

**Bill to:**

Ally Logistics llc
P.O.BOX 14309,
Cincinnati,
OH,
45201

Invoice Date: 06/14/2024

Invoice #: A-448925

Terms: NET 30

Due Date: 07/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		7577 Slayton Settlement Rd, Gasport, NY 14067, USA - 7577 Slayton Settlement Rd, Gasport, NY US 14067			
			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

Carrier Rate and Load Confirmation



ALLY LOGISTICS
1090 36TH ST
GRAND RAPIDS, MI 49508
Kat Tyson
xt 454 (phone)
kat.tyson@allylogistics.com

Load Number: A-448925

Date: 06/13/2024

Equipment Type: Dry Van 53'

Temperature Controlled: ☐

PO Number:

Pick Note: NEED ETA

Load Number: A-448925

Carrier: ZIGI FREIGHT INC

Contact: KIM ROYAL3 INC, (p) (f)

Customer Instructions: 53 FT. FOOD GRADE DRY VAN.
BARS/STRAPS REQUIRED. GPS TRACKING REQUIRED.
POTENTIAL FINES FOR LDEL. DRIVER RESPONSIBLE FOR
ENSURING FREIGHT IS SECURED THROUGHOUT TRANSIT.

Temperature Setting Minimum:

Total Weight: 30,000

Carrier Quote Accessorial Charges:

Shipper Pickup (Stop 1)

BAUMAN ORCHARDS
161 Rittman Avenue
Rittman, OH US 44270
Expected Date: 06/13/2024
Shipping/Receiving Hours: 07:00-15:00
Appointment Required: No
Appointment Time: 07:00-15:00

Pickup Instructions:
Shipper References:
Pickup/Delivery Number:
Actual Appt:
Stop Distance: 0
Note: NEED ETA
Work In Status:

Consignee Delivery (Stop 2)

NEWROYAL ORCHARDS
7577 Slayton Settlement Rd
Gasport, NY US 14067
Expected Date: 06/14/2024
Shipping/Receiving Hours:
Appointment Required: No
Appointment Time: 07:00

Delivery Instructions:
Consignee References:
Pickup/Delivery Number:
Actual Appt:
Stop Distance: 257
Note:
Work In Status:

Shipment Information

Handling Unit		Package				
Qty	Type	Qty	Type	Weight	Commodity Description	Item Number
				30000 lbs	EMPTY BINS	Item 1

Carrier Fees

Description	Cost
Net Freight Charges	USD 700.00
Accessorial Charges	USD 100.00
Total Cost	USD 800.00

Fee Details				
Item Description	Unit	Quantity	Unit Price	Total
GPS Tracking	Fixed Cost	1.00	USD 100.00	USD 100.00

*** Please have driver call 888-466-1024 for dispatch, thank you!***

This rate confirmation supplements any Broker-Carrier Agreement signed by and between Ally and the Carrier listed herein and on the Bill of Lading issued in connection with the subject load. THIS RATE CONFIRMATION IS ALSO SUBJECT TO ALLY'S STANDARD TERMS AND CONDITIONS FOR MOTOR CARRIERS WHICH CAN BE FOUND AT: WWW.ALLYLOGISTICS.COM/TERMS. BY SIGNING THIS RATE CONFIRMATION OR BY ACCEPTING & PICKING UP THE SUBJECT LOAD, CARRIER AGREES TO AND ACCEPTS ALL PROVISIONS OF SUCH TERMS AND CONDITIONS. Ally agrees to pay the rate and charges shown hereon (subject to set conditions), and no different tariff, rate or schedule of rates shall apply. Due to the nature of the business, time is of the essence with respect to the freight. Ally reserves the right to impose reasonable and industry accepted fees upon the Carrier for late pickup or late delivery.

Carrier agrees that the freight will not be re-brokered, interlined, reassigned or subcontracted. If originals are not required and quick pay not requested, invoices and PODs can be sent to docs@allylogistics.com.

*****IF MACROPOINT TRACKING IS REQUESTED ON A LOAD, AND CARRIER DOES NOT COMPLY WITH TRACKING, FINES OF UP TO \$500 WILL BE LEVIED AGAINST CARRIER*****

*If hauling a refrigerated load please confirm temp setting with the shipper and BOL. If there is a discrepancy or any questions, call Ally Logistics immediately for assistance.

**For Standard Pay, please email your invoices to docs@allylogistics.com

**For Quick Pay, please email your invoices to quickpay@allylogistics.com

**If originals are required for payment on this shipment, please mail your invoice to: ALLY LOGISTICS LLC, 1090 36TH ST SE STE 628, GRAND RAPIDS, MI 49508

**For payment questions, email ap@allylogistics.com.

PLEASE NOTE: DETENTION AND LAYOVER REQUESTS WILL BE REVIEWED ON A PER-LOAD BASIS WHEN REQUESTED BY THE HAULING CARRIER. IN AND OUT TIMES AT SHIPPERS AND RECIVERS WILL NEED TO BE CONFIRMED BY SUCH TO VALIDATE ANY REQUEST. SAID REQUESTS MAY BE SUBJECT TO PROLONGED WAITING TIME FOR APPROVAL. ANY MISSED APPTS ARE NOT SUBJECT TO ADDITIONAL COMPENSATION, INCLUDING BUT NOT LIMITED TO MISSED APPTS THAT RESULT IN A "WORK IN" STATUS.

PLEASE NOTE: DRIVERS ARE NOT TO HEAD TO FACILITIES PRIOR TO CALLING IN FOR DISPATCH FROM ALLY LOGISTICS WHEN FULLY EMPTY. IF A DRIVER GOES TO A SHIPPER WITHOUT CALLING IN FOR DISPATCH, NO COMPENSATION WILL BE GIVEN FOR THIS BY ALLY LOGISTICS IN THE EVENT A LOAD IS CANCELED. THE SAME APPLIES FOR GOING TO A FACILITY PRIOR TO ALLY LOGISTICS CONFIRMING ALL APPOINTMENT TIMES FOR SHIPMENTS.

Acceptance Signature: _____ Date: _____

Shipper's No.

SCAC

Carrier's No.

applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to

from

Consigned to

Destination

State

County

zip

Delivery Address

Gasport, NY

Route

Delivering

Vehicle

Carrier

Description of Articles

Weight
(sub. to correction)Class
or Rate

ins

Empty B.m

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Subject to Section 7 of conditions, 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)

FREIGHT CHARGES:

Prepaid

☐

COD AMT

TOTAL CHARGES:

Collect On Delivery	and remit to
\$	

COD FEE:
\$

Prepaid	<input type="checkbox"/>
Collect	<input type="checkbox"/>

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NOTE: Where the rate is dependant on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby 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. § 4706(c)(1)(A) and (B).

Shipper:

Carrier: James H. King

Per: _____

Date:

Per:

Date:

STRAIGHT BILL OF LADING - ORIGINAL - NOT NEGOTIABLE

Shipper's No. _____

Carrier _____

SCAC _____

Carrier's No. _____

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 at applicable state and federal regulations.

at _____ date _____ from _____

to _____
 Consigned to _____
 Destination _____ State _____ County _____ Zip _____
 Delivery Address _____
 Route _____

14607 7577 Skylon Settlement Rd.
 Gasport, NY

Route _____

Delivering _____

Carrier _____

Vehicle Number _____

Number of Packages _____

Description of Articles _____

Weight (sub. to correction) _____

Class or Rate _____

104 Empty Bins

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignee, the consignor shall be responsible for the payment of freight and all other charges without payment of freight and all other charges.

 (Signature of Consignor)

FREIGHT CHARGES:

Prepaid ☐Collect ☐

COD AMT: \$ _____

TOTAL CHARGES: \$ _____

Collect On Delivery and remit to \$ _____

COD FEE: \$ _____

Prepaid ☐Collect ☐

\$ _____

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby 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).

Shipper: _____

Carrier: *James Davis*

Per: _____

Date: _____

Per: _____

Date: _____

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