi.com)  
For Payment Status:  
[paymentstatus@shipldi.com](mailto:paymentstatus@shipldi.com)

Load #: 1447119

Generated: 3/11/2024 11:59:11 AM EST

From: DEVYN KOWITZ | P: (800) 998-0892

Carrier: BRZ

To: Connor

Phone: (708) 303-5150

Fax: (708) 300-5150

Rate(s): \$1,350.00 = \$1,350.00 × 1 (FLAT RATE)

**\$1,350.00 (TOTAL IN U.S. DOLLARS)**

Commodity: Beverages

Weight (lbs): 41,424

Equipment: Van or Reefer / 48'

Pallet Exchange? ☐ Yes ☒ No

Team Service: ☐ Yes ☒ No

Case/Size: 1574

Insurance Value: \$100000.00

Temp: N/A

Pallets Required #: 22

**NOTES TO CARRIER:** \*\*Amazon requires any delivery appointments to be rescheduled prior to 24 hours of the confirmed delivery appointment. Failure to notify [sddispatch@shipldi.com](mailto:sddispatch@shipldi.com) and [slcdispatch@shipldi.com](mailto:slcdispatch@shipldi.com) of any delays in transit 24 hours prior of the confirmed delivery appointment or missing the delivery appointment will result in a \$250.00 linehaul deduction!  
\*\*Freeze protection is required on all loads with outside temps 32°F-20°F. A Reefer is required on all loads when outside temps are 20°F and lower\*\*  
Please contact [sddispatch@shipldi.com](mailto:sddispatch@shipldi.com), [slcdispatch@shipldi.com](mailto:slcdispatch@shipldi.com), or call 858.999.3024 for any correspondence. For afterhours assistance, please use the email [nightdispatch@shipldi.com](mailto:nightdispatch@shipldi.com) or call/text 858.939.1818 MAKE SURE RECEIVER SIGNS BOL/POD IN THE BOX PROVIDED ANY LUMPER GIVEN TO DRIVER BY LDI IS SUBJECT TO A \$4 FEE \*\*\* BOL MUST BE STAMPED AND SIGNED BY RECEIVER \*\*\* \*\*All detention requests must be submitted with a copy of the BOL / POD within 48 hours of delivery or detention will be denied. Carrier is responsible for notifying the booking rep prior to the 2 hr mark\*\*  
\*\*We strongly discourage loaded trailers being dropped in yards after a load has been picked up at the shipper. If for any reason a loaded trailer is being dropped in a yard, the yard's address must be approved prior to the loaded trailer being dropped; in addition, if approved, king pin locks must be used.\*\*

## Pick Ups

<u>Location</u>	<u>Pickup #</u>	<u>Phone</u>	<u>Date &amp; Time</u>
CASESTACK- LANCASTER 3001 MIDPOINT DR LANCASTER, TX 75134	---	(800) 998-0892	03/11/2024 (0815***)
Notes: ---			

## Deliveries

<u>Location</u>	<u>P.O. #</u>	<u>Phone</u>	<u>Date &amp; Time</u>
COCA COLA UNITED MONTGOMERY AL 4919 WEST PORT BLVD MONTGOMERY, AL 36108	4505360987 (1574 cases)	N/A	03/12/2024 (1100)
Notes: ---			

1. If any unloading payment is agreed upon, carrier must supply unloading receipt with lumpers full name at time of original billing, also the driver must call LDI to get a release number for any lumper fees. Failure to do so within 24 hours of delivery will result in no-reimbursement of unloading.
2. To ensure prompt payment, we require the original or clear copies of signed shipper's Bill of Ladings, along with LDI's Load number (LOAD#) on the invoice.
3. Failure to report any overage, shortage or damage within 24 hours will result in a \$100 fine.
4. Any product that is to be disposed needs to have written consent from LDI before being disposed of.
5. Driver must have a minimum of 2 load locks to secure the load.
6. Loads that are sealed at the shipping point are to remain sealed until an authorized person at the receiver breaks the seal.  
If the seal is broken by an unauthorized person, the carrier becomes 100% liable for the cost of the product and any other expenses.
7. Directions supplied by Logistic Dynamics, Inc. or its Customers either orally or written are for informational purposes only. It is the carrier's responsibility to confirm that it may lawfully operate a loaded vehicle of any weight, commodity, or dimension over any highway, bridge or route.

**\*IMMEDIATELY FAX A COPY OF THIS SIGNED CONFIRMATION TO \***

Rate Confirmation: Page 1 of 2

Load #: 1447119

Generated: 3/11/2024 11:59:11 AM EST

From: DEVYN KOWITZ | P: (800) 998-0892

8. Failure to return with fully loaded truck or incomplete order will result in a reduced pro-rated fee
9. By executing this Rate Confirmation on behalf of the Carrier, Driver hereby covenants and agrees that he/she has enough available hours of service to pick up and complete delivery of the tendered load within the time frames dictated by the BROKER and/or its CUSTOMER(S); without violating FMCSA hours of service regulations contained at 49 C.F.R § 395.

BRZ	086875	X	Conor Smith	03-11-2024
Carrier Name	Carrier MC #		Carrier Representative Signature	Date Signed

**\*IMMEDIATELY FAX A COPY OF THIS SIGNED CONFIRMATION TO \***

# Driver/Carrier Information



Bill To: Logistic Dynamics LLC  
1140 Wehrle Dr.  
Buffalo, NY 14221

Remit POD, BOL and Invoice To:  
payables@shipldi.com  
For Quick Pay, Remit Documents To:  
quickpay@shipldi.com

\*\*\*DRIVER MUST CALL (800) 998-0892 FOR DISPATCH\*\*\*

Load #: 1447119

From: DEVYN KOWITZ | P: (800) 998-0892

Carrier: BRZ

Commodity: Beverages

Weight (lbs): 41,424

Insurance Value: \$100,000

Equipment: Van or Reefer / 48'

Temp: N/A

Pallet Exchange? ☐ Yes ☒ No

Pallets Required #: 22

Team Service: ☐ Yes ☒ No

## Pick Ups

<u>Location</u>	<u>Pickup #</u>	<u>Phone</u>	<u>Date &amp; Time</u>
CASESTACK- LANCASTER 3001 MIDPOINT DR LANCASTER, TX 75134	---		03/11/2024 (0815***)
Pickup Notes: ---			
Directions: ---			

## Deliveries

<u>Location</u>	<u>P.O. #</u>	<u>Phone</u>	<u>Date &amp; Time</u>
COCA COLA UNITED MONTGOMERY AL 4919 WEST PORT BLVD MONTGOMERY, AL 36108	4505360987 (1574 cases)	N/A	03/12/2024 (1100)
Delivery Notes: ---			
Directions: ---			

\*\*\*DRIVER MUST CALL (800) 998-0892 FOR DISPATCH\*\*\*



# SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 04285010133396125

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO	
LOT#	#PKGS	WEIGHT	PALLET/SLIP			
K2309G3	560	14560.00	Y		MONSTER ENERGY ZERO ULTRA 24/16oz	
K2309G	70	1820.00	Y		MONSTER ENERGY ZERO ULTRA 24/16oz	
A2424FD	70	2009.00	Y		MONSTER JUICE PACIFIC PUNCH US 24/16oz	
J2329X	210	5502.00	Y		MONSTER ENERGY ZERO ULTRA 6/4pk/16oz	
K2306BM	70	1764.00	Y		MONSTER REHAB US 24/15.5OZ V3	
H2323M	104	2068.60	Y		MONSTER ZERO ULTRA US 24/12OZ	
J2304X	280	7700.00	Y		MONST ULTRA STRAWBERRY DREAMS US	
A2402KF	70	1757.00	Y		MONSTER REHAB PEACH 25/15.5OZ	
J2313X	70	1932.00	Y		MONSTER ULTRA FIESTA US 24/16OZ	
K2306B	70	1764.00	Y		MONSTER REHAB US 24/15.5OZ V3	
GRAND TOTAL	1574	40877.60				

\*\*DELIVERY DATE: 03/08/2024\*\*

CARRIER INFORMATION				COMMODITY DESCRIPTION		LTL ONLY	
HANDLING UNIT	PACKAGE	QTY	TYPE	WEIGHT	H.M (X)	NMFC #	CLASS
22	PLTS	1574	CTNS	40877.60 lbs		73260-11	60
22	PLTS	1574	CTNS			150345	070
GRAND TOTAL							

03/11/2024 5:13 PM



BILL OF LADING

Date: 03/11/2024

Bill of Lading Number 04285010138396125



**SHIP FROM**  
Name: HGCF do MONSTER BEVERAGECORP  
Address: 3001 Midpoint Dr  
City/State/ZIP: Lancaster, TX, 75134

**SHIP TO**  
Name: CCBQ MONTGOMERY AL  
Address: 4919 West Port Blvd  
City/State/ZIP: MONTGOMERY, AL, 36108

**FREIGHT CHARGES BILL TO:**  
Name: CCBQ MONTGOMERY AL  
Address: 4919 West Port Blvd  
City/State/ZIP: MONTGOMERY, AL, 36108

WH Order ID: 11289-14390993  
CID Number:  
Master BOL Number: 11289-14390993  
Consignment:  
SPECIAL INSTRUCTIONS:  
Must Arrive by Date: 03/08/2024  
Ship by Date: 03/12/2024

CARRIER NAME: Customer Pickup  
Trailer number: W97031  
Seal number(s): 10714927  
SCAC: CPUU  
Pro number:

Freight Charge Terms: (Freight Charges are prepaid unless marked otherwise)  
Pre Paid Collect X 3rd Party

When # Date  
FREIGHT BILL RECEIVED IN FULL  
PO # 4505360987  
TRLR # O  
TOT GS RECD S  
TOT Pallets D  
REASON TOTAL CASES  
REC'D # REJECTED  
REC'D BY  
Did Drive Help Unload: Y N

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFO				
CUSTOMER PO NUMBER	#PKGS	WEIGHT	CUBE	PALLETS/SLIP (ONE ONE)	Y	N	11289-14390993		
4505360987	1574	40877.60	994.24	Y					
GRAND TOTAL	1574	40877.60	994.24						

CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION *Commodity requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation. See section 2(e) of NMFC Item 307.			
QTY	TYPE	QTY	TYPE			NMFC #	CLASS	LTL ONLY	
See Attached Bill of Lading Supplement									
22	PLTS	1574	CTNS	40877.60				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: ☐ 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.

PackList included: Y \_\_\_ N \_\_\_ Driver's initials \_\_\_\_\_  
DSV Agent for Shipper

**SHIPPER SIGNATURE / DATE**  
This is to certify that the above noted materials are properly secured, described, packaged, labeled, marked, and properly conditioned for transportation according to the applicable regulations of the U.S.  
Signature: *[Signature]*  
Date: 03/11/2024 4:52 PM  
**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 U.S. DOT emergency response guidebook or equivalent document in the vehicle.  
Number of Pieces Counted: *[Signature]*  
Signature: *[Signature]*  
Date: 03/11/2024 5:13 PM



SUPPLEMENT TO THE BILL OF LADING

04285010138396125

Bill of Lading Number:

CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
CUSTOMER ITEM NUMBER	LOT#	#PKGS	WEIGHT	PALLET/ SLIP	
11285-107310	K230063	600	14560.00	Y	MONSTER ENERGY ZERO ULTRA 24/16oz
11285-107310	K23009G	70	1820.00	Y	MONSTER ENERGY ZERO ULTRA 24/16oz
11285-107648	A3424FD	70	2000.00	Y	MONSTER JUICE PACIFIC PUNCH US 24/16oz
11285-107311	J2303X	210	5602.00	Y	MONSTER ENERGY ZERO ULTRA 64pk/16oz
11285-110204	K23068M	70	1764.00	Y	MONSTER REHAB US 24/15.5OZ V3
11285-110159	K2323M	104	2068.60	Y	MONSTER ZERO ULTRA US 24/12OZ
11285-113069	J2304X	260	7700.00	Y	MONST ULTRA STRAWBERRY DREAMS US
11285-110054	A3402KE	70	1757.00	Y	MONSTER REHAB PEACH 25/15.5OZ
11285-108136	J2313X	70	1932.00	Y	MONSTER ULTRA FIESTA US 24/16OZ
11285-110204	K2306B	70	1764.00	Y	MONSTER REHAB US 24/15.5OZ V3
PAGE TOTAL		1574	40877.60		

\*\* DELIVERY DATE: 03/08/2024 \*\*

CARRIER INFORMATION				LTL ONLY	
HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	NMFC #	CLASS
QTY	TYPE	CTNS			
22	PLTS	1574		7250-11	60
22	PLTS	1574		15045	070
GRAND TOTAL					

*Handwritten signature*

03/11/2024 5:13 PM



Let's apply 11 am

BILL OF LADING

Date: 03/11/2024

Bill of Lading Number 04285010138394125



SHIP FROM

Name: HGCF c/o MONSTER BEVERAGECORP

Address: 3001 Midpoint Dr

City/State/ZIP: Lancaster, TX, 76134

SHIP TO

Name: COBCU MONTGOMERY AL

Address: 4919 West Port Blvd

City/State/ZIP: MONTGOMERY, AL, 36108

FREIGHT CHARGES BILL TO:

Name: COBCU MONTGOMERY AL

Address: 4919 West Port Blvd

City/State/ZIP: MONTGOMERY, AL, 36108

WH Order ID: 11289-14390993

CID Number:

Master BOL Number: 11289-14390993

Consignment:

SPECIAL INSTRUCTIONS:

Must Arrive by Date: 03/08/2024

Ship by Date: 03/12/2024

CARRIER NAME: Customer Pickup

Trailer number: W97031

Seal number(s): 10714927

SCAC: CPUJ

Pro number:

Trk 12.10 pm  
OUT 1:30 PM

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

Pre Paid Collect X 3rd Party

When # Date

FREIGHT BILL RECEIVED IN FULL

PO # 4505360987

TRLR #

TOT CS REC'D

TOT Pallets

REASON

REC #

REC'D BY

Did Drive Help Unload: Y N

Please Mark as "X" in Box 1 Figure

O

S

D

TOTAL CASES

REJECTED

CUSTOMER ORDER INFORMATION

CUSTOMER PO NUMBER	#PKGS	WEIGHT	CUBE	PALETTES/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
4505360987	1574	40877.60	984.24	Y N	11289-14390993
GRAND TOTAL	1574	40877.60	984.24		

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE		
22	PLTS	1574	CTNS	See Attached Bill of Lading Supplement	
				40877.60	
				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 \_\_\_\_\_"

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, and to the applicable state and federal regulations.

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

PackList Included: Y \_ N \_ Driver's Initials \_\_\_\_\_

Trailer Loaded: Freight Counted:

By Shipper ☒ By Driver ☐

By Shipper ☒ By Driver ☐

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

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By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

SHIPPER SIGNATURE / DATE

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

Signature: *[Signature]*

Date: 03/11/2024 4:52 PM

Trailer Loaded: Freight Counted:

By Shipper ☒ By Driver ☐

By Shipper ☒ By Driver ☐

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

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By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

By Shipper ☐ By Driver ☒

CARRIER SIGNATURE / PICKUP DATE

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

Number of Pieces Counted

Signature: *[Signature]*

Date: 03/11/2024 5:13 PM

03/12/24

Sanathon Cerna

03/12/24

DSV Agent for Shipper