

**Bill to:**

ALLEN LUND COMPANY, LLC
PO BOX 339,
La Canada Flintridge,
CA,
91012

Invoice Date: 05/03/2024

Invoice #: 6921259

Terms: NET 30

Due Date: 06/03/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/01/2024		8401 JEFFERSON HWY, OSSEO, MN 55369 - 351 APPLE VALLEY RD, WINCHESTER, VA 22602			
			1	\$2,500.00	\$2,500.00

TOTAL
\$2,500.00

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 Load Confirmation - 6921259

Driver must call prior to heading to shipper
Call (800) 234-5863 or (470) 242-7427 and ask for Load 6921259

04/30/24 13:42 (EST)

ATTENTION: CARRIER CONTACT	LOAD REQUIREMENTS	ALLEN LUND BOOKING CONTACT
<p>JACK</p> <p>ZIGI FREIGHT INC *</p> <p>DBA ROYAL3 INC</p> <p>CHICAGO, IL</p> <p>(630) 485-7370, EXT :140</p> <p>Sent To:jack.j@royal3inc.com</p>	<p>Equipment Type: DRY VAN</p> <p>Special Equipment Needs:LOAD LOCKS</p> <p>Equipment Size:53</p> <p>Temp:</p> <p>Hazmat: NO</p> <p>Estimated Weight: 42,000</p>	<p>Contact: Sean Asip</p> <p>Allen Lund Company, Atlanta</p> <p>Tel: (800) 234-5863 Ofc: (470) 242-7427</p> <p>Cell: (770) 596-9799</p> <p>Fax: (800) 688-5863</p> <p>Email: sean.asip@allenlund.com</p> <p>After Hours: (770) 596-9799</p>

Comments:-

SPECIAL INSTRUCTIONS:

*Driver will be required to scale the load prior to being offloaded in either Winchester, VA or Fernley, NV depending upon delivery location. A scale is provided at a Trex facility in both cities free of charge. Once the driver offloads, then they will be required to scale out again to provide empty weight ticket. Please make sure all drivers have the PO number on the BOL and weight tickets. This is crucial in determining the volume of plastic and a requirement for billing purposes. The scale tickets must be provided at the time of invoicing to be paid for the load along with the bill of lading. Failure to do so could result in non-payment of the load. For combo loads or Triple loads, the drivers need to scale at each stop if available or they could go over their 2 hour allotted time. Thank you, .

*--PLEASE HAVE THE DRIVER CALL FOR DISPATCH. --HAVE THE DRIVER CALL WHEN LOADED --THE QUOTED RATE INCLUDES ALL SURCHARGES. --THE SHIPPER'S SEAL ON THE TRAILER DOORS MUST NOT BE BROKEN UNTIL THE TRUCK ARRIVES AT THE DESTINATION AND THE RECEIVER ACKNOWLEDGES THAT THE SEAL IS STILL INTACT. FAILURE TO DO THIS COULD RESULT IN THE REJECTION OF THE PRODUCT AND THE COSTS INCURRED TO HELP RESOLVE THE MATTER WILL BE THE CARRIER'S RESPONSIBILITY. --THANK YOU FOR THE TRUCK..

EMERGENCY CONTACT INFO: For any urgent problems or issues, after regular business hours or over weekends, you may reach our After Hours Dispatcher at (800) 234-5863.

PICKUP INFORMATION

Pick Up #1:	HB FULLER
Address:	8401 JEFFERSON HWY
	OSSEO, MN 55369
Contact:	MARC
Phone:	(651) 392-2958

Pick Up Date:	05/01/2024 Wednesday
Pick Up Time:	12:00
FCFS Notes:	
Appt Conf #:	
PU/PO #:	734432
BOL #:	

Directions :

Line#	Commodity/Product	Description	Quantity	Pallets	PU PO#	DEL/PO#	BOL#	Weight
1	PLASTIC/PVC		25 BOX					40,000

ALLEN LUND RATE CONFIRMATION

	Total:	25		Total:	0	
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DELIVERY INFORMATION

Delivery #1:	WINCHESTER POLY RECEIVING CENTER
Address:	351 APPLE VALLEY RD
	WINCHESTER, VA 22602
Contact:	
Phone:	(540) 542-6487

Delivery Date:	05/03/2024 Friday
Delivery Time:	08:00
FCFS Notes:	

Directions:

Commodity/Product	Description	Quantity		Pallets	
PLASTIC/PVC		25	BOX		
		Total:	25	Total:	0

RATE DETAILS

	Description	UOM	Rate	QTY	Total
Truck Rate		FLT	\$2,500.00	1	\$2,500.00
Advance Amount	\$0.00				
Advance Fee	\$0.00				
Additional Payments					
Total Carrier Payments	\$2,500.00				
Balance Due	\$2,500.00				

INVOICE INFORMATION

FOR STANDARD PAY or ACH, PLEASE EMAIL YOUR FREIGHT BILLS TO: billing@allenlund.com or FAX TO: (800) 375-5109

If you email or fax your required paperwork, please do not submit copies by mail unless otherwise instructed by the Allen Lund Company.

QUICK PAY BY COMCHECK CARRIERS ONLY: If you wish to be paid by comcheck, you may email or fax your invoice and required paperwork to: atlantadry@allenlund.com or (800) 688-5863. Please include the load number and "Quick Pay" in the subject line and ensure your invoice is marked with "Quick Pay by ComCheck."

*If you request and receive payment by comcheck, please **do not mail original paperwork** unless otherwise instructed by Allen Lund Company.*

Carrier shall retain custody of original paperwork and provide it to the Allen Lund Company upon request.

Freight Charges will not be paid without required paperwork. To insure prompt payment, the following paperwork must be included with your invoice: copy of this load confirmation, customer signed Bill of Lading, and lumper receipts (if applicable).

In the event you wish to mail required paperwork for payment, please send all required documents listed above to: Allen Lund Company, PO BOX 339, LA CANADA, CA 91012

Please enter Load Confirmation #6921259-AT on all paperwork before emailing, faxing or mailing.

Please direct payment inquiries to: apatlanta@allenlund.com or by calling 800-234-5863.

CONTRACT ADDENDUM AND LOAD CONFIRMATION PROVISIONS

1. There will be a charge for all advances and/or advanced settlements as follows:
 - a. Fee for an advance is 2% of the due carrier amount or \$25.00, whichever amount is higher.
 - b. Fee for an advanced settlement upon delivery is 2% of the settlement amount or \$25.00, whichever is higher.
 - c. There is no fee for normal payments.
2. Any accessorial charges must be approved in advance by **BROKER** and must be supported by an invoice or signed receipt of funds.
3. FINAL PAYMENT CANNOT BE MADE WITHOUT A SIGNED COPY OF THE BILL OF LADING AND A SIGNED COPY OF THE RATE CONFIRMATION.
4. To facilitate payment, please include a copy of this signed RATE CONFIRMATION with your invoice.
5. CARRIER REPRESENTS AND AGREES THAT ONLY TRACTORS AND TRAILERS COVERED BY THE VALID, EXISTING INSURANCE FOR BOTH LIABILITY AND CARGO RISKS WILL BE UTILIZED TO TRANSPORT THIS LOAD.
6. CARRIER SHALL NOT CAUSE OR PERMIT ANY SHIPMENT TENDERED HEREUNDER TO BE BROKERED TO OR TRANSPORTED BY ANY OTHER MOTOR CARRIER, OR IN SUBSTITUTED SERVICE BY RAILROAD OR BY OTHER MODES OF TRANSPORTATION.
7. Directions supplied by the Allen Lund Company or its customers either orally and/or written form are for informational purposes only. It is the Carrier's sole responsibility to confirm that it may lawfully operate a loaded vehicle of any weight, commodity or dimension over any highway, bridge or route.
8. Carrier is responsible for supplying equipment that is compliant with regulations of the California Air Resources Board (CARB) if operating in the state of California. Carrier will indemnify Allen Lund Company for any fines assessed for the carrier's failure to comply with the regulations.
9. The carrier agrees that it will not double-broker the load or change the specified mode of transportation. If this agreement is breached and another carrier's MC# or name is on the tractor, trailer, or bill of lading, or if other facts convincingly show that another carrier transported the load, ALC will exercise its contractual right to pay the delivering carrier directly. Additionally, ALC reserves the right to charge the booking carrier up to \$5,000 for the time and resources ALC must spend in investigating the carrier-delivery or mode-of-transportation issue. Any exceptions to this agreement must be in writing, signed by the parties, at the time the load is booked.

This document clarifies, augments and amends the carrier and broker agreement between ALLEN LUND COMPANY, INC. and CARRIER and becomes part of that agreement.

PRINT & SIGN THIS PAGE and then

FAX to: (800) 688-5863 or EMAIL to: sean.asip@allenlund.com

Carrier Name

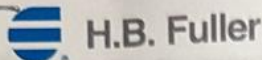
Print Name of Authorized Signature

Date

Authorized Carrier Signature

Thank you to all of the professional truck drivers.
Allen Lund Company appreciates your hard work and dedication to keep freight moving every day!

Load #6921259



STRAIGHT BILL OF LADING
NOT NEGOTIABLE

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IN CASE OF EMERGENCY CALL
CHEMTREC : 1-800-424-9300 CUSTOMER#: 8699
24 HOUR MEDICAL NUMBER : 1-888-853-1758

TMS Load ID		Delivery No.	Shipping Date	Bill of Lading No
		81756659	05/01/2024	1623901
Delivery Date	Customer Purchase Order Number	H.B. Fuller Sale Order Number		Delivery Terms
05/01/2024	734432	0031296548		Free Carrier
Shipped From			* Consigned To	
MAPLE GROVE US 8401 Jefferson Hwy Maple Grove, MN, US, 55369			TREX COMPANY 351, APPLE VALLEY ROAD WINCHESTER, VA, US, 22602	
Total Gross Weight including Packaging Weight		Carrier		Shipping Instructions
18,750.697 KG 41,338.245 LB		COLLECT SHIPMENT VENDOR CUSTOMER COLLECT/PICKUP WICO		
PRO No.	Trailer	Seal No.		

Quantity	Package Type	HM	Description of Goods	Product	Item Gross Weight
39,672.018	LB			TSC00 PE GYD 743.85KG RAILING COMPOSITE PELLETS	41,338.245 LB

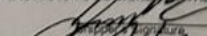
Additional Shipping Instructions

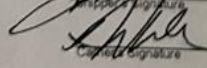
RECEIVED, subject only to the written contract between the carrier and the shipper in effect on the date of issuance of this Bill of Lading, the property described below, in good order and condition, except as noted (contents and conditions of contents of packages unknown) marked, consigned and destined as shown below. It is mutually agreed as to each carrier of all or any of said property and as to each party at any time interested in said property, that the services to be performed shall be subject to all of the written conditions in effect between the parties on the date of shipment. This Bill of Lading is not subject to any individually determined rates, carrier tariff, supplement or classification, except as specifically agreed to in writing by shipper and carrier prior to shipper's tender of the property to the originating carrier or its pickup agent.

CARRIER CERTIFICATION: 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.

The following is required for United States shipments only. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	Charges Advanced. If the shipment moves between two ports by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight." NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exacting.	Shippers Imprint in lieu of stamp, not a part of the Bill of Lading approved by the Interstate Commerce Commission. 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 Department of Transportation.	The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Consolidated Freight Classification.
Signature	Value	Signature of Consignor	Signature

THIS BILL OF LADING IS TO BE SIGNED BY THE SHIPPER AND CARRIER

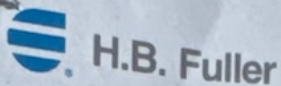
Shipper:  Date: 5-1-29

Carrier:  Date: 5-1-24

Consignee: _____ Date: _____

Freight Charges:

COLLECT



STRAIGHT BILL OF LADING
NOT NEGOTIABLE

DOCK
42-46

IN CASE OF EMERGENCY CALL
CHEMTREC : 1-800-424-9300 CUSTOMER#: 8699
24 HOUR MEDICAL NUMBER : 1-888-853-1758

Page 1 of 1

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Additional Shipping Instructions

BAUSE (MAN)

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Signature _____	Signature _____	Signature of Consignor _____	Signature _____
THIS BILL OF LADING IS TO BE SIGNED BY THE SHIPPER AND CARRIER			
Shipper: _____	Date: 5-1-29		
Carrier: _____	Date: 29 5-1-24		
Consignee: _____	Customer's Signature _____		

Freight Charges
COLLECT