



Bill to:
MAGELLAN TRANSPORT LOGISTICS
2511 St Johns Bluff Road, Suite 107,
Jacksonville,
FL,
32246

Invoice Date: 05/31/2024
Invoice #: 1394974
Terms: NET 30
Due Date: 07/01/2024

| Date | Customer Ref # | Origin - Destination | Quantity | Rate | Amount |
|------------|----------------|---|----------|------------|------------|
| 05/30/2024 | | 4635 W LAKE STREET, CHICAGO, IL, 60644 - 401 ELKIN HIGHWAY, NORTH WILKESBORO, NC, 28659 | | | |
| | | | 1 | \$1,450.00 | \$1,450.00 |

| |
|--------------|
| TOTAL |
| \$1,450.00 |

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



MAGELLAN Transport Logistics

Bill To Information

Please send invoices and backup information to:

Email: accounting@magellanlogistics.com

Fax: 866-728-9147

Sent By: Ben Miller

Email: bmiller@magellanlogistics.com

Phone: (904) 580-3400

Fax:

Office: TX

Rate/Route Confirmation for Riki Transportation Inc \$1,450.00

| Shipment Details | | | | | |
|-----------------------|--|--------------|---------|---------------|--------|
| Shipment # | 1394974 | Pallet Count | 10 | Carrier Miles | 716.61 |
| Cust Ref/PO # | | Eq Type | 53' Van | Temperature | - |
| Todays Date | 5/30/2024 08:13 | Eq ID | | | |
| Description of Merch: | Clear Plastics Cases @ 15000.00 Pounds | | | | |

| Carrier Details | | | | | |
|-----------------|-------------------------|----------------|--------------------------|--|--|
| Carrier | Riki Transportation Inc | Driver Name | Emanuel (910) 600-9876 | | |
| MC | 086875 | Dispatch Phone | (708) 303-5150 | | |
| DOT # | 3119062 | Fax | | | |
| SCAC | | Carrier Ref | | | |

| Stop Details | | | | | | |
|--------------|-----------------|--|-----------|---------------|--|--|
| Stop Type | Pcs/Type/Wt | Address | Appt Date | Appt Time | PU/Deliv # | |
| 1 Pickup | Cases 15000 lbs | Midwest Canvas 4635 W LAKE STREET CHICAGO, IL, 60644 | 5/30/24 | 09:00 - 15:30 | Driver MUST call Magellan for Dispatch | |
| 2 Delivery | Cases 15000 lbs | Samaritans Purse 401 ELKIN HIGHWAY NORTH WILKESBORO, NC, 28659 | 5/31/24 | 05:00 - 08:30 | | |

| Shipment Line Items | | | | |
|---------------------|---------|-----------|------|----------------|
| Pcs/Type | Pallets | Weight | STCC | Description |
| 0 | 10 | 15000 lbs | | Clear Plastics |

| Carrier Rate Agreement | | | | | | |
|------------------------|--------------------|------------|-----------|---------------|------------|------|
| Item # | Charge Description | Unit Price | Unit Type | Unit Quantity | Rate | Note |
| 1 | Linehaul | \$1,150.00 | Flat Rate | 1 | \$1,150.00 | |
| 2 | GPS Load Tracking | \$300.00 | Flat Rate | 1 | \$300.00 | |
| Total: | | | | | \$1,450.00 | |

| Terms of Agreement | | | | | | |
|---|--|--|--|--|--|--|
| 1. Carrier shall be prohibited from using other motor carriers, brokers, or "substituted services" which includes but not limited to double brokering, rail, and partial unless approved by Magellan. Magellan will not compensate Carrier for shipments on which Carrier has utilized other motor carriers, brokers, or any substituted services for Shipper's Goods. Any broken/damaged seal, transload, or use of substitute service without prior approval from Magellan or Law Enforcement will result in 100% forfeiture of payment and a \$2,500 fine to the Carrier | | | | | | |
| 2. GPS tracking is required via FourKites or Macropoint. Failure to accept and comply throughout shipment to delivery could result in a deduction of \$300. Load must track the entirety of the shipment with GPS. Drivers are required to keep the tracking app open at all times. Closing the application, low battery mode, and airplane mode all stop tracking. Must ensure mobile data and GPS/Location Services are switched on and set to Always Allow. | | | | | | |
| 3. Carrier Agrees with the Above Rate Confirmation for Said Movement and Any Further Changes Must be Called and Documented With a New Rate Confirmation to Acknowledge Acceptance of Charges. | | | | | | |
| 4. All drivers must call Magellan to Receive Pick Up # | | | | | | |
| 5. Pick-up dates and hours will not require carrier to violate HOS regulations. Routing instructions, if any, are for informational purposes only. | | | | | | |
| 6. Payment by Magellan Will Be Made Within 30 Days of Receipt of: Invoice with Magellan Load # and/or Customer Reference number on it, Bill of Lading, Proof of Delivery, and Any Pre-Approved Accessorial Charges. | | | | | | |
| 7. Missed pick-ups/deliveries are subject to late fees | | | | | | |
| 8. All Lumper receipt's must be turned in within 2 business days of the shipment being delivered or risk possibility of not being reimbursed. POD must be turned in within 5 days of shipment delivery or a late fee of \$150 will be charged. | | | | | | |
| 9. POD must be notated with in and out times notated to be eligible for detention | | | | | | |
| 10. Damages or missing freight must be reported - any failure to do so can result in a deduction | | | | | | |
| 11. All Drivers Must Check Call For Following Events: Arrival at Shipper, Loaded at Shipper, Daily Location Update by 9am, Arrival at Destination, Unloaded at Destination | | | | | | |

Riki Transportation Inc
8225 LECLAIRE AVE, BURBANK, IL (If this is not your information,
 notify dispatch immediately)

Signature _____ Date _____
 Magellan Transport Logistics, Inc.

Signature Marcus Nikolic Date _____
 Riki Transportation Inc

****GET PAID NOW***DON'T WAIT 30 DAYS****

MAGELLAN TRANSPORT LOGISTICS AND MAGELLAN TRANSPORT INC. WILL ISSUE QUICK PAY VIA COMCHECK IF FOLLOWING CRITERIA ARE MET: QUICK PAY IS REQUESTED UPON BOOKING; CARRIER HAS COMPLETED AND RETURNED RAPID PAY FORM; UPON DELIVERY, POD AND INVOICE SENT TO MAGELLAN; CARRIER HAS SUCCESSFULLY DELIVERED AND BEEN PAID ON 1 PREVIOUS LOAD; AND APPROVAL HAS BEEN RECEIVED FROM VERIFIED EMAIL. NO APPROVAL FROM VERIFIED EMAIL – NO COD COST IS 5% (MINIMUM \$20) OF INVOICE, EXCLUDING ACCESSORIALS; WE WILL ISSUE A COMCHECK AS SOON AS PAPERWORK IS VERIFIED; CALL BOOKING DISPATCHER TO SET UP PAYMENT UPON DELIVERY. APPROVAL WILL STILL BE DETERMINED ON A CASE-BY-CASE BASIS AT THE SOLE DISCRETION OF MAGELLAN.

Date: 5/30/2024

Bill of Lading - Short Form - Not Negotiable

Page 1 of 1

| | | | | | | | | | |
|---|----------------------------|---|-------------------------------|---|---------------------|--|-----------------------|--|-------|
| Ship From | | Bill of Lading Number: 1394974 | | | | | | | |
| Name: | Midwest Canvas | Customer Ref: | PO056712 | | | | | | |
| Address: | 4635 W LAKE STREET | PO: | PO056712 | | | | | | |
| City/State/Zip: | CHICAGO, IL 60644 | Carrier Ref#: | Marcus Nikolic | | | | | | |
| Tel: | (773) 287-4400 | FOB: | <input type="checkbox"/> | | | | | | |
| Ship To | | Carrier Name: Riki Transportation Inc | | | | | | | |
| Name: | Samaritans Purse | Location: | Trailer number: W94922 | | | | | | |
| Address: | 401 ELKIN HIGHWAY | | Serial number(s): | | | | | | |
| City/State/Zip: | NORTH WILKESBORO, NC 28659 | | Container number: | | | | | | |
| Tel: | (828) 588-6281 | FOB: | Seal number: | | | | | | |
| | | | Carrier Quote #: 708-303-5150 | | | | | | |
| Third Party Freight Charges Bill to | | SCAC: | | | | | | | |
| Name: | | Carrier Pro: | | | | | | | |
| Address: | | | | | | | | | |
| City/State/Zip: | | | | | | | | | |
| Fax: | | | | | | | | | |
| Special Instructions: | | Freight Charge Terms (Freight charges are prepaid unless marked otherwise): | | | | | | | |
| | | Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/> | | | | | | | |
| | | <input type="checkbox"/> Master bill of lading with attached underlying bills of lading. | | | | | | | |
| Customer Order Information | | | | | | | | | |
| Customer Order No. | # of Packages | Weight | Pallet/Slip (circle one) | Additional Shipper Information | | | | | |
| Order Number: | 0 | 15000.00 lbs | Y N | Ship Ref: | 056712 | | | | |
| | | | Y N | Pickup From: | 05/30/2024 09:00 AM | | | | |
| | | | Y N | Pickup To: | 05/30/2024 03:30 PM | | | | |
| | | | Y N | Delivery Info | | | | | |
| | | | Y N | Cons Ref: | | | | | |
| | | | Y N | Delivery From: | 05/31/2024 05:00 AM | | | | |
| | | | Y N | Delivery To: | 05/31/2024 08:30 AM | | | | |
| Grand Total | | 15000.00 lbs | | | | | | | |
| Carrier Information | | | | | | | | | |
| Handling Unit | | Cartons | | LTL Only | | | | | |
| Qty | Type | Qty | Type | Weight | DIMS | HazMat | Commodity Description | NMFC No. | Class |
| 10 | Pallets | 0 | Cases | 15000.00 | 42x48x60 | | Clear Plastics | | |
| 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: \$ _____ | |
| Terms: Collect _____ Prepaid _____ Cust. check acceptable _____ | | | | | | | | | |
| Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 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. | | | | | | | | Consignee: Received in apparent good order except as noted hereon: | |
| Date: _____ Time In: _____ Time Out: _____ | | | | | | | | | |
| PER (Signature): _____ | | | | | | | | | |
| PRINT NAME: _____ | | | | | | | | | |
| Shipper Signature/Date | | Trailer Loaded By: | | Freight Counted By: | | Carrier Signature/Pickup Date | | | |
| 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. | | ____ Shipper ____ Driver | | ____ Shipper ____ Driver/pallets ____ Driver/pieces | | 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. Property described above is received in good order, except as noted. | | | |

Steve Johnson

5-31-24