



Bill to:
CBT INC
PO BOX 386,
Oakwood,
GA,
30566

Invoice Date: 05/15/2024
Invoice #: 230423
Terms: NET 30
Due Date: 06/15/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/13/2024		1 Nathan Sedley Rd, Shreveport, LA 71115, USA - 1951 N Church St, Rocky Mount, NC 27804, USA			
			1	\$2,000.00	\$2,000.00

TOTAL
\$2,000.00

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

PRO # 230423

Rate Confirmation

05/13/24 09:42:17 (EST)



CBT, INC.
PO BOX 386
OAKWOOD GA 30566

F
R
O
M

ROBBY BANKS
(770) 967-0173
robby@cbtoakwood.com

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ROYAL3 INC DBA ZIGI FREIGHT IN
(630) 485-7370 (p) Att: SAMM X111
(630) 485-6980 (f)
MC # 944686 Truck # 723
DOT 2828543 Trailer # 289477
Driver SAMATAR Cell # (612) 707-1243

Size & Type: 53' VAN OR REEFER

Description: DRY

Miles:

Pieces: 28

Weight: 40577

CHARGES		DISPATCH NOTES
LINE HAUL RATE	2000.00	
TOTAL RATE	2000.00	

PICK 1

RONPAK INC
1 NATHAN SEDLEY WAY
SHREVEPORT LA 71115
Phone/Contact: (318) 629-8975 APPT

Appointment 05/13/24 @ 12:00

Pieces: 0

Weight: 0

STOP 1

MFS - ROCKY MOUNT (07)
1951 N CHURCH STREET
ROCKY MOUNT NC 27804
Phone/Contact: (877) 253-7017 APPT

Appointment 05/15/24 @ 03:00

Appt Notes: 62068-4779356

Pieces: 0

Weight: 0

Ref # 8351822

Ref # CBTF

Ref # NET 15 DAYS

Ref # MBM INBOUND

Ref # 8351822

Any late pickups or deliveries may result in a fine.
This load requires the driver to use Macropoint tracking software from the time the driver is dispatched until the load is delivered. We reserve the right to take the carrier off of the load if the driver refuses to use Macropoint for tracking purposes. If carrier refuses to use or terminates, pauses or cancels the tracking after getting loaded, a \$150.00 fee will be deducted from settlement.

This confirmation governs the movement of the above-referenced freight as of the date specified and hereby amends, is incorporated by reference and becomes a part of that certain Transportation Contract by and between 'Broker' and 'Contract Carrier.' DRIVER IS NOT ALLOWED TO BREAK SEAL. Any accessorial charge must be approved by CBT in writing and will only be reimbursed with a valid receipt. If Carrier requires a Comcheck from CBT for an unloading charge there will be a \$5.00 fee deduction per check taken from Carrier's settlement. It is agreed that Carrier is responsible for any claims filed against Broker for all overages, shortages, damages, and any late delivery fees assessed to CBT due to failure to deliver when due. Furthermore, claims filed against Broker could result in a deduction from Carrier's settlement. CBT must be notified of any delays and / or late deliveries.

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 26240513084190128
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 230423

must appear on all Invoices

PRO # 230423

Rate Confirmation

05/13/24 09:42:17 (EST)



CBT, INC.
PO BOX 386
OAKWOOD GA 30566

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ROBBY BANKS
(770) 967-0173
robby@cbtoakwood.com

ROYAL3 INC DBA ZIGI FREIGHT IN
(630) 485-7370 (p) Att: SAMM X111
(630) 485-6980 (f)
MC # 944686 Truck # 723
DOT 2828543 Trailer # 289477
Driver SAMATAR Cell # (612) 707-1243

LEGIBLE copies of ALL paperwork can be emailed to invoices@cbtoakwood.com or faxed to 770-967-9070. Please note there are a few customers that may require the original bill of lading. If the originals are required, you will be notified upon receipt of all paperwork that has been submitted by email or fax. All paperwork must be turned in to our office within 21 days after delivery to avoid late paperwork fees.

The load weight discussed during negotiation and on the rate confirmation is an estimate of load weight, and is subject to change. Upon being loaded, if the gross weight of the product exceeds the weight on the rate confirmation, but is still within the legal weight limits for gross and axle weights per FMCSA guidelines, additional compensation will not be provided.

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 26240513064190128
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 230423

must appear on all Invoices

E-Signed : 05/13/2024 08:42 AM CDT

Samm Stanojević

samm@royal3inc.com
IP: 89.39.107.199

Sertifi Electronic Signature
DocID: 20240513084150128

STRAIGHT BILL OF LADING

PERMANENT POST OFFICE ADDRESS OF SHIPPER

RONPAK, INC.
1 Nathan Sedley Road
Shreveport, LA 71115

ORDER NO.	237065 N
SHIP DATE	05/11/2024
CARRIER	
ROUTE	

SHIP TO:	MBM Rocky Mount (07)	PRODUCT BILL TO:	MBM - MAIN
Street:	1951 N. Church Street	Street:	PO BOX 800
City:	Rocky Mount, NC 27804	City:	ROCKY MOUNT, NC 27802
CONTACT:		PHONE:	
		FAK65	PO# 8351822

PAPER BAGS N.O.I.B.N.

NO. OF CASES	ITEM WEIGHT	DESCRIPTION
240	6,944.1600	FGPA 4#C 30# NK VIS ID Bag @ 2,000/GTIN:20675258400915 Item# BK4-C
216	2,172.9600	FGGR 6 x 5.75 25# PFF BL OGR Ck Nug @ 2000 / 20675258443479 Item# BK-CN2
0	0.0000	FGGR 5.5 X 5 25# BL PFF OGR CKE @500/GTIN 20675258443622 Item# BK-CKE2
120	1,260.0000	FGPA 6# 33# BI Kids's King Jr. 2023 @ 500 / 20675258483796 Item# BK-K6
324	13,672.8000	FGPA 6# NK 33# SFI Breakfast Awareness LTO @ 2,000 Item# BK6-BA
594	17,160.6600	FGPA 12#M 35#SFI NK Breakfast Awareness LTO @ 1,000 Item# BK12-BA
TOTAL CTN	WEIGHT	
1,494	41,210.5800	

As of 6.4.23:
schedule on-line thru: <https://managedelivery.com/epstoneslogistics.com>
Addl. info/instructions:
1-800-838-4549 Option 6

TIME IN: 9:45
TIME OUT: 10:30

ATTENTION CARRIER - FOR PAYMENT
SEND FREIGHT BILL WITH
COPY OF B/L TO:

AGENT/CARRIER:

CUSTOMER PICK-UP

SGS-SFI-COC-US12/82319

PICKER:

CHECKER:

LOADER:

RONPAK, INC.
4301 NEW BRUNSWICK AVE
SOUTH PLAINFIELD, NJ 07080
ATTENTION: ACCTS PAYABLE

LOADER VERIFIES TRAILERS MEET P.F.S. HEALTH STANDARDS
FLOOR: CLEAN DIRTY ODORS: Y/N HOLES: Y/N
RODENT ACTIVITY (Black Light Check) Y/N

The property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route otherwise to deliver to another carrier on the route to said destination. It is mutually agreed to each carrier of all or any portion of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

The Freight Invoice used for this shipment conforms to the specifications set forth in the box maker's certificate thereon, and all other requirements of the consolidated transportation of this shipment.

*If the shipment moves between two ports by a carrier 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 exceeding _____

If charges are to be prepaid, write or stamp here, "To be Prepaid"

Subject to section 7 of Conditions of Applicable bill of lading, if this shipment is to be delivered to the consignee without recourse to the consignee, the consignee must sign the following statement.

The carrier shall not make delivery of this shipment without prepayment of freight and all other lawful charges.

(Signature of consignee)



STRAIGHT BILL OF LADING

PERMANENT POST OFFICE ADDRESS OF SHIPPER

RONPAK, INC.
1 Nathan Sedley Road
Shreveport, LA 71115

Appointment Time: 3am
Time Out: 344
Door: 29
Carrier: CBT
Driver: [Signature]

ORDER NO.	237065 N
SHIP DATE	05/11/2024
CARRIER	
ROUTE	

SHIP TO: MBM Rocky Mount (07)
Street: 1951 N. Church Street

PRODUCT BILL TO: MBM - MAIN
Street: PO BOX 800

City: Rocky Mount, NC 27804

City: ROCKY MOUNT, NC 27802

CONTACT:

PHONE:

FRT TERMS: CPU

PAPER BAGS N.O.I.B.N.

FAK65

PO#. 8351822

NO. OF CASES	ITEM WEIGHT	DESCRIPTION
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120	1,260.0000	FGPA 6# 33# BI Kids's King Jr. 2023 @ 500 / 20675258483796 Item# BK-K6
324	13,672.8000	FGPA 6# NK 33# SFI Breakfast Awareness LTO @ 2,000 Item# BK6-BA
594	17,160.6600	FGPA 12#M 35#SFI NK Breakfast Awareness LTO @ 1,000 Item# BK12-BA

TOTAL CTN WEIGHT
1,494 41,210.5800

As of 6.4.23:

schedule on-line thru: <https://managedreceiving@capstonelogistics.com>

Addl. info/instructions:

1-800-838-4549 Option 6

Scaves short - client 101516
BG Ckn nugget

108 short - client 104397
BG Ckn nugget

Received By MCLANE

Signature: [Signature]

Date: 5-15-24

Piece Count: 1378

Pallets In: 27 Pallets Out: 0

ATTENTION CARRIER: FOR PAYMENT
SEND FREIGHT BILL WITH
COPY OF B/L TO:

SGS-SFI-COC-US12/82319

PICKER:

CHECKER:

LOADER:

RONPAK, INC.

4301 NEW BRUNSWICK AVE
SOUTH PLAINFIELD, NJ 07080
ATTENTION: ACCTS PAYABLE

AGENT/CARRIER:

CUSTOMER PICK-UP

LOADER VERIFIES TRAILERS MEET P.F.S. HEALTH STANDARDS

FLOOR: CLEAN DIRTY, ODORS: Y/N, HOLES: Y/N
RODENT ACTIVITY (Black Light Check) Y/N

The property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route, to said destination. It is mutually agreed as to each carrier of all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Freight of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the items and conditions of the said bill of lading, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

The bills herein used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of the consolidated Freight Classification.

If the shipment moves between two ports by a carrier 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 exceeding _____.

If charges are to be prepaid, write or stamp here, "To be Prepaid".

Subject to section 7 of Conditions of Applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor must sign the following statement.

The carrier shall not make delivery of this shipment without prepayment of freight and all other lawful charges.

(Signature of consignor)

P.O.Box 800 Rocky Mount, NC 27802 Telephone: (252) 985-7201
Receiving Report for Invoice Adjustment

FAC Control # _____
Vendor: RONPAK INC
Carrier: CBT INC
PO#: 8351822
Received at: 607 MFS ROCKY MOUNT

Date: 5/15/24
Shipper Bill Of Lading: _____
BH Code: FM
Received By: JOSEPH GRAHAM

Item#	Description	Qty	Qty	Qty	A/P
		Over	Short	Dmg*	Price
101516	BG CARRYOUT 4LB KRAFT VI	0	8	0	
104397	BAG CKN NUGGET FC FREE BK VI	0	108	0	

*A damage code, from the list below, must be recorded when damaged cases are recorded.
Damage Codes: 1=Mashed, 2=Torn, 3=Leaking, 4=Soiled, 5=Short Code Date, 6=Temp. out of range
7=Product does not meet specifications, 8=Other, with explanation in Remarks section

Were damaged products placed back on carriers trailer? N (Y or N) * Proprietary product must have disposition
Photographs were taken of damaged products? N (Y or N) If no, why? N/A
Unloaded Live or Drop? L (L or D)
Is Bill of Lading marked Shipper Load and Count (SLC)? N (Y or N)
Does the issue appear to be Vendor or Carrier related? V (V or C)
If vendor, explain. SEAL INTACT, 116 CASES SHORT

Driver Signature: Samuel

Driver must sign full name - not initials.

Date: 5-15-24

Print Name: _____

E-mail to: FAC Delivered Loads - E-mail addresses "FAC Claims" and "Non FAC Claims"
Vendor or MBM Delivered Loads - E-mail address "Non FAC Claims"

Note: These address can be selected from the e-mail Address Book, Global Address List.

Note: If *damage adjustments are listed above, photographs must be forwarded with this form.

ACCOUNTING

ATTENTION: ACCOUNTS RECEIVABLE

This is to advise that we are making an adjustment on your invoice for the reasons listed below:
over _____ short _____ damaged _____ price _____

Invoice #	_____	Date of invoice	_____
Original invoice amount	\$ _____		
Adjustment amount	\$ _____		
Invoice remit amount	\$ _____	Discounted amount	\$ _____

PRICING CAN CAUSE A DELAY IN PAYMENT. If, after 90 days from receipt of this letter, we have not received writted notification to the controller, MBM/PFC will consider the above information NOTE: Please see that invoice pricing is corrected per the contract/confirmation. INCORRECT resolved.

Any questions, contact _____

MBM Accounts Payable Department
Telephone: (252) 985-7201, Ext. _____

Buyers Name _____