

**Bill to:**

DeGroot Logistics Inc

,
,
,

Invoice Date: 03/12/2024

Invoice #: 113569

Terms: NET 30

Due Date: 04/12/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/12/2024		551 St James Gate, Bolingbrook, IL 60440, USA - 2625 N, M-52, Webberville, MI 48892, USA			
			1	\$800.00	\$800.00

TOTAL
\$800.00

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 and Load Confirmation



DeGroot Logistics
PO Box 577765
Chicago, IL 60657
Sam Meyer
samm@degrootlogistics.com

Load Number: 113569

Date: 03/12/2024

Equipment Type: Dry Van 53'

Freight Temp (Degrees F):

Carrier: ZIGI FREIGHT INC

Contact: RIKI KOVACEVIC, (p) (f)

Load Number: 113569

Pickup #: 50000096705

Shipper Pickup (Stop 1)

LaGrou - Dry
551 St James Gate
Bolingbrook, IL US 60440
Expected Date: 03/12/2024
Shipping/Receiving Hours: 08:00-12:00
Appointment Required: Yes
Appointment Time:

Pickup Instructions: 27 pallets. NO DOUBLE STACK Product: dry food ** MUST HAVE SWING DOORS *** PU# 50000096705 *** DRIVER MUST CALL TO CONFIRM CASE COUNT & PO#'s BEFORE LEAVING SHIPPER, FINES WILL APPLY IF NOT FOLLOWED *** **MUST BE ABLE TO LOAD 43,500 LBS, LOAD WEIGHTS MAY CHANGE*** ** Driver must accept Macropoint to haul the load *** Macropoint must be accepted entire time load is in transit ** ***SUBJECT TO \$250 LATE FEE FOR MISSED DELIVERY APPOINTMENT*** **SUBJECT TO \$250 FEE FOR NOT ACCEPTING MACROPOINT/TRACKING*** **IF RESTACK FEES ARE APPLIED AT DELIVERY, PICTURES OF PRODUCT BEFORE LEAVING SHIPPER ARE REQUIRED*** ** Can break Seal to check load was secured *** **DRIVER MUST WRITE ON BOL SLC - Shipper Load and Count***

Shipper References:

Pickup/Delivery Number: 50000096705

Consignee Delivery (Stop 2)

Webberville DC
2625 North Stockbridge Road
Webberville, MI US 48892-9311
Expected Date: 03/12/2024
Shipping/Receiving Hours:
Appointment Required: Yes
Appointment Time: 23:00

Delivery Instructions: 27 pallets. NO DOUBLE STACK There will be a lumper at the delivery. We will reimburse once driver sends receipt to us. ALL RESTACK / EXTENSIVE FEES ARE SUBJECT TO REVIEW FOR REIMBURSEMENT.

Consignee References:

Pickup/Delivery Number: 27852999966676

Shipment Information

Handling Unit		Package			
Qty	Type	Qty	Type	Weight	Commodity Description
0		648	Cartons	12856 lbs	Hamburger Dill Pickle Chips
0		216	Cartons	6547 lbs	Swt Bread Butter Sliced Pickle
0		272	Cartons	4398 lbs	Artichokes 12oz
0		729	Cartons	4055 lbs	Mini Muffins 8.25oz
0		56	Cartons	913 lbs	Hostess Twinkies
0		324	Cartons	1823 lbs	Mini Bites 8.25oz
0		144	Cartons	1565 lbs	Cinnamon Streusel Cakes

Carrier Fees	
Description	Cost
Net Freight Charges	USD 800.00
Total Cost	USD 800.00

We offer 2 Day QuickPay at 1% - Sign into TriumphPay and change your 'Default Term and Payment' for DeGroot Logistics to the QuickPay option.

The carrier's acceptance of any shipment, or its receiving signature on the Bill of Lading, shall be conclusive evidence that the number of pieces shown on the Bill of Lading is correct and that the product is in good condition. Where the carrier receives a sealed container or is unable to witness loading, carrier shall note "Shipper Load and Count-SLC" and seal number on the Bill of Lading. Carrier's failure to do so will serve as conclusive evidence that the container or trailer had been live loaded with the Servicing Motor Carrier's driver present.

Please email all paperwork, invoices and signed BOL's, to **PAPERWORK@DEGROOTLOGISTICS.COM**

All accessorials must be submitted within 5 days of the delivery or they will not be approved.

We don't pay advances for lumpers charges, include a receipt with your invoice and we'll reimburse.

For any payment questions, please contact our accounting department at 815-668-4037

Carrier Signature George Pavkovic Date 03/12/2024

CPU 3/12/24

BILL OF LADING

SHIP FROM

LAGROU DIST. AS AGENT FOR

Name: MASTER BILL OF LADING
Address: 551 ST. JAMES GATE
City/State/Zip: BOLINGBROOK, IL 60440
SID#: FOB: ☐

Bill of Lading Number:

114072368



114072368

SHIP TO

Name: ALDI INC. WEBBERVILLE MI DC.
Address: CFA: WWW.LOGISTICSACP.COM
City/State/Zip: WEBBERVILLE, MI 48892
CID#: FOB: ☒

Carrier name:

ROYAL 3 INC. R PICK

Trailer Number:

241131

Temperature:

Seal Number(s):

231834

Product Temp:

SCAC: CPU

Pro Number:

SEND FREIGHT CHARGES TO

Name:
Address:
City/State/Zip:

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

BOL# 114066071 PO# 7500420710
BOL# 114067160 PO# 7500420709

PICK UP
CHECK IN: 10:45 AM
CHECK OUT: 2:20 PM

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	Customer PO #
	1,336	26,411	X	
GRAND TOTAL	1,336	26,411		

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.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
14	PL	1,336	CS	26,411		SEE PACKING LIST		
14		1,336		26,411		GRAND TOTAL		

Where this 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 not be 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 the 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.

Driver's Signature:

NEMANJA RADIVOJEVIC

Time out: 3/12/2024 2:06 PM

N RADIVOJEVIC

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.

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 had the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

BILL OF LADING

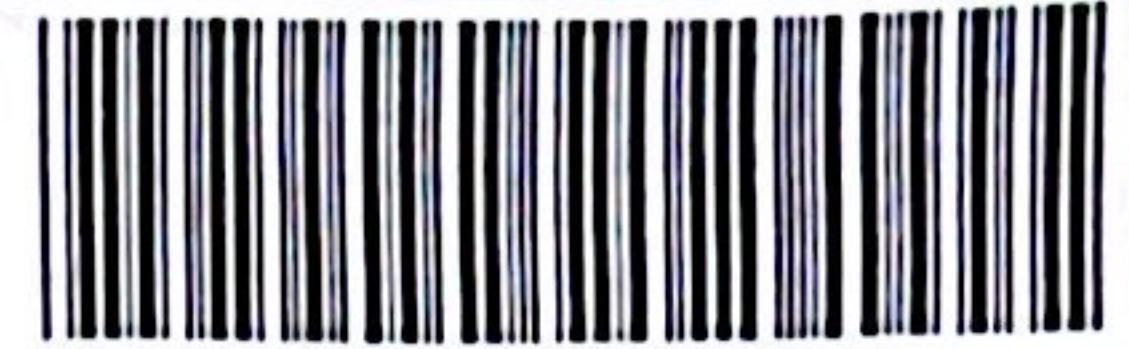
SLC DRIVER

Name: MASTER BILL OF LADING
Address: 551 ST. JAMES GATE
City/State/Zip: BOLINGBROOK, IL 60440
SID#:

FOB: ☐

Bill of Lading Number:

114072368



114072368

SHIP TO

Name: ALDI INC. WEBBERVILLE MI DC.
Address: CFA: WWW.LOGISTICSACP.COM
City/State/Zip: WEBBERVILLE, MI 48892
CID#:

FOB: ☒

Carrier name:

ROYAL 3 INC. R PICK

Trailer Number:

241131

Temperature:

Seal Number(s):

231834

Product Temp:

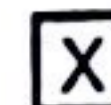
SCAC: CPU

Pro Number:

SEND FREIGHT CHARGES TO

Name:
Address:
City/State/Zip:

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

BOL# 114066071 PO# 7500420710

BOL# 114067160 PO# 7500420709

The load has been inspected for evidence of infestation, cleanliness, condition and odors of the trailer. The product has been inspected for evidence of tampering, damage and commingling. The Country of Origin is present on the label if applicable. Received under protest pending quality inspection and count/quantity verification.

Aldi Signature

Driver Signature

Gate Pass

Time

Check In (Guard)

Appointment Time

Unloaded & Signed On

PICK UP

CHECK IN: 10:45 AM

CHECK OUT: 2:20 PM

CUSTOMER ORDER NUMBER

Customer PO #

GRAND TOTAL

1,336

26,411

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14		1,336		26,411		GRAND TOTAL		

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

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐Customer Check Acceptable: ☐

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