

Bill to: OTR TRANSPORTATION INC 344 N OGDEN AVE; FLOOR 4, Chicago, IL, 60607 Invoice Date: 05/23/2024 Invoice #: PRO # 319353 Terms: NET 30 Due Date: 06/23/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/22/2024		5709 N Graham St, Charlotte, NC 28269, USA - 11601 Roosevelt Blvd, Philadelphia, PA 19154, USA			
			1	\$2,100.00	\$2,100.00

TOTAL	
\$2,100.00	

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

PRO #	319353	
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Rate Confirmation





53' VAN OR REEFER

OTR TRANSPORTATION	LLC
222 N LA SALLE ST	
SUITE 1650	
CHICAGO IL 60601	

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F CONNOR SHAPIRO R (855) 978-7041 (p) 0 (847) 881-0294 (f) М connor.shapiro@loadotr.com С RIKI TRANSPORTATION INC Α (708) 303-5150 (p) Att: SHAUN R (708) 303-5150 (f) R MC # 86875 Truck # 857 L DOT 3119062 Trailer # Е Driver AMABOU Cell # (267) 403-6663 R Description: VODKA/SODA Miles: Weight: 43450 DTCDAMCU NOWEC

LINE HAUL RATE	2100.00	Drivers must show up 1 hour before DELIVERY APPOINTMENT. A \$200 FINE WILL RESULT IF APPOINTMENT IS MISSED. NO WORK INS. VERY STRICT!!!!
TOTAL RATE	2100.00	

PICK 1

Size & Type:

Pieces:

DLCE

BONDED LOGISTICS	
5709 N. GRAHAM ST.	Appointment 05/22/24 @ 12:00
CHARLOTTE NC 28269	Seal # 708-852-5536
Hours : 1200	Ref # 37165ASN00249

STOP 1

LTCD			
11601	ROOS	EVELT	BLVD.
PHILAI	ELPH	IA PA	19154
Hours	: 09	00	

Appointment 05/23/24 @ 09:00 Appt Notes: CONF 13321931 Seal # 708-852-5536 Ref # 37165ASN00249

CARRIER IS RESPONSIBLE FOR OBTAINING REQUIRED LIQUOR PERMITS FOR SHIPMENTS ** PLEASE EMAIL ALL INVOICES TO INVOICES@LOADOTR.COM - WE PREFER EMAIL!! ** SEAL MUST BE APPLIED WITH THE SEAL NUMBER NOTED ON THE BILL OF LADING PRIOR TO LEAVING SHIPPER. IN THE EVENT A SHIPMENT WAS SEALED AT ORIGIN ARRIVES TO THE CONSIGNEE WITH A TAMPERED SEAL OR WITHOUT THE SEAL IN TACT THE CARRIER WILL BE LIABLE FOR ANY SHORTAGE OR DAMAGE CLAIMS. PRODUCT MAY HAVE NO SALVAGE VALUE AT THE SOLE DISCRETION OF THE SHIPPER. LOAD SHALL NOT BE DOUBLE BROKERED. IF DOUBLE-BROKERED, CARRIER AGREES TO ALL LIABILITY WITH NO EXCLUSIONS. CARRIERS MOTOR VEHICLE EQUIPMENT IS DEDICATED TO BROKERS EXCLUSIVE USE WHILE TRANSPORTING TENDERED FREIGHT. VIOLATION OF EITHER WILL RESULT IN CARRIER'S FORFEITING ITS RIGHT TO BE PAID FOR THE TRANSPORTATION SERVICES, NOT AS PENALTY, BUT AS LIQUIDATED DAMAGES. ALL ACCESSORIAL CHARGES MUST BE AUTHORIZED, APPROVED, & REPORTED AT THE TIME OF OCCURRENCE. ALL ACCESSORIAL CHARGES MUST BE APPROVED AND BILLED WITH RECEIPT & POD WITHIN 48HRS OR THEY WILL NOT BE PAID. RATE IS CONTINGENT UPON SUCCESSFUL AND ON-TIME COMPLETION OF ALL LOAD TERMS. RATE IS SUBJECT TO REDUCTION IF LOAD PICKS UP OR DELIVERS AFTER THE TIMES STATED ON THIS CONFIRMATION. CARRIER CONFIRMS CURRENT AND VALID INSURANCE COVERAGE WITHOUT EXCLUSIONS IN AMOUNTS NO LESS THAN ONE MILLION DOLLARS AUTO LIABILITY COVERAGE, ONE MILLION DOLLARS GENERAL LIABILITY COVERAGE, ONE HUNDRED THOUSAND CARGO COVERAGE. IF CARRIERS INSURANCE POLICY CONTAINS A SCHEDULE OF COVERED VEHICLES, CARRIER WILL ONLY TRANSPORT THIS SHIPMENT USING A VEHICLE LISTED ON THE VEHICLE SCHEDULE ON THEIR INSURANCE POLICY. CALLS MAY BE RECORDED BY OTR TRANSPORTION.

(Rate Confirmation Details on Next Page)

Carrier Signature	John Diordievic	Date		/	/
			М	D	
Send Carrier B	ills to the Address Above	PRO # 319353	mu	st appear o	n all Invoices

PRO# 319353

Rate Confirmation





OTR TRANSPORTATION LLC 222 N LA SALLE ST SUITE 1650 CHICAGO IL 60601

F CONNOR SHAPIRO R (855) 978-7041 (p) 0 (847) 881-0294 (f) М connor.shapiro@loadotr.com С RIKI TRANSPORTATION INC Α (708) 303-5150 (p) Att: SHAUN R (708) 303-5150 (f) R MC # 86875 Truck # 857 Т DOT 3119062 Trailer # Е Driver AMABOU Cell # (267) 403-6663 R

CARRIER CERTIFIES THAT ALL EQUIPMENT FURNISHED IS IN COMPLIANCE WITH THE IN-USE REQUIREMENTS OF CALIFORNIA TRU REGULATIONS AND CALIFORINIA'S TRUCK AND BUS REGULATIONS IF SHIPMENT IS DISPATCHED ON CALIFORNIA HIGHWAYS ALL TRAVEL DIRECTIONS GIVEN BY OTR ARE FOR INFORMATIONAL PURPOSES ONLY IT IS CARRIERS RESPONSIBILITY TO CONFIRM THAT IT IS LAWFUL TO OPERATE A VEHICLE OVER ANY HIGHWAY, ROAD, BRIDGE, OR ROUTE, AND TO ENSURE COMPLIANCE WITH US DEPARTMENT OF TRANSPORTATION HOURS OF SERVICE AND SAFETY REGULATIONS. CARRIER SHALL BE SOLELY RESPONSIBLE FOR ANY FINES, PENALTIES, OR CITATIONS OCCURRING AS A RESULT OF OPERATING A VEHICLE IN VIOLATION OF ANY REGULATIONS, LAWS, OR ORDINANCE. NO ADDITIONAL CHARGES NOT LISTED ABOVE MAY BE ADDED BY THE CARRIER. ANY ADDITIONAL CHARGES MUST APPEAR ON A REVISED CONFIRMATION SHEET SIGNED BY THE BROKER. BY MEANS OF EITHER ITS SIGNATURE ON CONFIRMATION OR ITS PROVISION OF SERVICE, CARRIER SHALL B E CONCLUSIVELY PRESUMED TO HAVE AGREED TO THE RATES AND CONDITIONS SET FORTH HERIN. CARRIER FURTHER REPRESENTS AND WARRANTS THAT SAID MUTUALLY AGREED UPON RATES ARE REASONABLE AND COMPENSATORY, THAT THE FREIGHT WOULD NOT HAVE BEEN TENDERED TO CARRIER AT HIGHER RATES, AND THAT NO SHIPMENTS HANDLED UNDER SUCH RATES WILL SUBSEQUENTLY BE SUBJECT TO A LATER CLAIM OF UNDERCHARGES WE HAVE MOVED. OUR NEW ADDRESS IS 222 N LA SALLE ST SUITE 1650 CHICAGO, IL 60601 INVOICES@LOADOTR.COM

Carrier Signature

Send Carrier Bills to the Address Above

)ate: 5/22/20	024	BILL OF LA	DING	Page 1 of 1
	tateside Vodka		Bill of Lading Nu	mber: 03202405220005274
	709 Graham St harlotte NC 28269	FOB Origin:		(402) 03202405220005274
Address: 1	LCB - SOUTHWEST DISTR. CENTER 1601 ROOSEVELT BLVD	R LOC#	CARRIER NAME: Trailer number: Seal number(s):	Default Carrier Code
CID#: 137 Name:	HILADELPHIA, , PA 19154 US	FOB:	SCAC: FRT Pro number:	, ,
Address:			Freight Charge T marked otherwise) Prepaid	erms: (freight charges are prepaid unless Collect 3rd PartyX
SPECIALI	NSTRUCTIONS:	CUSTOMER ORD	ERINFORMATION	
37165ASN	CR ORDER NUMBER # PKGS 00249. 22210491 2,080	WEIGHT 0 42,744.00	PALLE I/SLIP (CIRCLE ONE) Y N	ADDITIONAL SHIPPER INFO
GRAND TO	TAL (All Pages) 2,080.00	0 42,744.00	and the state	

S. S.	2 - 7 - 3 - S		12-20			CARRIE	R INFORMATION	C IN I		and the second	
HANDLIN	G UNIT	PACH	AGE				Commodities requiring special	l or add	DESCRIPTION itional care or attention in handling or	LTL	ONLY
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	CUBE	w	with ordin	aged as to ensure safe transportation nary care. of NMFC Item 360	NMFC#	CLASS
	plts	2080	ctns	42,744.00		0.00	BEER TONIC			111470	65
	ctns	0					Loose Case	e Co	unt TOTAL		
				42,744.00				POV	Veight		
20	plts			1,300.00			Pallet We	ight	(65.00 lbs per PLT)		
20	Sterior State	2080	13 Martin	44,044.00		0.00	GR	AND	D TOTAL		
declared		he propert	ty as follow eeding				in writing the agreed or property is specifically stat	ted	COD Amount: \$ Fee Terms: Collect Customer check accept		Prepaid:
NOTE	E Liabili	ty Limit	ation fo	r lost or dama	ge in t	his shipment	t may be applicable.	See	49 U.S.C. • 14706(c)(1)(A) and (B).	
in writin and rule	ng between s that have	the carrier been estab	and shipp blished by	ermined rates or co er, if applicable, o the carrier and are ederal regulations.	therwise available	to the rates, class	sifications		arrier shall not make delivery of ent of freight and all other lawfu	l charges.	s-27-2

request, and to all applicable state and federal regulations.

SHIPPER SIGNATURE/DATE

This is to certify that the above named materials are properly clasified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.



Freight Counted: By Shipper By Driver/pallets to contain By Driver/Pieces

CARRIER SIGNTURE/PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency responses information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Properly described above is received in good order, except as noted. 99

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Date: 51

Date: 5/22/2024	BILL OF LADING	Page 1 of 1
Name: Stateside Vodka Address: 5709 Graham St Charlotte NC 28269 SID#:	D FOB Origin: Bill of Lading Number: (402)	03202405220005274
Name: PLCB - SOUTHWEST DISTR. C Address: 11601 ROOSEVELT BLVD PHILADELPHIA, , PA 19154 U CID#: 137	FOB: C FRT FOB: C FRT Pro number:	ult Carrier Code タイモタ
Address: What 2 3 SPECIAL INSTRUCTIONS	2024 Freight Charge Terms: (in marked otherwise) Prepaid Colle	freight charges are prepaid unless ct 3rd PartyX

		R. Aleria	a stario		17.50P	CARRIER	RINFORMATION		Planna ar	
HANDLING UNIT PACKAGE		IDLING UNIT PACKAGE		JNIT PACKAGE			COMMODITY DESCRIPTION Commodities requiring special or additional care or attention in h	andline or	LTL ONLY	
					H.M.		stowing must be so marked and packaged as to ensure safe transportation	stowing must be so marked and packaged as to ensure safe transportation	NMFC#	CLASS
QTY	TYPE	QTY	TYPE	WEIGHT	(X) CUBE	CUBE	See Section 2(e) of NMFC Item 360		NIVIP C#	GLASS
	plts	2080	ctns	42,744.00		0.00	BEER TONIC		111470	65
	ctns	0			1 California		Loose Case Count TOTAL		A State State	
		•		42,744.00			PO Weight			
20	plts			1,300.00			Pallet Weight (65.00 lbs per PLT))		
20		2080		44,044.00		0.00	GRAND TOTAL			



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