



Bill to:
TRANSPORTATION ONE, LLC
747 LA SALLE,
Chicago,
IL,
60290

Invoice Date: 04/04/2024
Invoice #: 1002453
Terms: NET 30
Due Date: 05/04/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/03/2024		303 Crystal Geyser Ln, Benton, TN 37307, USA - 321 W 10th St, Reserve, LA 70084, USA			
			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

By picking up this shipment, the carrier agrees to be bound by all requirements, specifications, and terms and conditions listed in this rate confirmation and the bill of lading.

24/7 TRACK & TRACE SUPPORT | TRACING@TRANSPORTATIONONE.COM | 312-429-6670 OPT 1

Booked With:	Defonte Berry	Carrier:	BRZ
Phone:	(312) 809 0474 X 474	Attn:	Conor Smith
Email:	dberry@transportationone.com	Phone:	(708) 852 5574
Reference #:	Customer Ref Number: Order# : 366661 PO #: 44910	Driver:	Royer
		Driver Phone:	(832) 606 6988

Equipment:**53V** Miles:**567** Commodity:**BOTTLED WATER**

****ELECTRONIC TRACKING IS REQUIRED FOR ALL LOADS!! ****

PICKUP - 1 Earliest: 04/03/24 07:30 Latest: 04/03/24 18:00

Facility Name:	CG ROXANE - BENTON	Pick#:	Order# : 366661
Address:	303 CRYSTAL GEYSER LANE BENTON,TN,USA, 37307	Notes:	P.O# :44910

DELIVERY - 1 Earliest: 04/04/24 10:00 Latest: 04/04/24 10:00

Facility Name:	NATCO FOODS	Pick#:	Order# : 366661 / P.O# :44910
Address:	321 W 10TH ST RESERVE,LA,USA, 70084	Notes:	P.O# :44910

LOAD DETAILS

Pcs Type	Pcs	Qty Type	Qty	Ref#	Weight	Class	Length	Desc
Pallets	18				43605			BOTTLED WATER

CUSTOMER REQUIREMENTS & SPECIFICATIONS

- Mode: TL
- Load Type: Spot
- Straps

LOAD INSTRUCTIONS

Pickup Facility: Important! Please inform the driver to have the following before checking in: Pick-Up number & Destination
Trailer license plate number Broker name Safety vest ATTN DRIVER -DRIVE AT A SAFE SPEED, SLOW
DOWN, MAINTAIN EXTRA FOLLOWING SPACE, AND BE PREPARED TO STOP -MAKE WIDE TURNS
CAREFULLY, AVOID HARD BRAKING -USE LOAD LOCKS AND/OR STRAPS TO SECURE PRODUCT

Destination Facility: _____

Special Instructions: Important! Please inform the driver to have the following before checking in: Pick-Up number & Destination
Trailer license plate number Broker name Safety vest ATTN DRIVER -DRIVE AT A SAFE SPEED.SLOW

RATE DETAILS

Line Haul Charges (\$) **\$1,200.00**

Fuel Surcharge (\$) -

Total **\$1,200.00**

ACCESSORIAL REQUESTS AND ALL REQUIRED DOCUMENTS (PODS, RECEIPTS, SCALE TICKETS, ETC) MUST BE SUBMITTED TO YOUR CARRIER REP AND ADVISED DISTRO EMAIL WITHIN 48 HOURS OF DELIVERY OR IT WILL RESULT IN A \$50 RATE REDUCTION. IF PAPERWORK IS NOT RECEIVED WITHIN 30 DAYS OF DELIVERY, THE RIGHT TO COLLECT ON ANY SERVICES PROVIDED IS FORFEITED.

****ELECTRONIC TRACKING IS REQUIRED FOR ALL LOADS****!!IF TRACKING IS ACCEPTED AND MAINTAINED THROUGHOUT TRANSIT, VERIFIED DETENTION WILL BE AUTOMATICALLY APPROVED. FREE TIME IS 2 HOURS PER FACILITY, UNLESS SUPERSEDED BY THE CUSTOMER REQUIREMENTS & SPECIFICATIONS NOTES ABOVE. IF TRACKING IS NOT ACCEPTED, EXPECT SIGNIFICANT DELAYS FOR DETENTION APPROVAL

Accessorial Driver Tailgate: \$35 | Driver Load/Unload: \$100 | Stop-Off: \$50 | Detention: \$50 per hour after 2 free hours, subject to Layover maximum. Truck Order Not Used: \$150 | Driver Layover (Dry): \$175 | Driver Layover (Temp Controlled): \$250 | Trailer Storage (No Power): \$30 per day Lumper Fee: Reimbursed in full with valid receipt. Notification in real time required unless otherwise noted on this Carrier Rate Confirmation. All accessorials require approval.

Comchek Service Fee Comcheks or Relay codes issued by Broker for accessorials (lumper, pallet exchange, etc) or quickpay incur Comdata's automatic fee of \$5 per \$500-tier issued. This fee will be applied to the carrier invoice regardless if the Comchek is used or cancelled, and regardless if a replacement Comchek is issued. Comdata's and Relay's fees is applied to every single Comchek issued. Use caution when requesting duplicate or replacement Comcheks.

Email Complete Invoices to ap@transportationone.com. Re-bills will only be accepted with 30 days of delivery. (fax# 312-284-4946) Must include invoice with correct remittance address, bill of lading, signed proof of delivery, signed rate confirmation, and all lumper/accessorial receipts. For Quick Pay, email complete invoices to quickpay@transportationone.com and indicate preference for Same-Day ACH (3% fee, must be submitted before 12pm) Fees are calculated off the total invoice amount, if any accessorial is pending or paperwork is missing, we will not be able to process your payment until approved.

This Rate Confirmation, the Carrier Terms and Conditions and Exhibit A: Accessorial Schedule maintained by Transportation One LLC as revised from time to time, available at <http://www.transportationone.com/carrier-terms-conditions> govern the rate and conditions for the movement of the above referenced freight (the 'Order') and are hereby incorporated by reference and become a part of your Transportation One LLC Carrier-Broker Contract. Carrier, as indicated above, agrees that said mutually agreed rates are reasonable and compensatory, the Order would not have been tendered to Carrier at higher rates, and the Order will not subsequently be subject to a later claim of under charges. Acceptance of the Order into Carrier's care, custody, or control is deemed Carrier's acceptance of all terms, conditions, requirements, and specifications of the Order. Failure of Carrier to sign and return this Rate Confirmation does not release Carrier from its obligations with respect to the Order. The terms and conditions in effect on the pick up date apply to and govern all services rendered with respect to the Order.

Name: **Conor Smith** Initial: Email: **conor@rtbrz.com**

1st Driver Name: **Royer**

1st Driver Number: **(832) 606 6988**

Truck no: **832**

Trailer no: **PTLZ241131**

By typing your name/signature/initials on this document, you agree that you are signing it electronically (hereafter referred to as 'E-Signature'). You agree that your E-Signature is the legal equivalent of your handwritten signature on this document and constitutes acceptance of and agreement to this document's terms and conditions as if actually signed by you with pen-and-paper. You also represent that you are authorized to enter into this agreement on behalf of yourself, your employer, agent, principal, servant, attorney, insurers, and/or reinsurers, and they and you collectively will be bound by the terms of this document. By signing this document you are agreeing to receive text messages from Transportation One LLC pertaining to E-tracking enablement, location updates, and general event updates.

BILL OF LADING

#10 366661

CC# 14047

CARRIER COPY [Page 1/1]

CRYSTAL GEYSER
NATURAL
ALPINE SPRING WATER
BY CG ROXANE**SHIP FROM**
Name: CG ROXANE - BENTON, TN
Address: 303 CRYSTAL GEYSER LANE, BOX 487
City/State/Zip: BENTON, TN 37307
SID#: _____
Phone: (423)338-4453
FOB: ☐Bill of Lading Number:
0000000010366661**SHIP TO**
Name: NATCO FOOD SERVICE
Address: 321 WEST 10TH STREET, BOX 487
City/State/Zip: RESERVE, LA 70084
CID#: _____
Location#: _____
Phone: 985 479 4200
FOB: ☐Carrier Name: TRANSPORTATION ONE,
Carrier Address: 1315 N NORTH BRANCH ST., SUITE E
Carrier City/State/Zip: CHICAGO, IL 60642
Carrier Phone#: 312-521-8418
Delivering Carrier (Trucker) Name: ROYER
SCAC: TXOK**THIRD PARTY FREIGHT CHARGES BILL TO:**
Name: _____
Address: _____
City/State/Zip: _____Trailer licence#: 380919TTN
Container number:
Seal number(s): 1003515
Driver Sealed: Y/N
Pro number:**SPECIAL INSTRUCTIONS:** ATTN DRIVER -DRIVE AT A SAFE SPEED, SLOW
DOWN, MAINTAIN EXTRA FOLLOWING SPACE, AND BE PREPARED TO STOP -MAKE WIDE
TURNS CAREFULLY, AVOID HARD BRAKING -USE LOAD LOCKS AND/OR STRAPS TO
SECURE PRODUCTFreight Charge Terms: (freight charges are prepaid unless marked otherwise)
Prepaid ☒ Collect ☐ 3rd Party ☐
☐ Master Bill of Lading: with attached underlying Bills of Lading**CUSTOMER ORDER INFORMATION**

PURCHASE ORDER NUMBER	CUSTOMER REFERENCE	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
44910		18	43,605	Y N	
				Y N	
				Y N	
GRAND TOTAL	18 PAL	43,605 lbs			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	HEIGHT	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
18	PAL	1,008	CASE	43,605	54.5"	ASW 12/1.50L CGR/FC/LOOSE/TRAY/56 UPC#0 75140 12500 5 Lot# 18 04/02/2024 04/02/2026 Line#3		
18		1,008		43,605 lbs		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 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).**

By signing hereunder, the Carrier acknowledges that the contents of the shipment were open for inspection at the time of loading. Additionally, the Carrier acknowledges, warrants and certifies that the quantity of the contents for the shipment are accurately reflected on this Bill of Lading and that the contents were received in proper condition. Carrier covenants that they will be liable for any discrepancy upon delivery between the contents of the shipment and/or their condition and what is indicated on this Bill of Lading.

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.


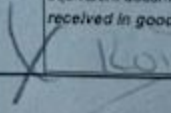
Shipper Signature

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 has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.


4/3/24
Royce 4/3/24

BILL OF LADING

#10 366661

CC# 14047

CARRIER COPY (Page 1/1)

SHIP FROM
Name: CG ROXANE - BENTON, TN
Address: 303 CRYSTAL GEYSER LANE, BOX 487
City/State/Zip: BENTON, TN 37307
SID#:

Phone:
(423)338-4453

FOB: ☐

Bill of Lading Number:
0000000010366661

CRYSTAL GEYSER
NATURAL
ALPINE SPRING WATER
BY CG ROXANE

SHIP TO
Name: NATCO FOOD SERVICE
Address: 321 WEST 10TH STREET, BOX 487
City/State/Zip: RESERVE, LA 70084
CID#:

Location#:
Phone:
985 479 4200
FOB: ☐

Carrier Name: TRANSPORTATION ONE,
Carrier Address: 1315 N NORTH BRANCH ST., SUITE E
Carrier City/State/Zip: CHICAGO, IL. 60642
Carrier Phone#: 312-521-8418
Delivering Carrier (Trucker) Name: ROYER
SCAC: TXOK

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:
Address:
City/State/Zip:

Trailer licence#: 380919TTN
Container number:
Seal number(s): 1003515
Driver Sealed: Y/N
Pro number:

SPECIAL INSTRUCTIONS: ATTN DRIVER -DRIVE AT A SAFE SPEED,SLOW
DOWN,MAINTAIN EXTRA FOLLOWING SPACE, AND BE PREPARED TO STOP-MAKE WIDE
TURNS CAREFULLY, AVOID HARD BRAKING -USE LOAD LOCKS AND/OR STRAPS TO
SECURE PRODUCT

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

Prepaid ☒ Collect ☐ 3rd Party ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

PURCHASE ORDER NUMBER	CUSTOMER REFERENCE	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
44910		18	43,605	Y N	
				Y N	
				Y N	
GRAND TOTAL		18 PAL	43,605 lbs		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	HEIGHT	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
18	PAL	1,008	CASE	43,605	54.5"	ASW 12/1.50L CGR/FC/LOOSE/TRAY/55 UPC#0 75140 12500 5 Lot# 18 04/02/2024 04/02/2026 Line#3		
18		1,008		43,605 lbs		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 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).

By signing hereunder, the Carrier acknowledges that the contents of the shipment were open for inspection at the time of loading. Additionally, the Carrier acknowledges, warrants and certifies that the quantity of the contents for the shipment are accurately reflected on this Bill of Lading and that the contents were received in proper condition. Carrier covenants that they will be liable for any discrepancy upon delivery between the contents of the shipment and/or their condition and what is indicated on this Bill of Lading.

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

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 has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

ROYER 04/03/24

Driver Check in: 04/03/2024 12:31 PM - Printing Date: 04/03/2024 02:16 PM
Ship Date: 04/03/2024 Delivery Date: 04/04/2024

BILL OF LADING

#10 366661

CLIENT COPY | Page 1/1

SHIP FROM		Bill of Lading Number:	CC# 14047	BOTTLED AT THE SOURCE
Name: CG ROXANE - BENTON, TN	Phone: (423)338-4453	00000000010366661		CRYSTAL GEYSER NATURAL ALPINE SPRING WATER BY CG ROXANE
Address: 303 CRYSTAL GEYSER LANE, BOX 487				
City/State/Zip: BENTON, TN 37307	FOB: <input type="checkbox"/>			
SID#:				

SHIP TO		Carrier Name:	Carrier Address:	Carrier City/State/Zip:	Carrier Phone#:	Delivering Carrier (Trucker) Name:	SCAC:
Name: NATCO FOOD SERVICE	Location#:	TRANSPORTATION ONE,	1315 N NORTH BRANCH ST., SUITE E	CHICAGO, IL. 60642	312-521-8418	ROYER	TXOK
Address: 321 WEST 10TH STREET, BOX 487	Phone: 985 479 4200						
City/State/Zip: RESERVE, LA 70084	FOB: <input type="checkbox"/>						
CID#:							

THIRD PARTY FREIGHT CHARGES BILL TO:		Trailer licence#:	Container number:	Seal number(s):	Driver Sealed:	Pro number:
Name:		380919TTN		1003515	Y/N	
Address:						
City/State/Zip:						
SPECIAL INSTRUCTIONS: ATTN DRIVER - DRIVE AT A SAFE SPEED, SLOW DOWN, MAINTAIN EXTRA FOLLOWING SPACE, AND BE PREPARED TO STOP - MAKE WIDE TURNS CAREFULLY, AVOID HARD BRAKING - USE LOAD LOCKS AND/OR STRAPS TO SECURE PRODUCT		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading				

CUSTOMER ORDER INFORMATION					
PURCHASE ORDER NUMBER	CUSTOMER REFERENCE	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
44910		18	43,605	Y N	
				Y N	
				Y N	
GRAND TOTAL		18 PAL	43,605 lbs		

CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	HEIGHT	COMMODITY DESCRIPTION	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC #	CLASS	
18	PAL	1,008	CASE	43,605	54.5"	ASW 12/1.50L CGR/FC/LOOSE/TRAY/56 <i>UPC#0 75140 12500 5</i> Lot# 18 04/02/2024 04/02/2026 Line#3			
18		1,008		43,605 lbs		GRAND TOTAL			

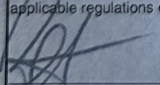
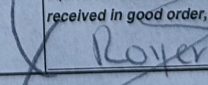
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to not exceeding _____ per _____.	COD Amount: \$ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>
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NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).
By signing hereunder, the Carrier acknowledges that the contents of the shipment were open for inspection at the time of loading. Additionally, the Carrier acknowledges, warrants and certifies that the quantity of the contents for the shipment are accurately reflected on this Bill of Lading and that the contents were received in proper condition. Carrier covenants that they will be liable for any discrepancy upon delivery between the contents of the shipment and/or their condition and what is indicated on this Bill of Lading

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

SHIPPER SIGNATURE / DATE	Trailer Loaded:	Freight Counted:	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.	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<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 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. Property described above is received in good order, except as noted.
 4/3/24			 Royer 4/3/24

WAB
4/4/24
[Signature]