



**Bill to:**  
SAV ENTERPRISES INC  
11325 XEON STREET NORTHWEST,  
Minneapolis,  
MN,  
55448

Invoice Date: 06/04/2024  
Invoice #: 31195506  
Terms: NET 30  
Due Date: 07/04/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/03/2024		1 VISTA WAY, ANOKA, MN 55303 - 5802 SW REGIONAL AIRPORT BLVD, BENTONVILLE, AR 72712			
			1	\$1,100.00	\$1,100.00

<b>TOTAL</b>
\$1,100.00

**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**

Send Fax To:

1 -

Faxes will be returned to:

763-746-1763

When Faxing Send:

Pages 2 - 3

**CARRIER RATE AGREEMENT AND LOAD CONFIRMATION****\*\*\*DRIVER MUST CALL DISPATCH 800-356-2421 FOR DISPATCH\*\*\*****S.A.V. LOAD # 31195506**

**BILL TO: S.A.V. ENTERPRISES, INC.**  
**P.O. BOX 480050**  
**COON RAPIDS, MN 55448-0050**  
**Accounting@savtrans.com**

- \* **LOAD NUMBER MUST BE REFERENCED ON YOUR INVOICE**
- \* **SIGNED BILLS MUST BE PROVIDED WITH YOUR INVOICE FOR PAYMENT**

**TRIP NOTES:****SHIPPER**

VISTA OUTDOORS -ENT  
1 VISTA WAY

ANOKA MN 55303  
Phone: 763-323-2534  
Contact: 763-852-3500

P/U DATE: 06/03/2024

P/U #: A108542

P/U TIME: 07:00 - 19:00 FCFS

PCS: 1,764 PLT:21.00

BOL #:

WEIGHT: 42,802.00

PO #:

COMMODITY: SMALL AMMUNITION OTHER #:

**NOTES/DIRECTIONS:**

10W  
RIGHT ON THURSTON AVE  
RIGHT ONTO VISTA WAY - THAT IS THE DRIVE WAY

**CONSIGNEE**

WALMART 7842  
5802 SW REGIONAL AIRPORT BLVD

BENTONVILLE AR 72712  
Phone: 479-553-0500 6210  
Contact:

DEL DATE: 06/04/2024

DEL TIME: 05:00 Appt

DEL CONF #: 27242570

**NOTES/DIRECTIONS:****CARRIER :**

BRZ  
8225 LECLAIRE AVE  
BURBANK IL 60459  
Phone: 708-303-5150  
Contact: MIKE/LUKE/BLAKE/COLE/LINDA

**EQUIPMENT REQUIREMENTS:****48/53 VAN OR REEFER**

**DRIVER MUST CHECK IN LOADED AND DAILY BY  
10:00AM OR A \$75.00 FINE MAY BE APPLIED.**

BASE RATE	\$1,100.00
FSC:	\$0.00
DROPS:	\$0.00
LUMPER:	\$0.00
DETENTION:	\$0.00
MISC:	\$0.00
On-Time Pickup:	\$0.00
On-Time Delivery:	\$0.00

<b>TOTAL:</b>	<b>\$1,100.00</b>
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AS PER OUR PHONE CONVERSATION, FOR AND IN CONSIDERATION OF THE VALUE AND ITEMS STATED ABOVE, IT IS AGREED THAT THE ABOVE SHALL BE A MODIFICATION OF AN ADDENDUM TO THE EXISTING CONTRACT BETWEEN THE TWO PARTIES. IT IS ALSO AGREED THAT ANY ADDITIONAL CHARGES NOT LISTED ABOVE MUST BE CALLED INTO S.A.V. ENTERPRISES AT TIME OF OCCURANCE SO A REVISED RATE AGREEMENT CAN BE COMPLETED AND SENT TO THE CARRIER. NO ADDITIONAL CHARGES WILL BE HONORED WITH OUT A SIGNED RATE AGREEMENT.

ANY DIRECTIONS, SHIPMENT INSTRUCTIONS OR LOADING OR UNLOADING INFORMATION PROVIDED BY S.A.V. ENTERPRISES OR ITS CUSTOMER EITHER ORALLY OR IN WRITING ARE FOR INFORMATIONAL PURPOSES ONLY. NEITHER S.A.V. NOR ITS CUSTOMER CONTROLS CARRIER'S PERFORMANCE OF THE TRANSPORTATION SERVICES. CARRIER IS SOLELY RESPONSIBLE FOR COMPLYING WITH ALL APPLICABLE LAWS, WEIGHT AND COMMODITY RESTRICTIONS AND TO DETERMINE ROUTES OF TRAVEL. SAV DOES NOT SANCTION ANY FMSCA VIOLATIONS IN CONJUNCTION WITH ACCEPTANCE OF THE LOAD.

Driver / Carrier must comply with the following:

- Carrier must complete and sign load confirmation to receive pickup and delivery information
- All SAV loads WILL be subject to **MacroPoint Tracking**-Failure to accept Macropoint MAY result in removal from the load
- Driver must check in as a "SAV TRUCK" to ensure they are getting the correct load.
- Driver must call 800-356-2421 for dispatch, loaded, unloaded and or delayed for ANY REASON.
- Check calls must be made to 800-356-2421 by 10am Central Standard time daily, if on a load more than 24 hours.
- If POD / Bill of Lading is not faxed to 763-746-1760 or received by other means in our office within 72 hours, a \$25.00 per day late fee will be assessed.
- Lumper / Unloading expenses must be pre-approved by SAV Dispatch. Receipts must be submitted with the invoice to ensure proper payment.
- If a load has damage, shortage, overage or is being loaded or unloaded incorrectly, the driver MUST call 800-356-2421 BEFORE leaving the Shipper and or Consignee.
- Fines can be assessed for a missed loading or unloading appointment without notification to SAV Dispatch. A missed appointment for a crane or crew will result to charges being passed onto the carrier.
- Dentention MUST be reported to SAV prior to the time of occurrence. BOTH In and Out times must be on the BOL
- ALL Scheduling and/or Rescheduling of appointments must be done by SAV

**\*\*\*DRIVER MUST CALL DISPATCH 800-356-2421 FOR DISPATCH\*\*\***

CARRIER REF# \_\_\_\_\_

S.A.V. LOAD # 31195506

TRUCK # \_\_\_\_\_ TRAILER # \_\_\_\_\_

TOTAL AGREED RATE \$1,100.00

Driver Telephone #: \_\_\_\_\_

BRZ

S.A.V. ENTERPRISES, INC.

By: \_\_\_\_\_  
By Typing your full name, this will be considered your electronic signature

By: DAVE MATTER

**\*\*\*\*\*SIGN AND FAX BACK TO 763-746-1763 or Email to \*\*\*\*\***

**\*\*\*THIS AGREEMENT WILL BE NULL AND VOID IF DOUBLE BROKERED\*\*\***

**\*\*\*SAV will not accept cell phone pictures of required documents\*\*\***

**\*\* You may email or fax your billing to SAV Transportation Group\*\***

**\*\*Email: Accounting@Savtrans.com or Fax: 763-225-8540\*\***

**When Emailing or faxing your bills and lumper receipts please reference the SAV Load number and you must submit all pages of the bills of lading. The BOL must be signed by the consignee**



Date: 5/30/2024 7:07:43 AM

## BILL OF LADING

Page 1 of 1

## SHIP FROM:

Name: VISTA OUTDOOR SALES LLC  
Address: 1 VISTA WAY

City/State/Zip: ANOKA, MN 55303

SID#: SO016856542+RT02844065

FOB: ☒

## SHIP TO:

Name: WALMART DC 7842R-REGULAR Location  
#: #:

Address: 5802 SW REGIONAL AIRPORT BLVD

City/State/Zip: BENTONVILLE, AR 72712

CID#: 104405

Attention:

FOB: ☐

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name:

Address:

City/State/Zip:

Attention:

Bill of Lading Number: 00294650002718280

CARRIER NAME: SAVD H03251  
Trailer number:  
Seal number(s):

SCAC: SAVD

Pro number: A108542

Freight Charge Terms:  
Prepaid☐  
(check box)Master Bill of Lading: with attached underlying  
Bills of Lading

## SPECIAL INSTRUCTIONS:

27242570

20240604

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
3931670128	1764	41542.20	Y N	SO016856542
GRAND TOTAL	1764	41542.20		

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	EXPL WT LBS   KG	LTL ONLY
QTY	TYPE	QTY	TYPE			NMFC # CLASS
21	PL	1,764	Carton(s)	41542.20		64300.02 85
		0	Tare Wt	1260.00		0
21		1764		42802.20		
				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 \_\_\_\_\_.

FOR HELP IN EMERGENCIES CALL: CHEMTREC  
TOLL FREE DAY OR NIGHT  
1-800-424-9300 Acct#: CCN8313

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 according to the applicable regulations of the Department of Transportation.

## Trailer Loaded:

☐ By Shipper  
☐ By Driver

## Freight Counted:

☐ By Shipper  
☐ 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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

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



Date: 5/30/2024 7:07:43 AM

# BILL OF LADING

Bill of Lading Number: 00294650002718280

**SHIP FROM:**  
Name: VISTA OUTDOOR SALES LLC  
Address: 1 VISTA WAY

City/State/Zip: ANOKA, MN 55303

SID#: SO016856542+RT02844085

**SHIP TO:** Location #:  
Name: WALMART DC 7842R-REGULAR

Address: 5802 SW REGIONAL AIRPORT BLVD

City/State/Zip: BENTONVILLE, AR 72712

CID#: 104405

Attention: **THIRD PARTY FREIGHT CHARGES BILL TO:**

Name:

Address:

City/State/Zip:

Attention:

SPECIAL INSTRUCTIONS:  
27242570  
20240604



CARRIER NAME: SAVD

Trailer number:

Seal number(s):

SCAC: SAVD

Pro number: A108542

Freight Charge Terms: Prepaid

Master Bill of Lading (check box)

Freight Bill of Lading (check box)

Freight Bill of Lading (check box)

Freight Bill of Lading (check box)

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## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PLT	PLT (check one)	ADDITIONAL SHIPPER INFO
3831670128	1764	41542.20	Y	N	SO016856542
GRAND TOTAL	1764	41542.20			

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	EXPL WT LBS   KG	LTL ONLY
QTY	TYPE	QTY	TYPE	COMMODITY DESCRIPTION	EXPL WT LBS   KG	LTL ONLY
21	PL	1,764	Carton(s)	CARTRIDGES, SMALL ARMS	64300.02	85
21	Tare Wt	1260.00			0	
GRAND TOTAL		42802.20				

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 \_\_\_\_\_"

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: shipper certifies that the carrier and its agents have been advised in writing of the nature and value of the property and that the carrier and its agents have been advised of the terms, conditions, classifications and rates that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

FOR HELP IN EMERGENCIES CALL: CHEMTREC TOLL FREE DAY OR NIGHT 1-800-424-9300 Act#:CCN8313

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

CARRIER SIGNATURE / PICKUP DATE

Property description shown is received in good order, except as noted.

SHIPPER SIGNATURE / DATE

SHIPPER SIGNATURE / DATE

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SHIPPER SIGNATURE / DATE



TCR: b99bd701-a061-4027-955a-ca706a6ce94e

DC#: 7842

# Trailer Control Record

Trailer Number 3251	Carrier SAVT	Delivery Number 27242570	Appointment Time 06/04/2024 05:00	Arrival Date 06/04/2024 04:26:02
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Arrival Information	
Inbound Seal #: 49814	Sealed at Gate: N
AP Associate: jdengen	Current Seal #: 49814
Comments: Rodriguez Mesa 3rz	
Intact: Y	
Load ID#: 0	

Delivery	
Cases: Total: 1764	

Receiving Dock	
Door #: 326	Assigned by: wj0lri
Unloader: wj0lri	Unload Start Time: 06/04/2024 05:19:17
Driver Arrival at Window: 06/04/2024 04:47	Unload End Time: 06/04/2024 05:51:00
Paperwork Available at Window: 06/04/2024 07:05	

Return/Transfer	Reason:
Drop: N	Trailer Empty: Y
Commodity: SSK	Return Contents:
Tractor #: 608	Description:

Seal Information	Receiving Office
Seal Number: 49814	Trailer Resealed By: jdengen

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

Barcode		Equip ID	3251	Status	AP
Barcode		Equip Arrival	06/04/24 04:26	Temp1	
Barcode		Carrier	SAVT	Temp2	
Barcode		Seal	49814	Temp3	
Barcode		Reseal		Fuel Lvl	
Barcode		DoorZone	7842 326	Dept	SSTK
Barcode		Del Date	06/04/24 05:00	Type	53
Have read and understand the posted copy of Walk-In Appointment Drop Rules and Regulations					
Driver Signature					
Barcode		Delivery#	27242570	DC	7842