



Bill to:
SWEET LOGISTICS LLC
PO BOX 120093,
GRAND RAPIDS,
MI,

Invoice Date: 06/14/2024
Invoice #: 0086191
Terms: NET 30
Due Date: 07/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		345 TOY WRIGHT RD, JEFFERSON GA 30549 - 4500 EMPEROR BLVD DURHAM NC 27703			
			1	\$850.00	\$850.00

TOTAL
\$850.00

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



Rate Confirmation Agreement for SWEET LOGISTICS

Rate shown includes any applicable fuel surcharges, pickup and delivery charges, loading and unloading, out of route, detention, storage, and/or all arbitrary charges etc. Deviation from these rates must be approved in writing and signed by both parties.

All carriers **MUST** accept Macropoint or Fourkites. Failure to do so will result in a \$250 fine.

Any authorized unloading will only be reimbursed with a valid unloading receipt.

Check calls must be made daily by 11 am EST or carrier will be charged a penalty fee of \$50 per day.

If pickup or delivery times are missed without prior notification to SWEET LOGISTICS, carrier will be subject to penalty charges of \$250 per occurrence. Additional late delivery charges assessed by the consignee may also apply.

In order to collect detention carrier must notify SWEET LOGISTICS, within 2 hours after appointment time of any delays. Late pick-ups or late deliveries are not eligible for detention charges. If facility is FCFS, detention will only be paid if carrier is loaded or unloaded outside of the regular pick-up or delivery hours.

If applicable, the arrival and departure times must be stamped and/or written on the BOL.

Driver is responsible for all load counts. If driver is not granted access to the loading dock they must call the broker to notify immediately.

Carrier acknowledges that they are solely responsible for compliance with all applicable HOS regulations, as well as all other FMCSA regulations.

No drivers are authorized to break seals under any circumstances. Seals must only be broken by the consignee's personnel. Loads delivered without the seals intact will result in fines and potential claims.

Carrier agrees this shipment will not be re-brokered or said carrier forfeits the right to collect charges and agrees SWEET LOGISTICS, may pay charges directly to the underlying carrier to collect charges and agrees.

Carrier representative submission with acceptance and signature indicates approval of all rates and terms listed on rate confirmation.

Please send all invoices to invoices@sweetlogistics.net

SWEET LOGISTICS

PO BOX 120093

GRAND RAPIDS, MI 49528

Sweet Logistics LLC
3050 Breton Rd SE
Grand Rapids, MI 49512
616-241-9200 x13016-241-9202



Load Confirmation

Page 1
0086191

Carrier: ROYAL3 INC
CHICAGO IL 60638
Date: 06/13/24

Contact:
Phone:
Fax:

Order
Order: 0086191
Miles: 337.0
Temp:
BOL: 883782428

Commodity: SWEET LOGISTICS
Weight: 40993.0
Trailer: Van (DAT)
Reference: 883782428

PU 1 Name: RECKITT BENCKISER Date: 06/13/24 0800
Address: 345 TOY WRIGHT RD 06/13/24 2100
JEFFERSON GA 30549 Contact: shiping
Phone: 706-693-3325 Driver Load: No driver loading or unload
Reference number: 11 RKBK
Reference number: 12 RCKTUSHYHO
Reference number: 6Y DRYVAN
Reference number: BM 00517008837824283
Reference number: CO 0021870076
Reference number: PO 8010678736
Reference number: SCA SWLS
Reference number: SI 8010678736
Reference number: ZZ SOLO

SO 2 Name: SP RICHARDS LCI - RALEIGH MFG Date: 06/14/24 0800
Address: 4500 EMPEROR BLVD
DURHAM NC 27703 Contact: UNKNOWN
Phone: Driver Load: No driver loading or unload
Reference number: CO 0021870076
Reference number: PO 8010678736
Reference number: SI 8010678736

Payment Carrier Freight Pay: \$850.00



Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

Special instructions:

Please Sign: *Milo Morrison*

Driver Name: julio perez

Driver Cell: 786-560-0612

Driver Email:

Tractor #: 759

Trailer #: H03250

☒ (X) Accept

☐ () Decline

Attention: Rory Gingrich

roryg@sweetlogistics.net



SHIP FROM

Name: ATLANTA WAREHOUSE
Address: 345 TOY WRIGHT ROAD
City/State/Zip: JEFFERSON, GA 30549



SHIP TO

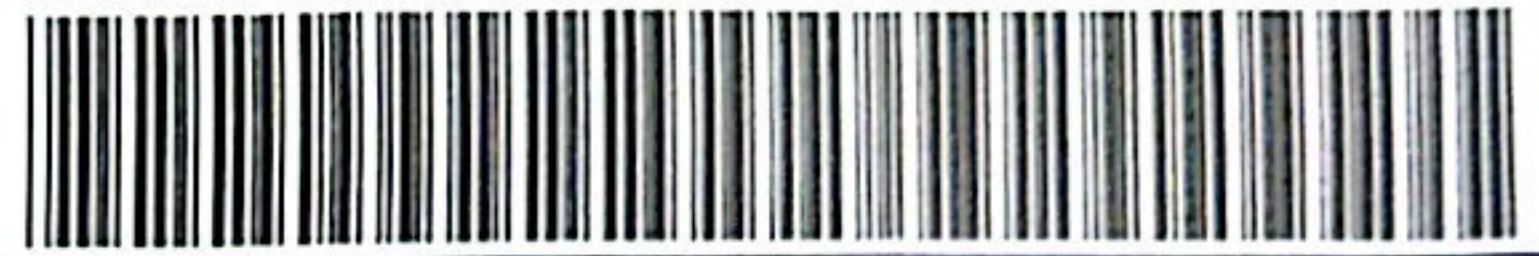
Name: SP RICHARDS LCI - RALEIGH MFG
Address: 4500 EMPEROR BLVD
City/State/Zip: DURHAM, NC 27703

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: RB C/O Transplace Accounts Payable
Address: PO Box 425
City/State/Zip: Lowell, AR 72745

Bill of Lading

00517008837824283



Carrier Sweet Logistics

Trailer: H03250

Billing Reference #883782428

Seal number(s): 62168

SCAC: SWLS

Pro Number: 00517008837824283

Pars Number:



Freight Charge Terms: (Charges are prepaid unless marked otherwise)

Prepaid

Collect

3rd Party ☒☐ (check box) Master Bill of Lading: with underlying Bills of Lading

SPECIAL INSTRUCTIONS: Master BOL: 00517008837824283

For OS&D email: RBOSD@chrobinson.com

Equipment Type	HAZMAT	Temp Requirement
<input checked="" type="checkbox"/> Dry Van	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> None
<input type="checkbox"/> Temp	<input checked="" type="checkbox"/> No	<input type="checkbox"/> 59-77 F

CUSTOMER ORDER INFORMATION

ORDER NUMBER / PO NUMBER	# Units/ Pallet	WEIGHT (LB)	Pallet/ Slip (Circle One)	ADDITIONAL SHIPPER INFO
8010678736 / 0021870076	4500/60	40995.00	Y N	RDD: 06/14/2024
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
GRAND TOTAL	4500/60	40995		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE	T		Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360	NMFC #	CLASS
60	WOOD			2880.00		WOOD Pallets		
		4500	CA-Case	40995.00		IMPREGNATED WIPES	49290-2	77.5
		0		0.00				
		0		0.00				
		0		0.00				
		0		0.00				
60		4500		43875		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 _____.

COD Amount:

Fee Terms:

Collect: ☐Prepaid: ☐Customer check acceptable: ☐

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

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

Signature

Receiver

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 DOT.

Trailer Loaded: Freight Counted:

☐ By Shipper☐ By Shipper☐ By Driver☐ 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

Driver: Printed Legibly

Carrier

Driver: Signature

Date Picked up

24 HOUR EMERGENCY CONTACT: CHS 1-800-424-9300 Reckitt Benckiser LLC. For details about certificates of compliance that may be required under section 102 of the consumer product safety improvement act of 2008 (15 U.S.C. SEC 2002(G)). Please visit /rbnainfo.com/CPA.php

SHIP FROM

Name: ATLANTA WAREHOUSE
Address: 345 TOY WRIGHT ROAD
City/State/Zip: JEFFERSON, GA 30549



SHIP TO

Name: SP RICHARDS LCI - RALEIGH MFG
Address: 4500 EMPEROR BLVD
City/State/Zip: DURHAM, NC 27703

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: RB C/O Transplace Accounts Payable
Address: PO Box 425
City/State/Zip: Lowell, AR 72745

Bill of Lading

00517008837824283



Carrier Sweet Logistics

Trailer: H03250

Billing Reference #883782428

Seal number(s): 62168

SCAC: SWLS

Pro Number: 00517008837824283

Pars Number:



Freight Charge Terms: (Charges are prepaid unless marked otherwise)

Prepaid

Collect

3rd Party ☒☐ (check box) Master Bill of Lading: with underlying Bills of Lading

SPECIAL INSTRUCTIONS: Master BOL: 00517008837824283

For OS&D email: RBOSD@chrobinson.com

Equipment Type	HAZMAT	Temp Requirement
<input checked="" type="checkbox"/> Dry Van	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> None
<input type="checkbox"/> Temp	<input checked="" type="checkbox"/> No	<input type="checkbox"/> 59-77 F

CUSTOMER ORDER INFORMATION

ORDER NUMBER / PO NUMBER	# Units/ Pallet	WEIGHT (LB)	Pallet/ Slip (Circle One)	ADDITIONAL SHIPPER INFO
8010678736 / 0021870076	4500/60	40995.00	Y N	RDD: 06/14/2024
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
/	0/0	0.00	Y N	
GRAND TOTAL	4500/60	40995		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT (LB) T	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
60	WOOD			2880.00		WOOD Pallets		
		4500	CA-Case	40995.00		IMPREGNATED WIPES	49290-2	77.5
		0		0.00				
		0		0.00				
		0		0.00				
		0		0.00				
60		4500		43875		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 _____.

COD Amount:

Fee Terms:

Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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

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

Signature

Receiver

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 DOT.

Trailer Loaded: Freight Counted:

☐ By Shipper☐ By Shipper☐ By Driver☐ 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 DOT emergency response guidebook or equivalent documentation in the vehicle.

Driver: _____
Printed Legibly

Carrier




Driver: _____
Signature

Date Picked up

24 HOUR EMERGENCY CONTACT: CHEMTEC 1-800-424-9300 Reckitt Benckiser LLC. For details about certificates of compliance that may be required under section 102 of the consumer product safety improvement act of 2008 (15 U.S.C. SEC. 2053(G)). Please visit: rbsinfo.com/CPSIA.php





SHIP FROM Name: ATLANTA WAREHOUSE Address: 345 TOY WRIGHT ROAD City/State/Zip: JEFFERSON, GA 30549 		Bill of Lading 00517008837824283 	
SHIP TO Name: SP RICHARDS LCI - RALEIGH MFG Address: 4500 EMPEROR BLVD City/State/Zip: DURHAM, NC 27703		Carrier Sweet Logistics Trailer: H03250 Billing Reference #883782428 Seal number(s): 62168	
THIRD PARTY FREIGHT CHARGES BILL TO: Name: RB C/O Transplace Accounts Payable Address: PO Box 425 City/State/Zip: Lowell, AR 72745		SCAC: SWLS Pro Number: 00517008837824283 Pars Number: 	
		Freight Charge Terms: (Charges are prepaid unless marked otherwise) Prepaid Collect 3rd Party <input checked="" type="checkbox"/>	
		<input type="checkbox"/> (check box) Master Bill of Lading: with underlying Bills of Lading	
SPECIAL INSTRUCTIONS: Master BOL: 00517008837824283		For OS&D email: RBOSD@chrobinson.com	
		Equipment Type	HAZMAT Temp Requirement
		<input checked="" type="checkbox"/> Dry Van <input type="checkbox"/> Temp	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> None <input type="checkbox"/> 59-77 F

CUSTOMER ORDER INFORMATION					
ORDER NUMBER / PO NUMBER	# Units/ Pallet	WEIGHT (LB)	Pallet/ Slip (Circle One)		ADDITIONAL SHIPPER INFO
8010678736 / 0021870076	4500/60	40995.00	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	RDD: 06/14/2024
/	0/0	0.00	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
/	0/0	0.00	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
/	0/0	0.00	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
/	0/0	0.00	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	
GRAND TOTAL		4500/60 40995			

CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	T		Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360	
60	WOOD	4500	CA-Case	2880.00		WOOD Pallets	
		0		0.00		IMPREGNATED WIPES	
		0		0.00			
		0		0.00			
		0		0.00			
60		4500		43875		GRAND TOTAL	

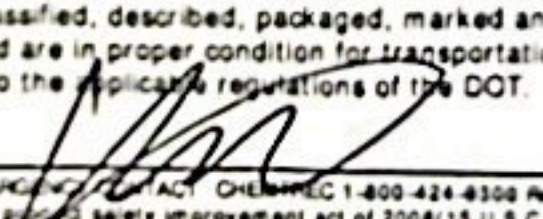
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RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all

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

Signature _____ Receiver

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 DOT. 	Trailer Loaded: Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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 DOT emergency response guidebook or equivalent documentation in the vehicle. Driver: _____ Carrier: _____ Driver: _____ Date Picked up: _____
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24 HOUR EMERGENCY CONTACT: CHEMREC 1-800-424-4300 Reckitt Benckiser LLC. For details about certificates of compliance that may be required under section 102 of the consumer product safety improvement act of 2008 (15 U.S.C. 2063 (G)). Please visit benkita.com/CPSIA.php