

Bill to: Trident Transport, LLC 1428 Williams Street , Chattanooga, TN, 37408 Invoice Date: 05/15/2024 Invoice #: 0675021 Terms: NET 30 Due Date: 06/15/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/14/2024		2500 Gasper Ave, WHITING, IN 46394 - 5560 S Midbon Rd, SUPERIOR, WI 54880			
			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



Rate Confirmation Agreement for Trident Transport, LLC

- No Double Brokering allowed. Please send Invoices to accounting@tridenttransport.com
- No additional charges will be paid without prior approval.
- Accessorials must be reported at the time of shipment prior to departure.
- We require exclusive use of the trailer.
- NO CO-MINGLING ALLOWED unless otherwise specified on the rate confirmation.
- BY SIGNING THIS DOCUMENT, YOU ARE AGREEING TO OUR TERMS.

Trident Transport, LLC 505 Riverfront Parkway Chattanooga, TN 37402 (423) 805-3705



Trident Transport, LLC 505 Riverfront Pkwy Chattanooga, TN 37402 423-805-3705 423-805-3

Page

1

423-805-37	705 423-805-3701			Load Confirmation				0675021
Carrier: Date:	BRZ BURE 05/14		IL 60459			Contact: Phone: Fax:	Marcus 708-303-5150 x103	
Order	Orde Miles Tem Case BOL	s: 475.(p: es/pieces:				Commodity: Weight: Trailer: Reference: Order Type:	Freight of All Kinds 15000.0 Van (DAT) TL	
	PU 1	Name: Address:	Polyjohn Enterprise 2500 Gasper Ave	8		Date:	05/14/2024 1500 05/14/2024 1530	
						Contact:		
		Phone:	WHITING	IN	46394	Driver Loa	d: No driver loading or	unload
1	SO 2	Name: Address:	Mr Biffy 5560 S Midbon Rd			Date:	05/15/2024 0800 05/15/2024 1200	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
						Contact:	Travis	
		Phone:	SUPERIOR 218-213-7814	WI	54880	Driver Loa	d: No driver loading or	unload
Payment		Carrier Fr	eight Pay:		\$1,200.00			
		Total Carr	ier Pay:		\$1,200.00			

TRIDENT

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

Polyjohn Enterprise - **DRIVER MUST ACCEPT TRACKING THROUGH TRUCKER TOOLS OR MACRO POINT**

Polyjohn Enterprise - **53FT DRY VAN ONLY**

Mr Biffy - **DRIVER MUST CALL AHEAD IN ORDER TO BE UNLOADED**218-213-7814

Please Sign: Marcus Nikolic

(X) Accept

() Decline

Attention:

Tyler Tate 423-325-4189 tyler.tate@tridenttransport.com Driver Name: Ruperto Driver Cell: 8324255217 Driver Email: Tractor #: 836 Trailer #: 289471 Tractor VIN: 5448



Shipper Name PolyJohn Enterprises Name MR BIFFY LLC Name Address 2500 Gaspar Ave. Address 5560 S MIDBON RD Address 219-659-1152 Address TRAVIS 218-213-7814 City Whiting State/Zip WI 54880 State/Zip IN 46394 State/Zip WI 54880 Bill To - Freight Terms PREPAID P 0 # COW227956 Name Bill of Lading Pro	Carrier	Name TRIC	DENT		Date	05-14-24		
Pieces HZ Description	Name Address Address City State/Zip Bill To Name Address Address City	2500 Gaspi 219-659-11! Whiting	ir Ave. 52 IN 46394	Name Address Address City State/Zip P O # Shipper # Bill of Lading	MR BIFFY LLC 5560 S MIDBON F TRAVIS 218-213- SUPERIOR	7814	54880	
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Shipment Message

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of the Bill of Lading, the property described above and in apparent good order, except as noted (contents and condition of the contents of packages unknown), marked, consigned, and destined, as indicated, above 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 of said destination, if on said 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 of said property, that every service to be performed hereunder shall be subject to the Bill of Lading.

SHIPPER, hereby certifies that she/he is familiar with all the Bill of Lading terms and conditions in the governing classification and the said terms and conditions in the coditions in the covering classifications on the date of this shipment hereby agreed to by the shipper and accelpted for himself and his

assigns. Per Shipper

The OS 14 2024 Carrier Signature and Date

Carrier Name TRIDENT Date 05-14-24

Shipper				Consignee				
Name	PolyJohn Enter	prises		Name	MR BIFFY LLC)		
Address	2500 Gaspar Av	ve.		Address	5560 S MIDBC	ON RD		
Address	219-659-1152			Address	TRAVIS 218-2	13-7814		
City	Whiting			City	SUPERIOR			
State/Zip		IN	46394	State/Zip		WI	54880	

Bill To	- Freight Terms PREPAID	PO#	CO#227956
Name		Shipper	
Address		# Bill of	
Address		Lading	
City		Pro	
State/Zip)		1.

Pieces	HZ	Description	Class	NMFC	Sub	Weight
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assigns Per Shipper

14 2024 Carrier Signature and Date