

**Bill to:**

COVENANT TRANSPORT SOLUTIONS INC  
P.O. BOX 23968,  
Chattanooga,  
TN,  
37422

Invoice Date: 05/03/2024

Invoice #: #5000061004

Terms: NET 30

Due Date: 06/03/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/01/2024		996 Paragon Way, Rock Hill, SC 29730-0007 - 911 Lund Blvd, Anoka, MN 55303-1090			
			1	\$2,400.00	\$2,400.00

TOTAL
\$2,400.00

**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**

## Covenant

400 Birmingham Hwy  
Chattanooga, TN 37419

Sent at: 05/01/2024 10:02 CST



### To update tracking info:

After Hours Phone: (423) 463-3648  
After Hours Email:  
extendedcoverage@covenantlogistics.com

Contact your Covenant Rep, Jacob Cross

**Email:** jcross@covenantlogistics.com

**Phone:** +14234633665

**Questions?** Please contact your Covenant rep using the info above or anytime at (423) 463-3648.

## Rate Confirmation

### Route # 5000061004

**Mode:** Truck

**Size:** FTL

**Route Type:** OTR

**Distance:** 1197 Miles

**# of Stops:** 2

Origin

**Rock Hill, SC 29730-0007**

Destination

**Anoka, MN 55303-1090**

**Date:** 5/1/2024

**Equipment:** Van 53

**Expected Min Temp:**

**Expected Max Temp:**

**Temp Setting:**

**Carrier:** Royal3 Inc

**MC#:** 944686

**DOT#:** 2828543

**Contact:** Asta

**Phone:** +16305661312

**Email:** DISPATCH@ROYAL3INC.COM

**Total Rate:** \$2,400.00 USD

### Notes:

**Route Refs:**

**Vendor Refs:**

### If this is a Temperature Controlled Shipment Please Follow These Guidelines:

Run all reefers on continuous unless specific written instructions are given to do otherwise. Maintain the reefer temperatures notated on BOL. If no temperature is listed on the BOL, please call your Covenant rep listed above.

### Stop 1 – Pick Up

TSI - DC 095 ROCK HILL  
996 Paragon Way,  
Rock Hill, SC 29730-0007

**Date/Time:** 5/1/2024 11:15 - 16:00  
**Scheduling:** Appointment  
**Loading Type:** Live  
**Pallet Count:** 0  
**Work:** No Touch

### Special Reqs:

EDI #: 1 EDI #: B24121E01855 DEL #: 03426469 Cust Ref #: PR03877003 PO #: 954-484625	
Pick Up Instructions: B24121E01855	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
		112		No	1		No	No					9,360 lbs
Additional Details   Load On: Pallet													
Total HU: 0				Total Pcs: 112			Total Cmdty: 1			Total Wgt: 9360 lbs			

Stop 2 – Delivery	
HOM FURNITURE 911 Lund Blvd, Anoka, MN 55303-1090  Date/Time: 5/3/2024 06:00 Scheduling: Appointment Loading Type: Live Pallet Count: 0 Work: No Touch  EDI #: 2 EDI #: B24121E01855 DEL #: 03426469 Cust Ref #: PR03877003 PO #: 954-484625	Special Reqs:
Delivery Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
		112		No	1		No	No					9,360 lbs
Additional Details   Load On: Pallet													
Total HU: 0				Total Pcs: 112			Total Cmdty: 1			Total Wgt: 9360 lbs			

**Carrier Cost**    Date: 05/01/2024 10:02 CST

Cost Type	Currency	Cost Per	Units	Total Cost
Flat Rate	USD	\$2,400.00	1	\$2,400.00
<b>Total Cost</b>				\$2,400.00

**Freight and Payments Terms**

By accepting this load, Carrier agrees to the following terms:

- Carrier agrees to utilize load visibility tools while transporting this load so as to allow Solutions to provide status updates upon request of its customers. Carrier's failure to ensure Solutions has load status visibility may result in loss of or reduction in future shipment opportunities.
- All invoices/freight bills must include: Signed Original Bill of Lading with the seal number clearly legible and any other signed proof of delivery (POD); Solutions' route number (Solutions will not make payment to Carrier without Solutions' route number); Origin, Destination, Commodity, Pieces, Weight, and Quoted Rate; Receipts for any Solutions' authorized accessorial charge that Carrier submits (all accessorial charges submitted must have been approved by Solutions prior to or at the time the Carrier incurred the related expense); and a signed Rate Confirmation Sheet, including a list of any accessorial charge(s) agreed to by Solutions and Carrier.
- Carrier agrees that the rates and charges herein are the only rates and charges to be paid by Solutions except as may otherwise be set forth in a separate Broker-Carrier Agreement between the parties. No other tariff rates or charges will apply. Solutions will only pay additional charges if the charges are mutually agreed to in writing and Solutions is able to collect the charges from customer. In order to be eligible for reimbursement, Carrier must provide notification of any unplanned accessorial charges before they occur. Solutions will not reimburse detention charges unless "in" and "out" times are clearly stated on the Bill of Lading and those times are initialed by an authorized facility representative. Solutions will reimburse Carrier for approved lumpers costs upon submission by Carrier of a signed lumper receipt. In order to be eligible for lumper reimbursement, lumper receipts must be submitted to Solutions on the day the lumper service was utilized.
- Carrier will be charged up to a 4% fee for Comcheck advances for accessorial charges.
- Carrier must be on-time for all stops in order to be eligible for the Service Bonus (if applicable).
- Carrier agrees to instruct its drivers to comply with shipper and receiver facility pick up and delivery guidelines and in-transit requirements.
- Carrier agrees to submit all applicable paperwork (signed rate confirmation, POD, & invoice) to Covenant within 60 days of delivery to be eligible for payment.

**Payment Information**

For Standard Pay (within 30 days from receipt of invoice):

Send all paperwork (signed rate confirmation, POD, & invoice) to solutionsAP@covenantlogistics.com.

All paperwork must be sent in PDF format to be accepted.

Covenant route # must be included in the subject line of the email to be accepted.

All payments issued via TriumphPay - Get paid easier and faster by registering at secure.triumphpay.com!

For Quickpay:

Send all paperwork (signed rate confirmation, POD, & invoice) to solutionsAP@covenantlogistics.com.

All paperwork must be sent in PDF format to be accepted.

Covenant route # and "Quick Pay" must be included in the subject line of the email to be accepted.

All payments issued via TriumphPay - Get paid easier and faster by registering at secure.triumphpay.com!

**Legal Terms and Signoff**

By accepting this load, Carrier agrees to the following terms:

All services provided by Carrier with respect to the shipment(s) and/or load(s) identified in this Rate Confirmation Sheet are subject to the terms and conditions of the Broker-Carrier Agreement ("Carrier Contract") between Carrier and Covenant Transport Solutions, LLC. ("Solutions").

Carrier is responsible to ensure that the trailing equipment is sealed and the seal number is clearly written on the Bill of Lading for all loaded shipments.

Carrier is operating under its own for-hire motor carrier operating authority and assumes all risks and costs associated with normal contract carrier transportation. Carrier agrees that it will not, under any circumstances, tender the cargo identified herein to any third-party for transportation. If Carrier is unable to transport the load identified herein, Carrier must notify Solutions immediately. Carrier will not be paid if Carrier fails to comply with this

provision.

By accepting this load, Carrier represents, warrants that it is aware of and, to the extent applicable to its operations, is in compliance with the California Air Resources Board Truck and Bus Regulation (Title 13, California Code of Regulations, Section 2025), Drayage Truck Regulation (Title 13, California Code of Regulations, Section 2027), Greenhouse Gas Regulation (Title 17, Section 95300 et. seq.) and Transport Refrigeration Unit Regulations (Title 13, Section 2477), and (ii) any equipment that it uses or operates in California to transport this load shall be fully compliant with any and all applicable California Air Resource Board regulations. Upon request Carrier shall provide proof of compliance. Carrier shall be liable to Solutions for any penalties imposed on Solutions or Solutions' customers because of Carrier's use of non-compliant equipment.

*ASTA MIJAC*

Please sign and return to Covenant

5/01/24

Trial **BILL OF LADING**

Page 1

**SHIP FROM**DHL Supply Chain  
996 Paragon Way

Rock Hill, SC 29730

SID#: 0000472796/0000472797

FOB: ☐**SHIP TO**RESIDENT HOME - HOM FURNITURE INC  
911 Lund Blvd

Anoka, MN 55303

CID#: 00035574

US

FOB: ☐Bill of Lading Number: **B24121E01855****B24121E01855**CARRIER NAME: **Convenant**Trailer number: **03262**Seal number(s): **8103666**SCAC: **CVTH**

Pro number:

**THIRD PARTY FREIGHT CHARGES BILL TO:**Harrisburg Control Tower  
DHL Supply Chain c/o US Bank  
P.O. Box 3001 **13** Pallets  
Naperville, IL 60566-7001 **112** UnitsSPECIAL INSTRUCTIONS: Apt/ Brian bdent@homfurniture.  
com - 763-767-3612 10 Days prior; 04/29;Freight Charge Terms: (freight charges are prepaid unless  
marked otherwise)Prepaid ☒ Collect ☐ 3<sup>rd</sup> Party ☐☐  
(check box)Master Bill of Lading: with attached underlying  
Bills of Lading**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LBS)	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
954-484625	17	9360.00	Y (N)	Order No : 03426469
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL	17	9360		

**CARRIER INFORMATION**

HANDLING UNIT		PACKAGE		WEIGHT (LBS)	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. See Section 2(e) of NMFC Item 380.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
17	CTN	17	CTN	9360.00		Mattress/Foundation/Adjust Base	LTL2	175.0
17		17		9360		GRAND TOTAL		

Carriers liability for loss, damage or delay is limited to:

\$ \_\_\_\_\_ per lb  
\$ \_\_\_\_\_ per shipment (truckload)

Shipper: \_\_\_\_\_ By: \_\_\_\_\_

COD Amount: \$ \_\_\_\_\_

Fee Terms: Collect: ☐ Prepaid: ☐  
Customer check acceptable: ☐**NOTE Carrier's liability is for the actual loss unless otherwise agreed in contract, or stated above and signed by Shipper.**

RECEIVED, subject to the written transportation contract between shipper and carrier, if applicable, otherwise subject to the terms and conditions of the shipper's standard transportation contract in effect on the date of shipment, which is available to the carrier on request. This shipment is not subject to any classification or tariffs which may be established by the carrier.

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 Department of Transportation.

**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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.  
Property described above is received in good order, except as noted.  
5/1/24



5/01/24

Trial **BILL OF LADING**

Page 1

DHL Supply Chain  
996 Paragon Way

Rock Hill, SC 29730

SID#: 0000472796/0000472797

SHIP FROM

FOB: ☐RESIDENT HOME - HOM FURNITURE INC  
911 Lund Blvd

Anoka, MN 55303

CID#: 00035574

US

FOB: ☐

## THIRD PARTY FREIGHT CHARGES BILL TO:

Harrisburg Control Tower  
DHL Supply Chain c/o US Bank  
P.O. Box 3001  
Naperville, IL 60566-7001  
13 Pallets  
112 UnitsSPECIAL INSTRUCTIONS: Apt/ Brian bdent@homfurniture.  
com - 763-767-3612 10 Days prior; 04/29;Bill of Lading Number: **B24121E01855****B24121E01855**CARRIER NAME: **Convenant**Trailer number: **03262**Seal number(s): **8103666**SCAC: **CVTH**

Pro number:

(12)

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

Prepaid ☒ Collect ☐ 3<sup>rd</sup> Party ☐☐  
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

## CUSTOMER ORDER NUMBER

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LBS)	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
954-484625	17	9360.00	Y (N)	Order No : 03426469
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL	17	9360	Y N	

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT (LBS)	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. See Section 2(e) of NMFC Item 300.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
17	CTN	17	CTN	9360.00		Mattress/Foundation/Adjust Base	LTL2	175.0
17		17		9360				
GRAND TOTAL								

Carrier's liability for loss, damage or delay is limited to:

\$ \_\_\_\_\_ per lb  
\$ \_\_\_\_\_ per shipment (truckload)

Shipper: \_\_\_\_\_ By: \_\_\_\_\_

**NOTE Carrier's liability is for the actual loss unless otherwise agreed in contract, or stated above and signed by Shipper.**

RECEIVED, subject to the written transportation contract between shipper and carrier, if applicable, otherwise subject to the terms and conditions of the shipper's standard transportation contract in effect on the date of shipment, which is available to the carrier on request. This shipment is not subject to any classification or tariffs which may be established by the carrier.

## 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 Department of Transportation.

## 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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Shipper Signature

5-3

5/1/24