

**Bill to:**

BEST BAY LOGISTICS INC
103 DARCY PKWY,
LATHROP,
CA,

Invoice Date: 05/30/2024

Invoice #: Shipment ID 31406-39940

Terms: NET 30

Due Date: 06/30/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/29/2024		5422 Nash Rd Scott City, MO 63780 - 9120 W Marlboro Rd, Farmville, NC 27828, USA			
			1	\$1,900.00	\$1,900.00

TOTAL
\$1,900.00

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



125 S. Wacker Drive, Suite 1700, Chicago, IL, 60606, United States
P: (773) 614-7986 | F: | E: mike.p@bestbaylogistics.com

Route	Pickup	QC LLC
	May 29, 2024 14:00 Apt	5422 Nash Rd Scott City, MO 63780 Pickup # 4905918 • Plant Food (22 Pallets)
	Delivery	Farmville Distribution Center
	May 30, 2024 08:00 - 11:00 Apt	9120 W Marlboro Rd Farmville, NC 27828 6184782450 Plant Food (22 Pallets)

Items	Plant Food QC LLC (Scott City, MO) > Farmville Distribution Center (Farmville, NC) 22 Pallets • 43,800 lb
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Carrier	Royal3 Inc MC 944686 • DOT 2828543 • P: (630) 485-7370 • F: (630) 485-6980
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Rate	Freight - flat 1.0 x \$1,900.00	\$1,900.00
	Total	\$1,900.00

TERMS AND CONDITIONS

- This Rate Confirmation incorporates the terms and conditions of a Broker Carrier Agreement signed by Best Bay Logistics, Inc. (Best Bay) and Carrier or, if a Broker Carrier Agreement has not been signed by Best Bay and Carrier, then by the terms and conditions of Best Bay Standard Broker Carrier Agreement that may be found at www.bestbaylogistics.com.
- Acceptance of a shipment by Carrier constitutes acceptance of the terms and conditions of this Rate Confirmation.
- Freight flat, as identified in the rate section in the Rate Confirmation above, includes both line haul and fuel.
- The Total as identified above is inclusive of all applicable state and federal taxes.
- Best Bay does not guarantee actual weight of a shipment and will pay on weight delivered. Weight of the product may vary from confirmation. Best Bay does not pay detention, layover, TONU, lumpers, or other expenses unless approved by the shipper. All extras are included in the rate quoted. Unloading is not paid unless otherwise agreed in writing.
- Carrier must verify temperature with shipper.
- If shipper does not scale on site, driver must determine the location of the nearest available scales.
- Carrier is responsible for ensuring legal weight and load security. Carrier must make an immediate protest, prior to transport of any alleged weight overage or security concerns.
- All COMcheck requests are subject to a \$10 charge per \$500 requested (a request of \$501 to \$1,000 is subject to a \$20 charge and so on).
- Should tracking be required, and should Carrier fail to track, a fine of \$200 will be deducted from the final payment to Carrier.
- Should Carrier incur charges for layover through no fault of their own, and subject to customer approval, Carrier will be entitled to a maximum of \$150/day for dry vans and \$200/day for Reefers. In times and out times are required on the POD for these charges to be valid.
- If Carrier incurs charges for detention through no fault of their own, the first two hours shall be at no charge. After the second hour, and subject to customer approval, Carrier shall be entitled to a maximum of \$35/hour. Carrier must notify Best Bay at least 1 hour prior to incurring detention charges. In times and out times are required on the POD for these charges to be valid. Should detention reach seven hours or more, Carrier shall only be able to recover layover charges in accordance with the terms herein.
- If Carrier misses a delivery date and/or time without a valid excuse, Carrier will incur all fines and charges which result from the missed delivery date and/or time. A valid excuse includes, but is not limited to, force majeure, breakdown, shipper delay.

- In order for Carrier to be paid the amount on this Rate Confirmation, as well as any additional charges reasonably incurred in fulfilling the requested delivery, Carrier must provide the POD with in and out times, as well as any scale tickets, washout receipts, and/or proof of delay (breakdown) receipts. Best Bay is not obligated to reimburse the cost incurred by Carrier for any breakdowns.
- Carrier must submit all documentation within 180 days from the date of delivery in order to receive payment. Should Carrier fail to provide the necessary documentation, Carrier hereby waives their right to collect all such sums not submitted within the aforementioned timeframe. Invoices received after 180 days will be paid if, and only if, Best Bay receives payment from their customer.
- If there is any conflict between these Terms and Conditions and the language provided in the above Rate Confirmation, the language provided in the above Rate Confirmation shall prevail.
- ***CARRIER OR ITS AGENT CERTIFIES THAT ANY TRANSPORT REFRIGERATION UNIT EQUIPMENT FURNISHED WILL BE IN COMPLIANCE WITH USE REQUIREMENTS OF CALIFORNIA'S TRANSPORT REFRIGERATION UNIT REGULATIONS.**
- The trailer must arrive washed and clean. If asked driver must get trailer photo with load load-locks/airbags before rolling from every stop.
- Best Bay offers quick payments. Send complete billing packet to quickpay@bestbaylogistics.com for expedited payment for a fee.

For payment status and other inquires please email ap@bestbaylogistics.com

Any further questions please call (323) 922-2383. **For payment to be processed, billing packet must be sent electronically in PDF format to carrierdocs@bestbaylogistics.com. Please note carrierdocs@bestbaylogistics.com is only a paperwork submissions email.**

Asta Mijao

Driver Name

Driver Signature

Driver Phone #

Date

Printed Date: 05/24/2024

BILL OF LADING - ME

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SHIP FROM		Shipment Number: 883798585
Name: QC LLC Address: 5422 NASH ROAD City/State/Zip: CAPE GIRARDEAU, MO 63701 Contact: QC LLC Phone: 555-555-1212		CARRIER NAME: BEST BAY TRUCKING CORPORATION Trailer Number: 244785 Seal Number(s): 26736480
SHIP TO		SCAC: BBYG Pro Number:
Name: FARMVILLE DISTRIBUTION CENTER FARMVILLE Address: 9120 WEST MARLBORO RD City/State/Zip: FARMVILLE, NC 27828 Delivery Date: 05/29/2024 Contact: No Name Phone: 999-999-999		Freight Charge Terms: (Freight charges are prepaid unless marked otherwise) Prepaid: Prepaid Add: X Collect: 3rd Party:
BILL TO		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading
Name: Verdesian Life Sciences LLC Address: c/o Uber Freight US LLC PO Box 425 City/State/Zip: Lowell, AR 72745		

DO NOT BREAK SHIPPER SEAL/NO TRANS-LOADING: CARGO CLAIM MAY RESULT

Special Instructions: Carriers must schedule unloading times prior to arrival at the warehouse. to expedite the processing of invoices. Carrier must call ahead to schedule an appointment.

CALL 309-319-5633 FOR DEL. APPT. REC. HRS: M - F, 0800 - 1430

Shipper Notes: SHIPPING/RECEIVING HOURS: CAPE GIRARDEAU, MO 7:00 AM - 5:00 PM FIRM-APPOINTMENT REQUIRED BY EMAILING cape.shipping@vlsci.com
References:

Consignee Notes:

Special Services:

CARRIER INFORMATION

HANDLING		PACKAGE		WEIGHT	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.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
22.0	PLT	22.0	EA	45320.01 LB				70
22.0		22.0		45320.01 LB		GRAND TOTAL		

CUSTOMER ORDER INFORMATION

CUSTOMER PO #	CUSTOMER ORDER #	# PKGS	WEIGHT	PALLET / SLIP	Additional Shipper Info
9000173808	533117	22.0	45320.01 LB		Gran MicroSync Pro (1x2000 lb)
GRAND TOTAL		22.0	45320.01 LB		

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 <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer Check Acceptable <input type="checkbox"/>	
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, classifications 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	
SHIPPER SIGNATURE / DATE <small>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 Department of Transportation.</small> 5/29/24 Yvonne Rowlett	Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets <input type="checkbox"/> By Driver/Pieces	CARRIER SIGNATURE / DATE <small>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.</small>

Printed Date: 05/24/2024

BILL OF LADING - ME

Page 1

SHIP FROM

Name: QC LLC
Address: 5422 NASH ROAD
City/State/Zip: CAPE GIRARDEAU, MO 63701
Contact: QC LLC Phone: 555-555-1212

SHIP TO

Name: FARMVILLE DISTRIBUTION CENTER FARMVILLE
Address: 9120 WEST MARLBORO RD
City/State/Zip: FARMVILLE, NC 27828
Delivery Date: 05/29/2024
Contact: No Name Phone: 999-999-999

BILL TO

Name: Verdesian Life Sciences LLC
Address: c/o Uber Freight US LLC
PO Box 425
City/State/Zip: Lowell, AR 72745

Shipment Number: 883798585



CARRIER NAME: BEST BAY TRUCKING CORPORATION

Trailer Number: 244785
Seal Number(s): 26736480SCAC: BBYG
Pro Number:

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

Prepaid: Prepaid Add: X Collect: 3rd Party:



Master Bill of Lading: with attached underlying Bills of Lading

DO NOT BREAK SHIPPER SEAL/NO TRANS-LOADING: CARGO CLAIM MAY RESULT

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cape.shipping@vlsci.com
References:Consignee Notes:
Special Services:

CARRIER INFORMATION

HANDLING		PACKAGE		WEIGHT	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.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
22.0	PLT	22.0	EA	45320.01 LB				70
22.0		22.0		45320.01 LB		GRAND TOTAL		

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GRAND TOTAL		22.0	45320.01 LB		

5-30-24

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, classifications 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

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 in accordance with the regulations of the Department of Transportation.

Trailer Loaded:

☒ By Shipper
☐ By Driver

Freight Counted:

☒ By Shipper
☐ By Driver/Pallets
☐ By Driver/Pieces

CARRIER SIGNATURE / DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was inside available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.