



**Bill to:**  
ALLEN LUND COMPANY, LLC  
PO BOX 339,  
La Canada Flintridge,  
CA,  
91012

Invoice Date: 05/23/2024  
Invoice #: 6950667  
Terms: NET 30  
Due Date: 06/23/2024

| Date       | Customer Ref # | Origin - Destination   | Quantity | Rate       | Amount     |
|------------|----------------|--|----------|------------|------------|
| 05/21/2024 |                | 1008 Gateway Pkwy, Rincon, GA 31326, USA - 300 Veterans Dr, Pocono Summit, PA 18346, USA |          |            |            |
|            |                |  | 1        | \$3,100.00 | \$3,100.00 |

|              |
|--------------|
| <b>TOTAL</b> |
| \$3,100.00   |

**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 - 6950667**

***Driver must call prior to heading to shipper***  
***Call (800) 965-5863 or (912) 417-9495 and ask for Load 6950667***

05/21/24 11:48 (EST)

| ATTENTION: CARRIER CONTACT  | LOAD REQUIREMENTS  | ALLEN LUND BOOKING CONTACT   |
|---|--|--|
| <p>CONOR</p> <p>BRZ*/dba RIKI TRANSPORTATION INC.<br/>8225 LECLAIRE AVE<br/>BURBANK, IL</p> <p>(708) 303-5150<br/>Sent To:conor@rtbrz.com</p> | <p><b>Equipment Type:</b> DRY VAN<br/> <b>Special Equipment Needs:</b>AIR<br/> RIDE,CENTER CHUTE,LOAD LOCKS,SEAL<br/> REQ,TRACKING REQUIRED,WASHOUT<br/> <b>Equipment Size:</b>53<br/> <b>Temp:</b><br/> <b>Hazmat:</b> NO<br/> <b>Estimated Weight:</b> 5,898</p> | <p><b>Contact:</b> Mick Horsley<br/> Allen Lund Company, Savannah<br/> <b>Tel:</b> (800) 965-5863 <b>Ofc:</b> (912) 417-9495<br/> <b>Cell:</b><br/> <b>Fax:</b> (888) 825-1179<br/> <b>Email:</b> Mick.Horsley@allenlund.com<br/> <b>After Hours:</b> (800) 965-5863</p> |

**Comments:-**

**SPECIAL INSTRUCTIONS:**

\*This customer has a strong policy of demanding tracking during transport. Detention will not be paid if the driver is not tracking.

.

\*If this is a refrigerated load moving in California, by accepting this load you agree that you will only transport it with truck/trailer which comply with California Air Resource Board TRU ATCM regulations, including ARBER certification for each TRU, and that you will provide Allen Lund Company and authorized enforcement personnel with proof of compliance and certification upon request. Information on your Allen Lund booking contact is set forth above for you to provide to all applicable enforcement personnel if requested..

\*The customer requires that the driver keep the reefer unit on CONTINUOUS MODE and at the provided temperature on bills and/or load confirmation WITH NO EXCEPTIONS. IF DRIVER FAILS TO DO SO, THE CARRIER WILL INCUR A \$250 FEE CHARGED BY CUSTOMER WITH NO EXCEPTIONS.

.

\*\*\*IF AFTER HOURS DISPATCH DOESN'T ANSWER, PLEASE EMAIL SAVOPS@ALLENLUND.COM and EXTRAMILE@ALLENLUND.COM

Carrier is advised and consents to a requirement for a seal to be placed on the trailer at pickup and not removed until instructed at delivery .. Failure to use a seal or breach of the seal at any point may lead to the cargo being deemed unsafe and a claim for the cargo value placed against the carrier..

\*Please be advised WALMART & SAM's Depots and their vendors will not unload any Retailer Branded trucks/trailers such as Amazon, Costco, Safeway or trailers with lift gates. These trailers will be rejected at delivery..

\*This shipper has a strong policy of demanding tracking during transport, For this reason, the rate for this load is based on the carrier's commitment and consent to provide tracking through ALC Tracking as a part of the work that is being paid for.

The carrier consents that as a condition of this work a rate reduction of \$300 will be applied for noncompliance with the tracking expectation..

\*The use of a side chute trailer while hauling produce or meat for Walmart is not permitted. The use of side chute trailers may result in a full rejection at the carrier's expense..

\*Drivers are required to wear a safety vest while loading and unloading at all Walmart facilities. Failing to meet this requirement may result in the driver being rejected at the facility .

\*To be in compliance, it is mandatory that tracking is started two hours prior to arrival at the pick-up location. For this reason, pick-up numbers will be provided once the ALC tracking app has been downloaded and activated. Please download and login using your cell phone # with no dashes (ex:8012345841) as your username and password. Please click the link <https://allenlund.app.link/CwhJK3xMJtb> in order to download our app. ALC App User guide - <https://drive.google.com/file/d/19UGPx0xQDBxaLhAZMnVqEXycYvTo9ixm/view?usp=sharing>

How to use the ALC Carrier App - <https://youtu.be/hFePK0SSX3M>

**ALLEN LUND RATE CONFIRMATION**

How to reset your password in the ALC Carrier App - <https://youtu.be/cjg4OxSINdk>

How to download the ALC Carrier App - <https://www.youtube.com/watch?v=yyTUWoiJeUg>

For Apple: <https://apps.apple.com/us/app/alc-carrier/id1474691071>

For Android: [https://play.google.com/store/apps/details?id=com.allenlund.ALC\\_Tracker](https://play.google.com/store/apps/details?id=com.allenlund.ALC_Tracker).

\*All egg loads require tractors be washed prior to arriving on the yard accompanied with a truck wash receipt..

\*Carrier is advised and consents to a requirement for a seal to be placed on the trailer at pickup and not removed until instructed at delivery.

Failure to use a seal or breach of the seal at any point may lead to the cargo being deemed unsafe and a claim for the cargo value placed against the carrier..

\*If running refrigerated freight, the ability to obtain reefer downloads with correct dates and times is a requirement.

\*NOTICE: Consistent with 49 USC Section 14706(e), Carrier agrees that the time limit for filing any cargo claim regarding this load shall be 14 months

.

\*Ice cream reefer units are to be set and maintained at -20F. Trailer must show at least 0F before loading and must show -5F before departure permitted..

\*\$400 PENALTY FOR EARLY DELIVERY. DO NOT DELIVER EARLIER THAN THE DELIVERY DATE NOTED ON THIS CONFIRMATION. Even if the distribution center will allow early delivery, DO NOT DELIVER EARLY. Wal-Mart corporate financially penalizes vendors (shippers) for early arrival, EVEN IF THE DISTRIBUTION CENTER WILL TAKE THE LOAD EARLY – DO NOT DELIVER EARLY. Late deliveries may be subject to a \$400 penalty as well. Wal-Mart corporate financially penalizes vendors (shippers) for late arrival. Late deliveries are more likely to incur penalty if our office does not receive real-time updates (including after-hours /weekends) about delays and if there is no clear documentation of the delay..

\*Notice of change to standard billing terms. Acceptance of this load indicates acceptance of this change. In order to be paid, signed proof of delivery (POD) including the Trailer Control Record and Receiving Sticker must be submitted to us within 24 hours of delivery. Any delay in submission could result in a fee imposed by the customer that will be passed through to the carrier. Drivers are responsible for signing, receiving and maintaining ALL pages for ALL PO#'s on the bill of lading until the load has been delivered and the Trailer Control Record and Receiving sticker has been received and signed by the receiver. Failure to produce the proper paperwork at delivery may result in a fine from the customer.

**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) 965-5863.

#### PICKUP INFORMATION

|                    |                      |
|--------------------|----------------------|
| <b>Pick UP #1:</b> | LION BRAND YARN      |
| <b>Address:</b>    | 1008 GATEWAY PARKWAY |
|                    | RINCON, GA 31326     |
| <b>Contact:</b>    |                      |
| <b>Phone:</b>      | (201) 519-1556       |

|                      |                    |
|----------------------|--------------------|
| <b>Pick Up Date:</b> | 05/21/2024 Tuesday |
| <b>Pick Up Time:</b> | 10:00              |
| <b>FCFS Notes:</b>   |                    |
| <b>Appt Conf #:</b>  | 34351957           |
| <b>PU/PO #:</b>      | 22288511           |
| <b>BOL #:</b>        |                    |

**Directions :**

**Notes:**

| Line# | Commodity/Product                                  | Description | Quantity      |     | Pallets | PU PO#        | DEL/PO#    | BOL# | Weight |
|-------|--|-------------|---------------|-----|---------|---------------|------------|------|--------|
| 1     | YARN IN SKEINS, BALLS, HANKS OR ON CARDS IN PACKAG |             | 31            | CAS | 0       | 22288511      | 9455719876 |      | 97     |
| 2     | YARN IN SKEINS, BALLS, HANKS OR ON CARDS IN PACKAG |             | 31            | CAS | 0       | 22288511      | 9455719876 |      | 97     |
|       |  |             | <b>Total:</b> | 62  |         | <b>Total:</b> | 0          |      |        |

|                    |                       |                      |                    |
|--------------------|-----------------------|----------------------|--------------------|
| <b>Pick UP #2:</b> | PEGASUS HOME FASHIONS | <b>Pick Up Date:</b> | 05/21/2024 Tuesday |
| <b>Address:</b>    | 812 MAYFIELD STREET   | <b>Pick Up Time:</b> | 15:00              |
|                    | DENMARK, SC 29042     | <b>FCFS Notes:</b>   |                    |
| <b>Contact:</b>    |                       | <b>Appt Conf #:</b>  | 34351957           |
| <b>Phone:</b>      |                       | <b>PU/PO #:</b>      | 60695406           |
|                    |                       | <b>BOL #:</b>        |                    |

**Directions :**

**Notes:**

| Line# | Commodity/Product | Description | Quantity      |     | Pallets       | PU PO#   | DEL/PO#    | BOL# | Weight |
|-------|-------------------|-------------|---------------|-----|---------------|----------|------------|------|--------|
| 1     | CLOTHING          |             | 196           | CAS | 0             | 60695406 | 3224259003 |      | 5,704  |
|       |                   |             | <b>Total:</b> | 196 | <b>Total:</b> | 0        |            |      |        |

| DELIVERY INFORMATION |                     |  |     |  |                       |                        |  |  |  |
|----------------------|---------------------|--|-----|--|-----------------------|------------------------|--|--|--|
| <b>Delivery #1:</b>  | TOBYHANNA PA        |  |     |  | <b>Delivery Date:</b> | 05/23/2024 Thursday    |  |  |  |
| <b>Address:</b>      | 300 VETERANS DRIVE  |  | 300 |  | <b>Delivery Time:</b> | 06:00                  |  |  |  |
|                      | VETERANS DRIVE      |  |     |  | <b>FCFS Notes:</b>    |                        |  |  |  |
|                      | TOBYHANNA, PA 18466 |  |     |  | <b>Confirm #:</b>     | 26958013               |  |  |  |
| <b>Contact:</b>      |                     |  |     |  | <b>DEL PO #:</b>      | 9455719876, 3224259003 |  |  |  |
| <b>Phone:</b>        |                     |  |     |  |                       |                        |  |  |  |

**Directions:**

**Notes:**

| Commodity/Product                                  | Description | Quantity      |     | Pallets         |
|--|-------------|---------------|-----|-----------------|
| YARN IN SKEINS, BALLS, HANKS OR ON CARDS IN PACKAG |             | 31            | CAS | 0               |
| CLOTHING   |             | 196           | CAS | 0               |
| YARN IN SKEINS, BALLS, HANKS OR ON CARDS IN PACKAG |             | 31            | CAS | 0               |
|  |             | <b>Total:</b> | 258 | <b>Total:</b> 0 |



## RATE DETAILS

|                            | Description | UOM | Rate       | QTY | Total             |
|----------------------------|-------------|-----|------------|-----|-------------------|
| Truck Rate                 |             | FLT | \$3,100.00 | 1   | \$3,100.00        |
| Advance Amount             |             |     |            |     | \$0.00            |
| Advance Fee                |             |     |            |     | \$0.00            |
| <b>Additional Payments</b> |             |     |            |     |                   |
| Total Carrier Payments     |             |     |            |     | <b>\$3,100.00</b> |
| Balance Due                |             |     |            |     | \$3,100.00        |

## INVOICE INFORMATION

**FOR STANDARD PAY or ACH, PLEASE EMAIL YOUR FREIGHT BILLS TO: [billing@allenlund.com](mailto: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: [cboa@allenlund.com](mailto:cboa@allenlund.com) or (888) 825-1179. 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 lumpers 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 #6950667-GA on all paperwork before emailing, faxing or mailing.**

Please direct payment inquiries to: [ap@allenlund.com](mailto:ap@allenlund.com) or by calling (800) 811-0083.

## 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: (888) 825-1179 or EMAIL to: Mick.Horsley@allenlund.com

Riki Transportation INC dba BRZ

Conor Smith

Carrier Name  
05/21/2024

Print Name of Authorized Signature  
*Conor Smith*

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 #6950667



## Page

6






| BILL OF LADING  |      |         |        |  | Page _____  |  |          |  |
|---|------|---------|--------|--|---|--|----------|--|
| <b>SHIP FROM</b><br>Name: PEGASUS HOME FASHIONS<br>Address: 812 W. MAYFIELD DRIVE<br>City/State/Zip: DENMARK, SC 29042<br>SID#: _____ FOB: _____  |      |         |        |  | Bill of Lading Number: <u>351957</u><br><br><div style="text-align: center;">BAR CODE SPACE</div>   |  |          |  |
| <b>SHIP TO</b><br>Name: Walmart DC 6080G-Gen Location #: <u>6080</u><br>Address: 100 Veterans Dr<br>City/State/Zip: Tobyhanna, PA 18466<br>CID#: _____ FOB: _____   |      |         |        |  | CARRIER NAME: <u>Allen Lund Company</u><br>Trailer number: <u>5LZ04030</u><br>Seal number(s): 60868069<br><br><b>SCAC: LUAC</b><br>Pro number: _____  |  |          |  |
| <b>THIRD PARTY FREIGHT CHARGES BILL TO:</b><br>Name: _____<br>Address: _____<br><br>City/State/Zip: _____   |      |         |        |  | <div style="text-align: center;">BAR CODE SPACE</div>   |  |          |  |
| <b>SPECIAL INSTRUCTIONS:</b><br>LOAD#: 34351957   |      |         |        |  | <b>Freight Charge Terms:</b><br><i>(freight charges are prepaid unless marked collect)</i><br>Prepaid _____ Collect <input checked="" type="checkbox"/> 3 <sup>rd</sup> Party _____<br><br>Master Bill of Lading: with attached underlying Bills of Lading<br>(check box) |  |          |  |
| CUSTOMER ORDER INFORMATION  |      |         |        |  |   |  |          |  |
| CUSTOMER ORDER NUMBER   |      | # PKGS  | WEIGHT | PALLETS/SLIP (CIRCLE ONE)  |   | ADDITIONAL SHIPPER INFO  |          |  |
| 3224259003  |      | 196     | 5704   | <input checked="" type="checkbox"/> Y  | <input type="checkbox"/> N  | APPOINTMENT DATE: <u>5/21/24</u>   |          |  |
|   |      |         |        | <input type="checkbox"/> Y   | <input checked="" type="checkbox"/> N   | APPOINTMENT TIME: <u>2:00 PM</u>   |          |  |
|   |      |         |        | <input type="checkbox"/> Y   | <input checked="" type="checkbox"/> N   | ARRIVAL TIME: <u>2:30 PM</u>   |          |  |
|   |      |         |        | <input type="checkbox"/> Y   | <input checked="" type="checkbox"/> N   | DOCK IN TIME: <u>4:30 PM</u>   |          |  |
|   |      |         |        | <input type="checkbox"/> Y   | <input checked="" type="checkbox"/> N   | DOCK OUT TIME: <u>5:45 PM</u>  |          |  |
| <b>GRAND TOTAL</b>  |      | 196     | 5704   |  |   |  |          |  |
| CARRIER INFORMATION   |      |         |        |  |   |  |          |  |
| HANDLING UNIT   |      | PACKAGE |        | WEIGHT   | H.M. (X)  | COMMODITY DESCRIPTION<br><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 360</small> | LTL ONLY |  |
| QTY   | TYPE | QTY     | TYPE   |  |   |  | NMFC #   | CLASS  |
| 196   | CTNS | 196     | CTNS   | 5704   |   | PILLOWS  |          | 250  |
|   |      |         |        |  |   |  |          |  |
|   |      |         |        |  |   |  |          |  |
|   |      |         |        |  |   |  |          |  |
|   |      |         |        |  |   |  |          |  |
| 196   |      | 196     |        | 5704   |   | <b>GRAND TOTAL</b>   |          |  |
| 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: Noting a value is not a request for Additional Cargo Liability under OD Rules 100, Item 574.<br>"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."   |      |         |        |  |   | <b>COD Amount: \$ _____</b><br><br><b>Fee Terms: Collect: Prepaid:</b><br><b>Personal/company check NOT acceptable: <input type="checkbox"/></b>   |          |  |
| <b>NOTE - Liability Limitation applies. See OD Rules 100, Items 574 and 594.</b>  |      |         |        |  |   |  |          |  |
| RECEIVED, subject to the rates, classifications and rules that have been established by the Carrier and are available on request to the Shipper (Shipper defined in 49 U.S.C.A. § 13102(13)(c)), and to all applicable state and federal regulations. Shipper 1) warrants it has read all applicable contract(s) or Carrier's applicable tariff(s) and the limitation of liability provisions set forth therein; and 2) has actual knowledge of and accepts the applicable contract or tariff terms, including the limits on carrier liability. Carrier's tariff(s), including OD Rules 100, take precedence in the event of any terms or conditions conflicts. |      |         |        |  |   | The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.<br><br>Shipper Signature _____   |          |  |
| <b>SHIPPER SIGNATURE / DATE</b><br>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 U.S. DOT.  |      |         |        | <b>Trailer Loaded:</b><br><input checked="" type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver |   | <b>Freight Counted:</b><br><input checked="" type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver/pallets said to contain<br><input type="checkbox"/> By Driver/Pieces   |          | <b>CARRIER SIGNATURE / PICKUP DATE</b><br>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.<br><br>Property described above is received in good order, except as noted. |



# BILL OF LADING #: 71870

Page: 1  
Date: 05/15/24

|   |  |   |  |
|---|--|---|--|
| <b>SHIP FROM</b><br>LION BRAND YARN CO.<br>1008 GATEWAY PARKWAY<br>RINCON, GA 31326   |  | <b>Vendor BOL: 71870</b><br>  | <b>VicsBOL Number: 00230320000718705</b><br><br>(402) 00230320000718705 |
| <b>SHIP TO</b><br>WAL-MART DC 6080D-DSDC<br>100 VETERANS DR<br><br>TOBYHANNA PA 18466 |  | <b>CARRIER NAME: TRUCK</b><br>Trailer number:<br>Seal number(s): <u>0050714/DTL242130</u><br><b>SCAC: TRUC</b><br>Pro number:<br>                          |  |
| <b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>   |  | <b>Freight Charge Terms:</b> (freight charges are prepaid unless marked otherwise)<br>Prepaid _____ Collect _____ 3rd Party _____<br><br><input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading |  |
| <b>SPECIAL INSTRUCTIONS:</b>  |  |   |  |

| CUSTOMER ORDER INFORMATION |          |        |        |  |  | ADDITIONAL SHIPPER INFO                   |  |
|----------------------------|----------|--------|--------|--|--|---|--|
| CUSTOMER PO#               | QTY (EA) | # PKGS | WEIGHT | PALLET/SLIP (CIRCLE ONE)   |  |   |  |
| 9455719876                 | 345      | 31     | 88     | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N |  | LOADid: 34351957 DEPT: 00019 PK#: 5508392 |  |
| GRAND TOTAL                | 345      | 31     | 88     |  |  | <u>1 pallet</u>                           |  |

| CARRIER INFORMATION  |      |   |        |   |   |  |       |
|--|------|---|--------|---|---|--|-------|
| HANDLING UNIT  |      | PACKAGE   |        | H.M.  | COMMODITY DESCRIPTION   | LTL ONLY   |       |
| QTY  | TYPE | QTY   | TYPE   | WEIGHT (X)  |   | NMFC #   | CLASS |
| 345  |      | 31  | Carton | 88  | <i>Cartons synthetic fiber yarn in or on skeins balls or hanks machine compressed in packages subject to a declared density of 6 lbs. or more per cubic ft.</i> | 200440.02  | 100   |
| 345  |      | 31  |        | 88  | 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:<br>"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding per _____"  |      |   |        |   |   | COD Amount: \$<br>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/><br>Customer check acceptable: <input type="checkbox"/>  |       |
| <b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c) (1) (A) and (B).</b><br>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, classification 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.<br><b>SHIPPER SIGNATURE / DATE</b> <u>5-21-24</u><br>Shipper Signature   |       |
| 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:<br><input checked="" type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver |        | Freight Counted:<br><input checked="" type="checkbox"/> By Shipper<br><input type="checkbox"/> By Driver / pallets said to contain<br><input type="checkbox"/> By Driver/Pieces |   | <b>CARRIER SIGNATURE / PICKUP DATE</b><br>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.<br><br>Carrier Signature |       |



Date: 5/21/14**BILL OF LADING****SHIP FROM**

Name: PEGASUS HOME FASHIONS  
 Address: 812 W. MAYFIELD DRIVE  
 City/State/Zip: DENMARK, SC 29042  
 SID#: \_\_\_\_\_ FOB: \_\_\_\_\_

Bill of Lading Number: 351957

BAR CODE SPACE

**SHIP TO**

Name: Walmart DC 6080G-Gen Location #: 6080  
 Address: 100 Veterans Dr  
 City/State/Zip: Tobyhanna, PA 18466  
 CID#: \_\_\_\_\_ FOB: \_\_\_\_\_

CARRIER NAME: Allen Lund CompanyTrailer number: 262209030Seal number(s): 60868069SCAC: **LUAC**

Pro number: \_\_\_\_\_

BAR CODE SPACE

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

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

Prepaid \_\_\_\_\_ Collect x 3<sup>rd</sup> Party \_\_\_\_\_**SPECIAL INSTRUCTIONS:**

LOAD#: 34351957

(check box) Master Bill of Lading: with attached  
 underlying Bills of Lading

**CUSTOMER ORDER INFORMATION**

| CUSTOMER ORDER NUMBER | # PKGS     | WEIGHT      | PALLET/SLIP<br>(CIRCLE ONE) |          | ADDITIONAL SHIPPER INFO          |
|-----------------------|------------|-------------|-----------------------------|----------|----------------------------------|
| <u>3224259003</u>     | <u>196</u> | <u>5704</u> | <u>Y</u>                    | <u>N</u> | APPOINTMENT DATE: <u>5/21/14</u> |
|                       |            |             | <u>Y</u>                    | <u>N</u> | APPOINTMENT TIME: <u>2:00 PM</u> |
|                       |            |             | <u>Y</u>                    | <u>N</u> | ARRIVAL TIME: <u>2:30 PM</u>     |
|                       |            |             | <u>Y</u>                    | <u>N</u> | DOCK IN TIME: <u>4:30 PM</u>     |
|                       |            |             | <u>Y</u>                    | <u>N</u> | DOCK OUT TIME: <u>5:45 PM</u>    |
| <b>GRAND TOTAL</b>    | <u>196</u> | <u>5704</u> |                             |          |                                  |

**CARRIER INFORMATION**

| HANDLING UNIT |             | PACKAGE    |             | WEIGHT      | H.M.<br>(X) | COMMODITY DESCRIPTION<br><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 360.</small> | LTL ONLY |            |
|---------------|-------------|------------|-------------|-------------|-------------|---|----------|------------|
| QTY           | TYPE        | QTY        | TYPE        |             |             |   | NMFC #   | CLASS      |
| <u>196</u>    | <u>CTNS</u> | <u>196</u> | <u>CTNS</u> | <u>5704</u> |             | <u>PILLOWS</u>  |          | <u>250</u> |
|               |             |            |             |             |             |   |          |            |
|               |             |            |             |             |             |   |          |            |
|               |             |            |             |             |             |   |          |            |
| <u>196</u>    |             | <u>196</u> |             | <u>5704</u> |             | <b>GRAND TOTAL</b>  |          |            |

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: Noting a value is not a request for Additional Cargo Liability under OD Rules 100, Item 574.

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_."

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

Fee Terms: Collect: \_\_\_\_\_ Prepaid: \_\_\_\_\_

Personal/company check NOT acceptable: ☐**NOTE - Liability Limitation applies. See OD Rules 100, Items 574 and 594.**

RECEIVED, subject to the rates, classifications and rules that have been established by the Carrier and are available on request to the Shipper (Shipper defined in 49 U.S.C.A. § 13102(13)(c)), and to all applicable state and federal regulations. Shipper 1) warrants it has read all applicable contract(s) or Carrier's applicable tariff(s) and the limitation of liability provisions set forth therein; and 2) has actual knowledge of and accepts the applicable contract or tariff terms, including the limits on carrier liability. Carrier's tariff(s), including OD Rules 100, take precedence in the event of any terms or conditions conflict.

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, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer Loaded: \_\_\_\_\_ Freight Counted: \_\_\_\_\_

X By Shipper X By Shipper

By Driver 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.



# Trailer Control Record

DC#: 6080

TCR: ff60fad8-a35a-4b69-aa74-51d5ea82104a

APPT

| Trailer Number | Carrier | Delivery Number | Appointment Time | Arrival Date        |
|----------------|---------|-----------------|------------------|---------------------|
| 242130         | LUAC    | 26958013        | 05/23/2024 06:00 | 05/23/2024 06:02:24 |

|                          |                          |
|--------------------------|--------------------------|
| Arrival Information      |                          |
| Inbound Seal #: 60838069 | Sealed at Gate: N        |
| AP Associate: ccbruno    | Current Seal #: 60838069 |
| Comments:                | Intact: Y                |
|                          | Load ID#: 34351957       |

|                        |            |
|------------------------|------------|
| Delivery               | Total: 227 |
| Cases: GEN 196 DSDC 31 |            |

|  |   |
|--|---|
| Receiving Dock                             |   |
| Door #: 375                                | Assigned by: j0k08fv                            |
| Unloader: j0k08fv                          | Unload Start Time: 05/23/2024 08:47:14          |
| Driver Arrival at Window: 05/23/2024 06:39 | Unload End Time: 05/23/2024 09:39:59            |
|  | Paperwork Available at Window: 05/23/2024 10:36 |
|  | Closed by: mam00vw                              |

|                        |                  |
|------------------------|------------------|
| Receiving Office       | Return/Transfer  |
| Drop: N Driver Unload: | Trailer Empty: N |
| Commodity: DIST        | Return Contents: |
| Tractor #: 856         | Description:     |
|                        | Reason:          |

|                       |                              |
|-----------------------|------------------------------|
| Seal Information      | Receiving Office             |
| Seal Number: 60838069 | Trailer Resealed By: mam00vw |
| Sealed By: mam00vw    |                              |



|                      |                  |
|----------------------|------------------|
| Outbound Information | Outbound Seal #: |
| AP Associate:        | D/T:             |

| Door Change Log     |                                   |         |
|---------------------|-----------------------------------|---------|
| Timestamp           | Event                             | User    |
| 05/23/2024 07:29:51 | Move completed to door 6080 - 375 | jwincov |

346 → 375

↓  
C. 333

Dhr  
11:04

|  |                |           |
|--|----------------|-----------|
|           |                | Status AP |
| Equip ID   | 242130         | Temp1     |
| Equip Arrival  | 05/23/24 06:02 | Temp2     |
| Carrier  | LUAC           | Temp3     |
| Seal   | 60838069       | Fuel Lvl  |
| Reseal   |                |           |
| DoorZone   | Subcenter1 346 | Dept DIST |
| Del Date   | 05/23/24 06:00 | Type 53   |
| I have read and understand the posted copy of WalMart's Appointment Drop Rules and Regulations |                |           |
| Driver Signature _____   |                |           |
|           |                |           |
| Delivery#  | 26958013       | DC 6080   |



| CUSTOMER ORDER INFORMATION |          |        |        |  |   |
|----------------------------|----------|--------|--------|--|---|
| CUSTOMER PO#               | QTY (EA) | # PKGS | WEIGHT | PALLET/SLIP<br>(CIRCLE ONE)                                      | ADDITIONAL SHIPPER INFO                   |
| 9455719876                 | 345      | 31     | 88     | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N | LOADid: 34351957 DEPT: 00019 PK#: 5508392 |
| GRAND TOTAL                | 345      | 31     | 88     |  |   |

| CARRIER INFORMATION |      |         |        |        |             |  |           |       |
|---------------------|------|---------|--------|--------|-------------|--|-----------|-------|
| HANDLING UNIT       |      | PACKAGE |        | WEIGHT | H.M.<br>(X) | COMMODITY DESCRIPTION<br><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.</small> | LTL ONLY  |       |
| QTY                 | TYPE | QTY     | TYPE   |        |             |  | NMFC #    | CLASS |
| 345                 |      | 31      | Carton | 88     |             | <i>Cartons synthetic fiber yarn in or on skeins balls or hanks machine compressed in packages subject to a declared density of 6 lbs. or more per cubic ft.</i>  | 200440.02 | 100   |
| 345                 |      | 31      |        | 88     |             | 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 be 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).

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, classification 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 / DATE

Shipper Signature \_\_\_\_\_

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.

Carrier Signature

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