

**Bill to:**

TOTAL TRANSPORTATION OF MISSISSIPPI, LLC
P.O. BOX 2060,
Richland,
MS,
39218

Invoice Date: 05/30/2024

Invoice #: 4492926

Terms: NET 30

Due Date: 06/30/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/29/2024		3050 Hanford Dr, Lebanon, PA 17046, USA - 2727 Salisbury Hwy, Statesville, NC 28677, USA			
			1	\$800.00	\$800.00

TOTAL
\$800.00

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**



For Payments Email to:
LOGISTICSAP@TOTALMS.COM

5/29/2024 9:54:22 AM

Load Tender and Rate Agreement Sheet

Carrier: ROYAL3 INC
CHICAGO, IL
630-485-7370

ROYCHI03

Segment#
4570879

Carrier Must Reference Ord#: 4492926 on invoice to expedite payment process.

Order#: 4492926

Equipment VAN
Type:

Detention is waived if Carrier misses their Appointment time

Miles: 457

Size:

Email invoices: logisticsap@totalms.com

Quickpay invoices: logisticsqp@totalms.com

Origin Pick LIVE LOAD
Up:

Final Delivery: LIVE
UNLOAD

LOAD IS NOT TO BE BROKERED OR FEES CAN OCCUR

Dispatch Instructions:

Driver must say they are picking up and delivering for TTMS.

Carrier must notify TTMS if they will be late to a pick up or delivery appointment. If an appointment is missed, TTMS will reschedule the appointment for the next available appointment time with the customer. TTMS will not be financially responsible to Carrier for any costs incurred by Carrier due to TTMS resetting the appointment.

Carrier must provide the tractor and trailer numbers, driver's name and cell phone number, the PRO number, and after hours contact.

Overages, shortages, damages must be reported to TTMS while Carrier is still at the customer delivery location and noted on the Bill of Lading.

Notification shall be made to the Carrier Representative noted on the rate confirmation.

All unplanned accessorial charges must be communicated to TTMS by Carrier immediately and approved by TTMS in writing in order to be paid.

In order for Carrier to receive payment for detention, Carrier must provide TTMS at least thirty (30) minutes' notice prior to detention taking effect, send the IN and OUT times on the Bill of Lading, and receive TTMS' prior written approval for the detention charge. Late arrival at pick up or delivery will automatically disqualify Carrier from receiving payment for detention. IN and OUT times must be written on the Bill of Lading by the customer (if the customer refuses, Carrier must get the name of that person and report it to TTMS immediately).

In addition to the other requirements set forth herein, before paying or agreeing to any lump sum services, Carrier must notify the Carrier Representative noted on the rate confirmation at TTMS and get prior authorization/approval in writing in order to get full reimbursement. Carrier must provide a signed lump sum receipt to receive payment for a lump sum service.

All special instructions on the rate confirmation sheet must be performed at the negotiated rates.

Cargo must be inspected by Carrier at pick-up and delivery, unless pre-sealed by the customer or a drop and hook.

The Carrier must review the Bill of Lading to ensure all terms are met.

Carrier is responsible for matching all information on the Bill of Lading given to the driver to that which is on the rate confirmation. Any costs incurred by TTMS due to Carrier's failure to notify TTMS' Carrier Representative of any discrepancies while at the shipper will be the Carrier's responsibility.

A signed Bill of Lading must be furnished with Carrier's invoice to receive payment.

Carrier shall be responsible for adhering to Shipper's instructions communicated to Carrier on a load-by-load basis. Carrier agrees that food that has been transported or offered for transport under conditions that are not in compliance with the Shipper's instructions, as provided to Carrier by the Shipper, may be considered "adulterated," as determined by a qualified individual, within the meaning of the Federal Food, Drug and Cosmetic Act, 21 U.S.C.

§342(l), and its implementing regulations. Carrier understands and agrees that adulterated shipments may be refused by the consignee or receiver, upon their delivery, at destination without diminishing or affecting Carrier's liability in the event of a cargo claim.

Carrier shall be willing, upon Broker's request, to accept satellite or cell phone tracking through a third party vendor.

Any supplemental Service Requirements will be communicated to Carrier on a per shipment basis.

Total Weight: 42,000 LBS

Ord# 4492926 Total Pay(USD): \$800.00

Linehaul Pay: \$800.00

Fuel Surcharge: \$0.00

Add. Accessorials: \$0.00

Service Bonus: \$0.00

Order Comments:

BOL#: TL1638685 TOTAL SHIPMENT ID: 65-6011531
FRT DETAIL PO #: VALLEB FRT DETAIL PO #: VALPIED
FRT DETAIL BOL #: 870
NON HAZARDOUS EQUIP VAN:

BILLTO NOTES: **MACROPOINT TRACKING MUST BE ACCEPTED AND VISIBLE TO REQUEST ANY DETENTION.**

Company	Pallets/Pcs	Appointment Type	Early	Late	Weight UOM
P/U Point VALSPAR 3050 HANFORD DR LEBANON,PA/LEB 17046 Commodity: UNKNOWN	1	Appt NOT Set	5/29/2024 12:00 PM	5/29/2024 1:00 PM	42000LBS
		Frt Detail BOL #:870, Pickup Reference #:870-75, QTOPS MBOL:TL1638685, Frt Detail PO #:VALLEB, XPM Consignee #:299012			
D/R Point VALSPAR 2727 SALISBURY HWY STATESVILLE,NC/IRE 28677 Commodity: UNKNOWN	1	Appt NOT Set	5/30/2024 9:00 AM	5/30/2024 9:00 AM	42000LBS
		Frt Detail BOL #:870, Pickup Reference #:870-75, QTOPS MBOL:TL1638685, Frt Detail PO #:VALPIED, XPM Consignee #:299012			

Carrier Rep: BECKY BUTLER
Email: RBUTLER@TOTALMS.COM

Carrier Contact Name: Phil Vukovic
Phone: (662)892-6768

Please Sign and Fax back to TTMS @ (-)423

Date: _____
Carrier Signature: Asta Mijad

Terms and Conditions:"TTMS" Represents Total Transportation of MS

- The rates set forth in this an independent contractor agreement("Agreement") between the parties and are for the above stated service/load only and are not valid for any other business between the undersigned parties.
- Carrier agrees to indemnify, defend and hold harmless TTMS and its customers from any loss, damage, liability, expense or claim relating to, resulting from, or arising out of Carrier's services, including, but not limited to, Carrier's negligent or willful acts or omissions. Carrier shall be liable for all loss, damage, injury to or delay of freight shipped hereunder in accordance with 49 U.S.C. 14706.
- TTMS agrees to pay Carrier within 30 days of receipt of Carrier's undisputed invoice provided all necessary documentation, including but not limited to the original Bill of Lading for the load and the rate confirmation sheet with amounts matching the invoice, has been provided to TTMS. Carrier agrees to look solely to TTMS for payment and shall not make any demand upon TTMS's customer ("Shipper") for payment. Shipper is a third party beneficiary of this Agreement. TTMS will have the right to offset payments owed to Carrier upon a claim by TTMS or Shipper regarding any damage to any shipment.
- Carrier understands and agrees that for a period of 1 year from the date of the Agreement, Carrier shall not back solicit, directly or indirectly, any Shipper whose transportation needs were disclosed to Carrier in connection with this Agreement. As liquidated damages, Carrier agrees to pay a 15% commission on all traffic handled for Shippers whose transportation needs were disclosed to Carrier in connection with this Agreement for a period of 1 year.
- Carrier warrants to TTMS (and Shipper) that it meets the following criteria and that it shall promptly notify TTMS (and Shipper) of any failures to meet any of the following criteria: (a) Carrier shall maintain all risk cargo insurance in the amount of not less than \$100,000 per shipment; (b) Carrier shall maintain motor carrier automobile public liability insurance for property damage and personal injury in the amount of not less than \$1,000,000; (c) Carrier shall maintain workers compensation insurance as required by state law; (d) Carrier shall agree to provide certificates of insurance upon request; (e) Carrier shall maintain "Satisfactory" U.S. DOT safety ratings or the equivalent CSA scores and is otherwise authorized to provide the proposed services; and (f) Carrier shall be in compliance with all applicable laws.

Carrier agrees that all freight tendered to it by TTMS shall be transported on equipment operated only under the authority of Carrier and Carrier shall not in any manner subcontract or broker the freight to a third party. Should Carrier violate this provision, Carrier agrees that TTMS, at its option, shall not pay any freight bills submitted by Carrier applicable to such unauthorized brokerage and/or shall pay the third party directly. Further, Carrier agrees that in the event of such unauthorized brokerage all limitations to Carrier's cargo liability and/or Carrier's other liabilities shall, at TTMS's option, become null and void.

Carrier agrees that the rates and charges herein are the only rates and charges to be paid by TTMS. No other tariff rates or charges will apply. TTMS will only pay additional charges if charges are agreed to in writing and TTMS is able to collect the charges from Shipper. Carrier must inform TTMS within 24 hours of any unplanned accessorial or other additional charges incurred. TTMS will not reimburse detention charges unless "in" and "out" times are clearly stated on the Bill of Lading. TTMS will reimburse Carrier for approved lumper costs upon submission by carrier of a signed receipt.

- If a shipment is rejected by Consignee, TTMS has the option to either (1) have Carrier place the load in storage or (2) have Carrier return it to the point of origin or some other point of destination specified by TTMS.
- If Carrier cannot complete delivery as agreed, TTMS may take whatever steps necessary to have such shipment completed, with Carrier responsible for any extra costs incurred by TTMS in doing so.
- Carrier waives all rights to any claim for a lien on the shipment.
- Carrier is to be named on the Bill of Lading as "carrier of record". Any term or provision on a bill of lading or other document inconsistent with this provision is void and unenforceable.
- This written Agreement contains the entire Agreement between the parties and may only be modified by signed written Agreement. If there is a signed Broker/Carrier Agreement or signed accessorial Agreement in effect between Broker and Carrier, any terms of such Agreement that conflict with this Agreement shall take precedence over this Agreement. Tennessee law, venue and jurisdiction shall apply. Failure by TTMS to enforce any provision of this Agreement does not constitute any waiver of any rights or remedies under this Agreement. If any provisions of this Agreement are declared invalid by a court of competent jurisdiction, the remainder of this Agreement shall remain in full force and effect.
- Carrier's signature below or its acceptance of any load tendered by TTMS constitutes confirmation of and agreement to all information and terms and conditions set forth above and posted at <http://www.totalms.com>.

Carrier Rep: BECKY BUTLER

Email: RBUTLER@TOTALMS.COM

Carrier Contact Name: Phil Vukovic

Phone: (662)892-6768

Date: _____

Carrier Signature: _____

Please Sign and Fax back to TTMS @ ()-423



TRIUMPH

PAY

PAYMENT OPTIONS

SAME DAY

2.5% QP

5-DAY

1.5% QP

STANDARD

30 DAY

Standard Mail: **Not Recommended** (Days To Pay Increased): Transflo, P.O. Box 9349, Louisville, KY 40209-0349

PLEASE SEND INVOICES* TO:

U.S. Xpress

Standard: logisticsap@usxpress.com

QuickPay: logisticsqp@usxpress.com

Total Transportation of Mississippi

Standard: logisticsap@totalms.com

QuickPay: logisticsqp@totalms.com

***Paid within terms from date of receipt of all correct paperwork.**

Payment Inquiries

Login to TriumphPay or email
paystatus@triumphpay.com

Phone: (469)312-7222

Factoring? Invoice Us Directly.

If you take QuickPay, you don't
need to invoice your factoring
company.

**CORPORATE
CONTACTS**

U.S. Xpress
4080 Jenkins Rd Chattanooga, TN
37421

(423)510-6583
MC#188121

Federal Tax ID #62-1255088
Surety Bond #: 702-188121

Total Transportation of Mississippi
125 Riverview Drive
Richland, MS 39218

(601)936-2104
MC#239097

Federal Tax ID #04-3643789
Surety Bond #: 929446280

Sign Up/Register your account and connect with U.S. Xpress by logging into:
www.TriumphPay.com

Carrier Rep: BECKY BUTLER
Email: RBUTLER@TOTALMS.COM

Carrier Contact Name: Phil Vukovic
Phone: (662)892-6768

Date: _____
Carrier Signature: _____

Please Sign and Fax back to TTMS @ ()-423

THIS SHIPPING ORDER

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

For 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 or said destination, if so made, 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 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 Straight Bill of Lading set forth (1) in the Uniform Freight Classification in effect on the date hereof, if this is a rail or a sea-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 including those on the back thereof, 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.

Timestamp: 05/29/2024 12:58:10

Lebanon, PA 17046

AT

BOL: 03577768700998789



PAGE 1 OF 1	BILL OF LADING NO. 03577768700998789
MASTER BILL OF LADING NO.	

SHERWIN WILLIAMS 3050 Hanford Drive 717-306-5900 Lebanon, PA			DATE 05/29/2024 CUSTOMER DUNS NUMBER 870 ZIP CODE 17046	SHERWIN WILLIAMS COMPANY 2727 SALISBURY HIGHWAY STATESVILLE, NC 28677 704.761.2335							
ORDER NO. LN99878		FREIGHT CODE % 100	CARRIER TOTAL TRANSPORTATION		TRAILER NO. 03262		SEAL NO. 2211721				
NUMBER OF PACKAGES	TYPE	H M	ARTICLE DESCRIPTION		UNITS	B/L CODE	PRODUCT BATCH	NUMBER SIZE	FULL PALLET	BROKEN PALLET	WEIGHT (LBS) (SUB. TO CORR.)
			TLT Load ID: TL 1638685 TLT Order ID: SW 1368365								
96	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		384	23874	007.0935281.005 LE1304VK		1	0	984
480	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		1920	23874	007.0936244.005 LE1404GP		0	5	4800
18	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		72	23874	009.0010851.007 LE1464FR		0	1	635
144	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		288	23874	CP0060007 LE1434HF 17		2	0	3311
1152	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		2304	23874	CP0060007 LE1444LP 17		16	0	26484
65	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **		260	23874	HP5474409 LE1424EF 16		0	2	2944
TOTAL 1955		PAL WGT TOTAL 675						TOTAL PALLET 27		TOTAL WEIGHT 39833	
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 shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.			NOTICE TO ALL CARRIERS MATCH AND ATTACH THE NO. 3 COPY OF THE B/L TO THE FREIGHT BILL. WE REQUIRE THE ORIGINAL AND ONE COPY OF THE FREIGHT BILLS.			SPECIAL INSTRUCTIONS DOOR 17 INSP CM					
(Signature of Consignor)			FOR PAYMENT ATTACH COPY OF THE B/L TO FREIGHT BILL AND MAIL TO: Sherwin Williams Co. c/o D.D.I. P.O. Box 818019 Cleveland, OH 44181			NOTION CARRIER ACKNOWLEDGES SHIPPER HAS PROVIDED THE REQUIRED INVOICES FOR THE MATERIALS BEING TRANSPORTED. EMERGENCY RESPONSE GUIDE IS MAINTAINED IN CAR. CARRIER ALSO STATES IF CONTAINERS ARE DAMAGED IN THE COURSE OF TRANSPORTATION, THEY WILL BE REPAIRED AND REPAIRED OR, ACCORDANCE WITH ALL FEDERAL, STATE AND LOCAL REQUIREMENTS. CARRIER IS RESPONSIBLE FOR ANY AND ALL LOSS, DAMAGE, LOSS OF OR ALL PARTS, TO FACTORIES WITHIN 90 DAYS OF DELIVERY. CARRIER ASSUMES ALL RESPONSIBILITY FOR LONG-TERM STORAGE OF MATERIALS. CARRIER IS RESPONSIBLE FOR THE COST OF HOT Pallet COUNT.					
If charges are to be prepaid, write or stamp here "TO BE PREPAID"											
TO BE PREPAID											
Rec'd \$ to apply in prepayment of the charges on the property described herein.											
Agent or Cashier			FREIGHT BILL WITHOUT B/L COPY WILL BE RETURNED.			SHIPPER'S RESPONSIBILITY: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.					
Per (The signature here acknowledges only the amount prepaid)											
Charges Advanced \$											

The Sherwin-Williams Company,

SHIPPER

2

AGENT

PER

PER MARK CHAMBERLAIN

Permanent Post Office Address of Shipper 96136

FORM 14888-BCS PLANT 06/11

3050 Hanford Drive
Lebanon, PA 17046CHEMTREC EMERGENCY 24-HOUR NUMBER
(800)-424-9300 or 703-527-3887

THIS SHIPPING ORDER

must be legibly filled in, in ink, in Indelible Pencil, or in Carbon, and retained by the Agent

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order.

Without 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 performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in the 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.

Shippers hereby certifies that he is familiar with all the terms and conditions of the said bill of lading including those on the back thereof, 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.

PAGE 1 OF 1	BILL OF LADING NO. 03577768700998789
MASTER BILL OF LADING NO.	

Timestamp: 05/29/2024 12:58:10

Lebanon, PA 17046

AT

BOL: 03577768700998789



SHIPPER	Sherwin Williams 3050 Hanford Drive 717-306-5900 Lebanon, PA	DATE 05/29/2024	SHIP TO	SHERWIN WILLIAMS COMPANY	
		CUSTOMER DUNS NUMBER 870		2727 SALISBURY HIGHWAY	
		ZIP CODE 17046		STATESVILLE, NC 28677	
				704.761.2335	

ORDER NO. LN99878	FREIGHT CODE % 100	CARRIER TOTAL TRANSPORTATION	TRAILER NO. 03262	SEAL NO. 2211721
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NUMBER OF PACKAGES	TYPE	H M	ARTICLE DESCRIPTION	UNITS	B/L CODE	PRODUCT BATCH	NUMBER SIZE	FULL PALLETS	BROKEN PALLETS	WEIGHT (LBS) (SUB. TO CORR.)
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65	CTNS		PAINT AND RELATED MATERIALS, ** DO NOT FREEZE **	260	23874	HP5474409 LE1424EF 16		0	2	2944

Today's Date 5/30/24 Appt Time 0900Time In 0827 Time Out 1000James C Harrison
Receiver's SignatureOvertuned 2 gallon parts
90 gallons moved to
damage JCH

TOTAL 1955	PAL WGT TOTAL 675	SHERWIN WILLIAMS STATESVILLE NC	TOTAL PALLETS 27	TOTAL WEIGHT 39833
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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 shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

If charges are to be prepaid, write or stamp here "TO BE PREPAID"

TO BE PREPAID

Rec'd \$ _____ to _____
apply in prepayment of the charges on the property described hereon.

Agent or Cashier

Per _____
(The signature here acknowledges only the amount prepaid)

Charges Advanced \$ _____
Shippers responsibility: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

NOTICE TO ALL CARRIERS

MATCH AND ATTACH THE NO. 3 COPY OF THE B/L TO THE FREIGHT BILLS. WE REQUIRE THE ORIGINAL AND ONE COPY OF THE FREIGHT BILLS.

FOR PAYMENT ATTACH COPY OF THE B/L TO FREIGHT BILL AND MAIL TO:

Sherwin Williams Co.
c/o D.D.I.
P.O. Box 818019
Cleveland, OH 44181

FREIGHT BILL WITHOUT B/L COPY WILL BE RETURNED

MOTOR CARRIER
ACKNOWLEDGES SHIPPER HAS PROVIDED THE REQUIRED PLACARDS FOR THE MATERIAL BEING TRANSPORTED. EMERGENCY RESPONSE GUIDE IS MAINTAINED BY CARRIER. ALSO STATES IF CONTAINERS ARE DAMAGED IN THE COURSE OF TRANSPORTATION, THEY WILL BE HANDLED AND DISPOSED OF IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL REQUIREMENTS WHICH MAY APPLY TO SUCH MATERIAL. CARRIER IS RESPONSIBLE FOR ANY AND ALL COSTS ASSOCIATED WITH PROPER HANDLING OR DISPOSAL OF SUCH MATERIALS. EQUIPMENT MOTOR CARRIER IS RESPONSIBLE FOR. THIS EQUIPMENT NOT PALLET COUNT.

SPECIAL INSTRUCTIONS

DOOR 17

INSP CM

The Sherwin-Williams Company,

SHIPPER

PER MARK CHAMBERLAIN

Permanent Post Office Address of Shipper 96136

3050 Hanford Drive
Lebanon, PA 17046

FORM 14888-BCS PLANT 06/11

2

AGENT

PER

CHEMTREC EMERGENCY 24-HOUR NUMBER
(800)-424-9300 or 703-527-3887