

**Bill to:**

BAT LOGISTICS INC
20 ARENA WAY STE,
Council Bluffs,
IA,
51501

Invoice Date: 04/02/2024

Invoice #: 0463972

Terms: NET 30

Due Date: 05/02/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/01/2024		1625 Sheep Farm Road, Mount Airy, NC 27030 - 914 Highway 82 West, Indianola, MS 38751			
			1	\$1,200.00	\$1,200.00

TOTAL
\$1,200.00

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 Shipment Confirmation

Phone 712-256-7147

Fax 712-256-7265

Carrier: Royal3 Inc
Chicago IL 60638
Date: 04/01/2024

Contact: Mike Z
Phone: 630-485-7370 x113
Fax:

Order **Load #:** 0463972 **Commodity:** CLEANING SUPPLIES
 Miles: 736.0 **Weight:** 32928.0
 Temp: **Trailer:** Van or Reefer (DAT)
 BOL: IND72376687M **PO Number:** 1Z7NM3-01

PU 1 **Name:** Awesome Products, INC: **Date:** 04/01/2024 1200
 Address: 1625 Sheep Farm Road

 MOUNT AIRY NC 27030
 Phone: 336-374-5900
 Directions:

Contact: ABBY
Load Type: Palletized

Reference Number: Purchase Order Number - 1Z7NM3-01
Reference Number: Pickup Number - NOPU#
Reference Number: Standard Carrier Alpha Code (SCAC) - BLGJ

SO 2 **Name:** Dollar General Indianola DC **Date:** 04/02/2024 1200
 Address: 914 Highway 82 West

 INDIANOLA MS 38751
 Phone: 615-855-4485
 Directions:

Contact: DG TRANSPORTATION
Drvr Ld/Unld: Palletized

Reference Number: Delivery Reference - 854067457
Reference Number: Purchase Order Number - 1Z7NM3-01

Payment **Carrier Freight Pay:** \$1,200.00
 Total Carrier Pay: \$1,200.00

Send Invoice To BAT Logistics Telephone: 712-256-7260
 20 Arena Way Fax Number: 712-256-7265
 Council Bluffs, IA 51501 Email: accounting@batlogistics.com

Instructions

Dollar General Indianola DC - ***LATE OR MISSED DELIVERIES WILL RESULT IN A \$250 RATE REDUCTION!

1. Driver needs to sign the BOL shipper load, count, & seal. Seal number must be noted on paperwork.
2. LUMPERS WILL NOT BE REIMBURSED!! If asked to pay a lumper contact BAT Immediately!
3. Notify BAT 24/7 @ 877-228-8789 with issues
4. Detention will only be paid with IN and OUT times stamped on the BOL by shipper and/or receiver.

OVERNIGHT PARKING IS AVAILABLE

AWESOME PRODUCTS, INC. (NORTH CAROLINA) BILL OF LADING

SHIP FROM		SHIPPING INFORMATION	
Name: AWESOME PRODUCTS - NC		Bill of Lading Number: NC 843907	
Address: 1625 SHEEPFARM RD		Shipment Number:	
City/State/Zip: MOUNT AIRY, NC 27030		Date: 04.01.24	
SHIP TO		CARRIER INFORMATION	
Name: DCMS DOLLAR GENERAL (MS)	Location #:	Carrier Name: Royal 3 inc /BAT	
Address: 914 HIGHWAY 82 WEST		Trailer Number: H03259	
City/State/Zip: INDIANOLA, MS 38751 ✓		Seal Number: 4475 457	
BILL TO		Name of Driver: Juan Santiago	
Name:		Drivers License Number:	
Address:		Time In: 11:48	Time Out: 1:48
City/State/Zip:		<input type="checkbox"/> AM <input type="checkbox"/> PM	
CUSTOMER ORDER NUMBER		FREIGHT CHARGE TERMS	
1Z7NM3 ✓		Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3 rd Party <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading (check box) with attached underlying Bills of Lading	
CUSTOMER ORDER INFORMATION			
# PLTS	# CASES	WEIGHT	ADDITIONAL SHIPPING INFORMATION
28	784	32928	CHEP PALLETS <input checked="" type="checkbox"/> REGULAR PALLETS

PRODUCT SHIPMENT INFORMATION			
ITEM#	COMMODITY DESCRIPTION	CASE BREAKDOWN	TOTALS
			CASES PLTS
284	284 96 OZ AWE BLEACH 6/CS	28 x 28 + x	784 28
All B NO strap JM/JP			
GRAND TOTALS			

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: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. Section 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 / 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.		Shipper Signature X	
Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets <input type="checkbox"/> 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.		X	

AWESOME PRODUCTS, INC. (NORTH CAROLINA) BILL OF LADING

SHIP FROM		SHIPPING INFORMATION	
Name: AWESOME PRODUCTS - NC		Bill of Lading Number: NC 843907	
Address: 1625 SHEEPFARM RD		Shipment Number:	
City/State/Zip: MOUNT AIRY, NC 27030		Date: 04-01-24	
SHIP TO		CARRIER INFORMATION	
Name: DCMS DOLLAR GENERAL (MS)	Location #:	Carrier Name: Royal 3 inc / BAT	
Address: 914 HIGHWAY 82 WEST		Trailer Number: H63259	
City/State/Zip: INDIANOLA, MS 38751 ✓		Seal Number: 4475457	
BILL TO		Name of Driver: Jun Santiago	
Name: 85		Drivers License Number:	
Address:		Time In: 11:18	Time Out: 3:48
City/State/Zip:		Time In: <input type="checkbox"/> AM <input type="checkbox"/> PM	
CUSTOMER ORDER NUMBER		FREIGHT CHARGE TERMS	
127NM3 ✓		Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading with attached underlying Bills of Lading	
CUSTOMER ORDER INFORMATION			
# PLTS	# CASES	WEIGHT	ADDITIONAL SHIPPING INFORMATION
28	784	32928	CHEP PALLETS <input checked="" type="checkbox"/> REGULAR PALLETS

ITEM#		COMMODITY DESCRIPTION	CASE BREAKDOWN	TOTALS	
284	284	96 OZ AWE BLEACH 6/CS	28 x 28 + x	CASES	PLTS
				784	28

Dollar General DC - Indianola, MS

Date: **4-2-24** Confirmation #: **854067457**

Arrive: **11:17 am** Depart: **1:45 pm**

Carrier: **Royal 3** Trailer #: **H03259**

Seal #: **4475457**

Row # Slot #: **Empty**

Circle One: ☒ Empty ☐ Loaded

Signature: **[Signature]**

TRUCK ARRIVAL ONLY - NOT PROOF OF RECEIPT

NO STRAP

JM/TP

RECEIVED: 784

SHORT: 1

HOLD NOT RECEIVED: 1

CHECKER: 42

DATE: 04-01-24

BEGIN: 11:17

END: 1:45

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		COD Amount: \$	
Per		Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. Section 14706(c)(1)(A) and (B).		Customer check acceptable: <input type="checkbox"/>	
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 / DATE		Shipper Signature	
Trailer Loaded:		Freight Counted:	
<input type="checkbox"/> By Shipper		<input type="checkbox"/> By Shipper	
<input type="checkbox"/> By Driver		<input type="checkbox"/> By Driver/Pallets	
		<input type="checkbox"/> By Driver/Pieces	
CARRIER SIGNATURE / PICKUP DATE		CARRIER SIGNATURE / PICKUP 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.		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.	
X		X	