

**Bill to:**

TRAFFIC TECH, INC
6665 Cote-de-Liesse,
Montreal,
QC,
H4T1Z5

Invoice Date: 06/14/2024

Invoice #: LDS14656363

Terms: NET 30

Due Date: 07/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		1518 main St, Altavista, VA 24517 - 67208 N Centerville Rd, Sturgis, MI 49091, USA			
			1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

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

**Traffic Tech, Inc.**

Global Headquarters: Chicago, IL
Canadian Headquarters: Montréal, QC
Asia Headquarters: Shanghai, China

www.traffictech.com

Billing Address:

Traffic Tech, Inc.
111 E. Wacker Drive, Ste 2500
Chicago, IL, 60601, United States
Document Submission: paperwork@traffictech.com
Payment Inquiries: AP@traffictech.com

Carrier/Supplier Confirmation # LDS14656363**Thursday, June 13th, 2024**

To: Brz Location: Burbank, IL Phone: 708-303-5150 Contact: Shawn Popovic	Fax:	From: Kevin Sullivan Phone: 312-465-1440 Ext.2159# Email: Ksullivan@traffictech.com
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Shipment Information / Instructions

Equipment: Dry Van (53', Food Grade)
Shipment Size: 1.0 Truck Load

Instructions:

IMPORTANT COVID-19 PROCEDURES. It is the driver's responsibility to obtain a signed P.O.D. However, should the receiver refuse to sign the P.O.D., due to Covid-19 protocol of social distancing, the driver must obtain and indicate a first and last name of

If there are any differences between the instructions on this document and what you are picking up, STOP and IMMEDIATELY call 877-383-1167, TeamDPrass@traffictech.com.

Contacts:

By accepting the terms and conditions of this agreement of carriage, the carrier hereby waives its right to claim payment of its freight charges to the shipper, consignee or to any of Traffic Tech Inc's customers.

Any double brokering will result in a non-payment.

Must have drivers name and phone number. Must opt into tracking prior to pickup. Must travel 200 miles after pick up without stopping. Please track closely.

Any accessorial requests must be submitted within 48 hours of pick-up / delivery

1- Pick Up: Thursday, June 13th, 2024 - First Come First Serve - 12:00 - 16:00

Abbott Nutrition(FCFS)
1518 main St
Altavista, VA 24517

Main Phone: 434-369-3100

Contact Name:

Reference: Item#: 01315-Maltodextrin; P/up#: IPT - AIPS01315S0613

Instructions: FOOD GRADE DRY VAN ONLY

Qty	Freight Items	Weight	Equivalent Size	Class	NMFC#
21.0 Pallets	Dry food ingredients	43350 lbs			

2- Delivery: Friday, June 14th, 2024 - First Come First Serve - 08:00 - 15:00

Abbott Nutrition(Ross Products)
901 N. Centerville Rd
Sturgis, MI 49091

Main Phone: 269-651-0746

Contact Name:

Reference: PO#: AIPS01315S0613

Instructions: SEAL MUST BE INTACT OR LOAD WILL BE REJECTED. FAILURE TO NOTIFY TRAFFIC TECH OF A LATE DELIVERY COULD INCUR FINANCIAL PENALTIES

Qty	Freight Items	Weight	Equivalent Size	Class	NMFC#
21.0 Pallets	Dry food ingredients	43350 lbs			



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Carrier/Supplier Confirmation # LDS14656363

Thursday, June 13th, 2024

Charge	Description	Quantity	Units	Rate	Amount
Base Rate					\$1,400.00 USD
Total:					\$1,400.00 USD

Signed rate confirmation, P.O.D., invoice, and all other supporting paperwork must be sent to paperwork@traffictech.com for payment. All rates include fuel surcharge. Shipments are tendered to and must be run by carrier listed and signing below. Shipments are not to be double brokered.

X _____ TRAILER#: _____ TRACTOR#: _____

Driver: _____ DRIVER'S CELL#: _____

DISPATCH: PLEASE SIGN AND EMAIL BACK TO
Ksullivan@traffictech.com OR FAX BACK TO FAX#:



BOL #: 01315061324

How Ship:	X	Prepaid
		Collect

DATE: 06/13/24 WHEN SHIP: 06/13/24 TOTAL GROSS WEIGHT 43350
UNIT OF MEASURE: lbs

SHIP FROM :	Abbott Nutrition	SHIP TO :	Abbott Nutrition
	1518 Main Street		901 North Centerville Rd.
	Altavista, VA 24517		Sturgis, MI 49091
	Julius Williams		Attn: Keith Kalinoski
	434-369-3912		269-651-0726

CHARGE NUMBER: 1003-12933-105166-53120903-BLANK

P.O. NUMBER (if Applicable)

CARRIER (If Spec.): Expedited

VENDOR (If Applicable):

PICKUP POINT: Receiving

AUTHORIZED BY:

SPECIAL INSTRUCTIONS: NAP

J. Williams 6/13/24
Signature / Date

MAIL FREIGHT INVOICE TO: ABBOTT NUTRITION, P.O. BOX 16718, COLUMBUS, OH 43216

[illegible]

NOTE: IPT = Inter-Plant Transfer RTV = Return to Vendor

Note: If Security Seals are required, record seal numbers below:

Material pulled / staged by:

B. P. ll 6-13-24
Signature / Date

Recorded By:

Signature / Date _____

Items Loaded and verified by: Sign and Date

Carrier/Driver: Sign and Date

of Pallets 21

Trailer # W97038

This is to certify the above named materials are properly classified, described, packaged, marked, and labelled and are in proper condition to the applicable regulations of the Department of Transportation.

Carrier acknowledged 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 document in the vehicle.

FOR FREIGHT COLLECT SHIPMENTS: If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and other lawful charges.

(Signature of Consignor) _____ NAP

INSPECTED BY:

Sign/Date 6-17-24

BOL #: 01315061324

Verified by DA

How Ship:	<input checked="" type="checkbox"/> Prepaid
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Date 02-14-24

X

Prepaid

Collect

DATE:	06/13/24	WHEN SHIP:	06/13/24	TOTAL GROSS WEIGHT	43350
				UNIT OF MEASURE:	lbs

SHIP FROM :	Abbott Nutrition	SHIP TO:	Abbott Nutrition
	1518 Main Street		901 North Centerville Rd.
	Altavista, VA 24517		Sturgis, MI 49091
	Julius Williams		Attn: Keith Kalinoski
	434-369-3912		269-651-0726

CHARGE NUMBER: 1003-12933-105166-53120903-BLANK

P.O. NUMBER (If Applicable) _____	CARRIER (If Spec.): _____	Expedited _____
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VENDOR (If Applicable):	0	PICKUP POINT:	Receiving
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AUTHORIZED BY: J. Williams 6/13/24 SPECIAL INSTRUCTIONS: _____
Signature / Date NAP

MAIL FREIGHT INVOICE TO: ABBOTT NUTRITION, P.O. BOX 16718, COLUMBUS, OH 43216

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B. Pell 6-13-24
Signature / Date

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Signature / Date _____

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Carrier/Driver: Sign and Date

of Pallets

Trailer #

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(Signature of Consignor) _____ NAP

INSPECTED BY:

Sign/Date: 6-13-24

John Lewis 6-14-24