Bill to:
ZIP LINE LOGISTICS
,
,
,

Invoice Date: 03/22/2024
Invoice #: 0539954
Terms: NET 30
Due Date: 04/22/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/21/2024		29700 S Graaskamp Blvd, Wilmington, IL 60481, USA - 2625 N, M-52, Webberville, MI 48892, USA			
			1	$900.00	$900.00

TOTAL
$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

ZIPLINE
LOGISTICS

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: 0539954

ZIPLINE LOGISTICS

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: 03/20/24

Contact: George x 106
Phone: (630) 485-7370
Fax:

Driver:
Phone:
Email:

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

Order:	0539954	**Miles:**	261.0	**Commodity:**	Cereal
UN #:		**Skid Count:**	**60**	**Temp:**	-
Pick Up No.:	7500428704	**Pieces:**	**2160**	**Weight:**	24631.5
Delivery No.:	27852999970884	**Trailer:**	Van (DAT)	**Value:**	**100000.00**

PU 1

Name: Post Consumer Brands
Address: 29700 S Graaskamp Blvd
Address 2: Suite B
City/St/Zip: WILMINGTON IL 60481

Date: **03/21/24 0700** - **03/21/24 0700**
Phone: (779) 227-6406
Driver Load: No Driver Touch

Cust Ref #: PO 7500428704
Cust Ref #: PU 44528130 **Weight:** **Pieces:**
Cust Ref #: PU 6377414 **Weight:** **Pieces:**

SO 2

Name: Aldi - Webberville
Address: 2625 N Stockbridge Rd
Address 2:
City/St/Zip: WEBBERVILLE MI 48892

Date: **03/21/24 2359** - **03/21/24 2359**
Phone: (630) 625-8681
Driver Load: No Driver Touch

Cust Ref #: CG 27852999970884
Cust Ref #: PO 7500428704

Payment

Carrier Freight Pay: $900.00
Total Carrier Pay: $900.00

Instructions

Post Consumer Brands - PU #'s 44528130 & 6377414
Aldi - Webberville - Aldi requires a lumper fee. Any lumper fee greater than $100 or requiring a restack/rework fee requires the driver to take multiple pictures of the freight on the truck prior to unloading.

**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: George Pavkovic

(X) Accept

( ) Decline

Driver Name: Nemanja
Driver Cell: 7089292716
Driver Email:
Tractor #: 352
Trailer #: PTLZ241131

Date: 03/21/2024

BILL OF LADING

SHIP FROM

Name: POST CONSUMER BRANDS WILMINGTON DC
Address: 29700 GRAASKAMP BLVD
RIDGEPORT LOGISTICS
City/State/Zip: WILMINGTON ,IL ,60481
SID#: 11451166 FOB: ☐

SHIP TO

Name: ALDI - WEBBERVILLE Location#: 26735
Address: 2625 N STOCKBRIDGE RD
City/State/Zip: WEBBERVILLE,MI 48892
CID#: FOB: ☐

THIRD PARTY FREIGHT CHARGES BILLED TO:

Name:
Address:
City/State/Zip:

SPECIAL INSTRUCTIONS: Invoice#: 0
Scheduled Delivery: 03/21/2024 12:00:00 AM CST/CDT
Actual Ship: 03/21/2024 08:33:00 AM CST/CDT Order#: 6377414

Bill of Lading Number: 00424000063774142

(402) 00424000063774142

CARRIER NAME: CPU
Trailer Number: PTLZ241131
Seal Number(s): 0765551

SCAC: CPU1
Pro Number: 6377414

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

Prepaid ___ Collect X Third Party ___

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

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	NET WEIGHT (Lbs)	PALLET/SLIP	ADDITIONAL SHIPPER INFO
7500428704	2,160	24,588.00	Y	Dest. Phone#
GRAND TOTAL	2,160	24,588.00		

CARRIER INFORMATION

HANDLING UNITS QTY	HANDLING UNITS TYPE	PACKAGE QTY	PACKAGE TYPE	GROSS WEIGHT (Lbs)	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 NMFC #	LTL ONLY CLAS
60	PL	2,160	CA	24,588.00		Dry Cereal NOI	72310	100

7:07in
8:33 out
3-21-24
Karen Gullquist

CHEP Qty: 0

RECEIVING STAMP SPACE

60	2,160	24,648.00	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.

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 U.S. DOT.

Trailer Loaded:
X By Shipper
— By Driver

Freight Counted:
X 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
Property described above is received in good order, except as noted.

Driver and Receiver MUST sign ALL Pages of the BOL.

BILL OF LADING

✓

SHIP FROM	
	POST CONSUMER BRANDS WILMINGTON DC
	29700 GRAASKAMP BLVD
	RIDGEPORT LOGISTICS
City/State/Zip:	WILMINGTON ,IL ,60481
SID#:	11451166 FOB: ☐

Bill of Lading Number: 00424000063774142

(402) 00424000063774142

SHIP TO	
Name:	ALDI - WEBBERVILLE Location#: 26735
Address:	2625 N STOCKBRIDGE RD
City/State/Zip:	WEBBERVILLE,MI 48892
CID#:	FOB: ☐

CARRIER NAME: CPU
Trailer Number: PTLZ241131
Seal Number(s): 0765551

Lol

SCAC: **CPU1**
Pro Number: **6377414**

THIRD PARTY FREIGHT CHARGES BILLED TO:
Name:
Address:
City/State/Zip:

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

Prepaid ___ Collect X___ 3rd Party ____

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

SPECIAL INSTRUCTIONS: Invoice#: 0
Scheduled Delivery: 03/21/2024 12:00:00 AM CST/CDT
Actual Ship: 03/21/2024 08:33:00 AM CST/CDT Order#: 6377414

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	NET WEIGHT (Lbs)	PALLET/SLIP	ADDITIONAL SHIPPER INFO
7500428704	2,160	24,588.00	Y	Dest. Phone#
GRAND TOTAL	2,160	24,588.00		

CARRIER INFORMATION

HANDLING UNITS		PACKAGE				COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE	GROSS WEIGHT (Lbs)	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 care. See Section 2(e) of NMFC Item 360	NMFC #	CLASS
60	PL	2,160	CA	24,588.00		Dry Cereal NOI	72310	100

Merit Received bill at 5:20am

7:07 in
8:33 out
3-21-24
Karen Gullquist

DELIVERY
CHECK IN TIME ! 25:00
CHECK OUT TIME : 05:30

CHEP Qty: 0

60 [redacted] 2,160 [redacted] 24,648.00 [redacted] GRAND TOTAL

RECEIVING STAMP SPACE

The load has been inspected for evidence of infestation, cleanli... s of the tr... ict has... idence of ... damage and co... ing. The Country o... is present on the ... Received under protest pending quality inspection and ...

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

Aldi Signature Curtis D. C...
Driver Signature X) U. RADIVOJEVIC
Gate Pass ______ Date 3-22

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.

Time
Check In (Guard): 10:32
Appointment Time: 12
5:20
Unloaded & Signed Out: 1245AM

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 U.S. DOT.

Trailer Loaded:
X By Shipper
__ By Driver

Freight Counted:
X 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.
Property described above is received in good order, except as noted.

Driver and Receiver MUST sign ALL Pages of the BOL.