



Bill to:
DIRECT CONNECT LOGISTIX INC.
212 West 10th Street / Suite D405,
Indianapolis,
IN,
46202

Invoice Date: 03/29/2024
Invoice #: 6169144
Terms: NET 30
Due Date: 04/29/2024

| Date | Customer Ref # | Origin - Destination | Quantity | Rate | Amount |
|------------|----------------|--|----------|------------|------------|
| 03/27/2024 | | 2641 N PACKERLAND DRIVE, GREEN BAY, WI 54303 - 11777 BALLS FORD ROAD, MANASSAS, VA 20109 | | | |
| | | | 1 | \$2,340.00 | \$2,340.00 |

| |
|--------------|
| TOTAL |
| \$2,340.00 |

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 Terms and Conditions

1. This rate confirmation is subject to the terms and conditions of the Broker-Carrier Agreement ("Agreement") in place between Direct Connect Logistix, Inc. ("DCL") and the motor carrier referenced above ("Carrier"). This rate confirmation shall be effective upon the earlier of: (i) Carrier's acceptance in writing, including email, or verbally; (ii) Carrier's physical possession acceptance of the shipment; or (iii) Carrier's failure to reject this rate confirmation within twenty-four (24) hours.
2. The rates and charges provided in this rate confirmation shall represent the total compensation owed to Carrier, inclusive of any accessorials, fuel surcharges, or any other charge or expense, unless otherwise expressly stated herein. The rates and charges cannot be amended, modified, or supplemented except by written agreement of an authorized representative of DCL. Any rates, charges, fees, terms and/or conditions contained in any tariff, circular, schedule or similar document maintained or used by Carrier shall not apply, unless expressly agreed upon by DCL.
3. Additional operational terms and conditions applicable to the shipment may be included in the Carrier Instructions and Requirements and such additional operational terms and conditions shall apply. To the extent the Carrier Instructions and Requirements conflict with the Agreement, the Carrier Instructions and Requirements shall supersede and apply. Carrier acknowledges that all freight handling, routing, and delivery instructions provided by DCL are those of the Customer.
4. Carrier must have written approval from DCL to be included on rate confirmation for any additional charges, including but not limited to, detention, stop off, layover, loading, or unloading. Any additional charges not approved by DCL will not be invoiced by Carrier nor compensated by DCL.
5. Carrier shall submit all service and operational documents, such as bills of lading, receipts, and proofs of delivery, to DCL within forty-eight (48) hours of delivery.
6. Carrier shall submit all invoices for services rendered within ninety (90) days of delivery or when delivery reasonably should have occurred and failure to submit invoices within such ninety (90) day period shall constitute Carrier's waiver of all rights and remedies to payment. Broker shall make payment to Carrier for all undisputed charges within thirty five (35) days of Broker's receipt of Carrier's undisputed invoice and all other documentation required to substantiate Carrier's invoice. Carrier may select expedited payment for a fee of five percent (5%) of the gross rate. Fees for wire issuance will be assessed to Carrier.
7. Except when Carrier is tendered a sealed trailer, Carrier is solely responsible for loading and securing the shipment. Carrier is solely responsible for transporting the shipment within legal weight limits. If Customer does not scale on site, Carrier shall make an immediate protest prior to transporting the shipment and Carrier's failure to protest shall be deemed Carrier's acceptance of the shipment as provided and places liability on Carrier for fines, penalties, or costs associated with movement of an overweight shipment.

8. Carrier must notify DCL immediately of any overages, shortages, losses, or damages to freight transported by Carrier.
9. Carrier shall be liable for overages, shortages, losses, or damages to freight pursuant to 49 USC § 14706 and as further provided in the Agreement.
10. Carrier shall provide services pursuant to its motor carrier operating authority and shall not subcontract, broker, interline, or use substituted service without written authorization from DCL.
11. All shipments are subject to electronic monitoring and tracking. Carrier will lose right to detention or layover if Carrier does not provide or allow electronic tracking for the entire duration of the shipment.
12. Seals are required on all shipments, must be intact upon delivery, and the seal number must match the seal number provided on the bill of lading.
13. For temperature-controlled shipments, Carrier must verify temperature with the Customer prior to leaving origin. All refrigerated shipments must run on a continuous cycle unless otherwise expressly indicated. All trailers transporting temperature-controlled shipments must have the ability to produce a temperature download.
14. Failure by Carrier to provide DCL notice of delay prior to appointment shall subject Carrier to a \$250 rescheduling fee.
15. Failure to comply with these terms and conditions will constitute a breach of contract and may result in additional fees or non-payment.
16. Carrier shall only seek payment from DCL. Carrier shall remit original invoices, bills of lading, receipts, proofs of delivery, and all other required documentation to payables@directconnectlogistix.com. Failure to timely provide required documentation may result in delayed payment of Carrier's invoice.

Direct Connect Logistix, Inc.
130 S Meridian St., 3rd Floor
Indianapolis, IN 46225
(317)218-7777
www.dclogistix.com

DIRECT CONNECT LOGISTIX, INC.
130 S MERIDIAN ST, 3RD FLOOR
INDIANAPOLIS, IN 46225
(317) 218-7777



Page 1

Load Confirmation

6169144

Carrier: BRZ
BURBANK IL 604592734
Date: 03/27/2024

Contact: linda
Phone: (708) 852-5654
Fax:

Order
Order: 6169144
Miles: 933.0
Temp:
BOL: 172427635

Commodity: Paper products
Weight: 37480.0
Trailer: Van (DAT)
Reference: MAN-62165

PU 1 Name: GEORGIA PACIFIC DIXIE Date: **03/27/2024 1300**
Address: 2641 N PACKERLAND DRIVE **03/27/2024 1300**
GREEN BAY WI 54303 Contact: Melissa Craddock
Phone: (682) 207-2378 Driver Load: No driver loading or unload

Reference number: 4B OLD HICKORY LOGISTICS, LLC
Reference number: AD 06144155600
Reference number: OQ MAN-62165
Reference number: PO 6683448
Reference number: PU 172427635
Reference number: TN 204775976
Reference number: ZZ MAN-7035

SO 2 Name: REINHART FOODSERVICE Date: **03/29/2024 0700**
Address: 11777 BALLS FORD ROAD **03/29/2024 0700**
MANASSAS VA 20109 Contact: Main Line
Phone: 800-495-3051 Driver Load: No driver loading or unload

Reference number: AO 4493513
Reference number: OQ MAN-62165
Reference number: PO MAN-62165
Reference number: PU 172427635
Reference number: ZZ MAN-01

Payment **Carrier Freight Pay:** \$2,240.00

Macropoint Tracking 100.00

Total Carrier Pay: \$2,340.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

Special instructions:

Please Sign: *Linda Ferrer*

(X) Accept

() Decline

Driver Name: Allan

Driver Cell: 786) 290-5074

Driver Email: /

Tractor #: 813


Trailer #: PTLZ244741

Date

03/27/2024 14:18:06

BILL OF LADING

Original

| | | | |
|--|--|---|-------------------|
| SHIP FROM | | Bill of Lading Number | 00304006683448002 |
| GEORGIA-PACIFIC CONSUMER PRODUCTS LP AND/OR SPG HOLDINGS LLC | |  | |
| GBY Plant Packerland 2641 N. Packerland Dr Green Bay WI 54303 SID#: 6683448 | | Carrier Name: | CUSTOMER PICK UP |
| GP Georgia-Pacific | | Trailer Number: | PTLZ244741 |
| FOB <input checked="" type="checkbox"/> | | Record Seal No. at Consignee: | 2035219 |
| SHIP TO | | SCAC / Pro: | CPU / |
| REINHART FDSV-MANASSAS 11777 BALLS FORD RD MANASSAS VA 20109 | | MC / USDOT : | |
| Loc # | | Freight Charge Terms/Conditions applicables aux frais de transport: (freight charges are prepaid unless marked otherwise) | |
| CID#: | | Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/> | |
| FOB <input type="checkbox"/> | | Master Bill of Lading with attached underlying Bill of Lading | |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | (Check box) | |

SPECIAL INSTRUCTIONS:
Delivery Date and Time: 03/28/2024 23:59:00
Associated MBOL: 00304006683448002
New and reset appointments need to be made via Retalix. Use last 5 digits of PO# when requesting delivery
SEE SUPPLEMENT PAGE FOR ADDITIONAL INSTRUCTIONS

| CUSTOMER ORDER INFORMATION | | | | | | | |
|--|------|---------|------|-----------------------|----------|-------------------------|-------|
| CUSTOMER ORDER NUMBER | | #PKGS | | WEIGHT | | PALLET/SLIP | |
| SEE ATTACHED SUPPLEMENT PAGE | | | | | | ADDITIONAL SHIPPER INFO | |
| GRAND TOTAL | | 1570 | | 39067 | | | |
| CARRIER INFORMATION | | | | | | | |
| HANDLING UNIT | | PACKAGE | | COMMODITY DESCRIPTION | | LTL ONLY | |
| QTY | TYPE | QTY | TYPE | WEIGHT | H.M. (X) | NMFC# | CLASS |
| Commodities 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 360 | | | | | | | |
| SEE ATTACHED SUPPLEMENT PAGE | | | | | | | |
| 34 | | 1570 | | 39067 | | GRAND TOTAL | |



| | | |
|---|--|--|
| Driver must confirm piece count at Consignee and call 877-673-2257 immediately from customer in the event of overage, shortage, damage, wet, or any other delivery problem. | | COD Amount: \$ |
| Consignee Signature/Date | | Fee Terms: Collect <input type="checkbox"/> Prepaid: <input type="checkbox"/> |
| Consignee Piece Count | | Customer check acceptable: <input type="checkbox"/> |
| 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 all terms and conditions of the NMFC Uniform Straight Bill of Lading. | | The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. |
| SHIPPER SIGNATURE/DATE | | GEORGIA-PACIFIC Shipper Signature |
| Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Driver | | CARRIER SIGNATURE/PICKUP DATE |
| Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces | | Carrier acknowledges receipt of packages and/or cargo. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent in vehicle. |
| GEORGIA-PACIFIC | | BOL #: 3272611-00304006683448002 3/27/2024 2:35 |

Date

03/27/2024 14:18:06

BILL OF LADING

Original

| SHIP FROM | | SHIP TO | | | | | | |
|---|---------|--|-----------------------|-------------------------|----------|---|-------|-------|
| GEORGIA-PACIFIC CONSUMER PRODUCTS LP AND/OR SPG HOLDINGS LLC  GBY Plant Packerland 2641 N. Packerland Dri Green Bay WI 54303 SID#: 6683448 | | REINHART FDSV-MANASSAS 11777 BALLS FORD RD MANASSAS VA 20109 CID#: _____ | | | | | | |
| FOB <input checked="" type="checkbox"/> | | FOB <input type="checkbox"/> | | | | | | |
| Bill of Lading Number 00304006683448002  | | SCAC / Pro: CPU / MC / USDOT : | | | | | | |
| Carrier Name: CUSTOMER PICK UP Trailer Number: PTLZ244741 Record Seal No. at Consignee: 2035219 | | Freight Charge Terms/Conditions applicables aux frais de transport: (freight charges are prepaid unless marked otherwise) | | | | | | |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/> Master Bill of Lading with attached underlying Bill of Lading <input checked="" type="checkbox"/> Receiving (Check box) | | | | | | |
| SPECIAL INSTRUCTIONS: Delivery Date and Time: 03/28/2024 23:59:00 Associated MBOL: 00304006683448002 New and reset appointments need to be made via Retailix. Use last 5 digits of PO# when requesting delivery ***SEE SUPPLEMENT PAGE FOR ADDITIONAL INSTRUCTIONS*** | | Trailer Inspection: Pass <input checked="" type="checkbox"/> Fail <input type="checkbox"/> Reefer Temp Setting: _____ Trailer Seal Intact: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Trailer Seal #: 2035219 Total Cases Over: _____ Total Cases Short: _____ Total Cases Damaged: _____ Total Cases Not Ordered/Wrong Item: _____ Item #: _____ Pallet count: 34 Driver present during unloading: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date: _____ Receivers Name (Print): S. Robinson | | | | | | |
| CUSTOMER ORDER INFORMATION | | | | | | | | |
| CUSTOMER ORDER NUMBER | #PKGS | WEIGHT | PALLET/SLIP | ADDITIONAL SHIPPER INFO | | | | |
| SEE ATTACHED SUPPLEMENT PAGE | | | | | | | | |
| GRAND TOTAL | 1570 | 39067 | | | | | | |
| 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 See Section 2(e) of NMFC Item 300 | NMFC# | CLASS |
| SEE ATTACHED SUPPLEMENT PAGE | | | | | | | | |
| 34 | | 1570 | | 39067 | | GRAND TOTAL | | |

| | | | |
|---|--|---|--|
| Driver must confirm piece count at Consignee and call 877-673-2257 immediately from customer in the event of overage, shortage, damage, wet, or any other delivery problem. | | COD Amount: \$ _____ | |
| Consignee Signature/Date _____ | | Fee Terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> | |
| Consignee Piece Count _____ | | Customer check acceptable: <input type="checkbox"/> | |
| NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B). | | | |
| SHIPPER SIGNATURE/DATE _____ | | SHIPPER SIGNATURE _____ | |
| Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver | | Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces | |
| 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. | | Carrier acknowledges receipt of packages and property. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent in vehicle. BOL #: 3272611-00304006683448002 3/27/2024 2:36 Property described above is received in good order, except as noted. | |
| GEORGIA PACIFIC | | | |