

**Bill to:**

Nolan Transportation Group
1735 Founders Parkway, Suite 300,
Alpharetta,
GA,
30004

Invoice Date: 06/26/2024

Invoice #: #7713579

Terms: NET 30

Due Date: 07/26/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/25/2024		209 Citation Court, Greensboro, NC 27409, USA - 1010 W John Beers Rd, Stevensville, MI 49127, USA			
			1	\$1,500.00	\$1,500.00

TOTAL
\$1,500.00

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

Nolan Transportation Group Rate Confirmation: **Load # 7713579**

Carrier Sales Rep: GRADY EDWARDS
P: (854) 800-6029
E: GRADY.EDWARDS@NTGFREIGHT.COM

After Hours Contact
P: (470) 964-2024

General Information	Equipment: 53FT Dry Van	Commodity: Dry Food	Total Weight (lbs): 13000
# Of Stops: 2	# Of PALLETS: 20	Packaging Type: PALLETS	Reference #'s: PO #: 1812
BL#:	CTR#:	MBOL#:	<u>Load Requirements:</u>

Origin Stop 1:

Carolina Fine Snacks
209 Citation Court,
Greensboro,NC 27409,USA

*All details are exclusive to stop 1

Ship Date: 06/25/24

Apt. Time: 10:00

Quantity: 20

Weight (lbs): 13000

Pickup #:

Appt #:

Stop Requirements:

Instructions:

Destination Stop 2:

JA Food Service
1010 W. John Beers Rd.,
Stevensville,MI 49127,USA
Business Hours: 08:00 - 14:00

*All details are exclusive to stop 2

Delivery Date: 06/26/24

Apt. Time: FCFS (see business hours)

Quantity: 20

Weight (lbs): 13000

Delivery #:

Appt #:

Stop Requirements:

Instructions:

Carrier Info

ROYAL3 INC (MC# 944686)

Dispatcher: robert

Phone: (630) 485-7370

Email: robert.j@ROYAL3INC.COM

Driver Name: Gabriel Silvio Osorio

Driver Phone: +1 (954) 324-5488

Truck: 756

Trailer: W22718

Rate Details

\$1500.00 Line Haul

\$1500.00 Total

CARRIER TERMS AND CONDITIONS CONTINUED: //FAX BACK THIS CONFIRMATION SIGNED & COMPLETED TO FAX # LOCATED ON BOTTOM RIGHT OF THIS CONFIRMATION.FOR DISPATCH, DRIVER MUST CALL NTG TO ACTIVATE PICK UP# //SHOULD A PROBLEM OR CHANGE ARISE AT ANY TIME, NOTIFY NTG IMMEDIATELY, 24 / 7.RATE IS FOR EXCLUSIVE TRUCK ONLY UNLESS STATED IN WRITING.ALL FREIGHT TRAILERS MUST BE 10 YEARS OR NEWER.DON'T SIGN FOR DAMAGED GOODS. NTG IS NOT RESPONSIBLE FOR OVERWEIGHT/ GROSS TRAILERS AFTER DRIVER HAS LEFT THE SHIPPER.IT IS CARRIER'S RESPONSIBILITY TO CONFIRM OR MAKE ANY NECESSARY APPOINTMENTS 24 HOURS IN ADVANCE, AND CONFIRM DELIVERY ADDRESS ON BILLS. IF DIFFERENT,CALL BOOKING OFFICE IMMEDIATELY FOR APPROVAL.ANY APPROVED CHANGES OR CHARGES MUST BE NOTED ON A NEW RATE CONFIRMATION SUPPLIED BY NTG.ALL LUMPERS AND / OR ASSESSORIAL FEES MUST BE PREAPPROVED BY NTG THROUGH A NEW RATE CONFIRMATION AND AN ORIGINAL RECEIPT SENT IN WITH CARRIER'S INVOICE IN ORDER TO BE REIMBURSED.DRIVER ASSIST AND FUEL SURCHARGE IS INCLUDED IN RATE.CARRIER REPRESENTS THERE ARE NO EXCLUSIONS IN THEIR INSURANCE POLICY THAT WOULD APPLY TO THE FREIGHT BEING TRANSPORTED. NTG DOES NOT ADVANCE FUNDS FOR ANY REASON.CARRIER SHALL COMPLY WITH ALL APPLICABLE FEDERAL, STATE, AND LOCAL LAWS AND REGULATIONS, AS WELL AS ALL ELD COMPLIANCE REGULATIONS.CONCERNING THE TRANSACTIONS CONTEMPLATED BY THIS AGREEMENT.THIS CONFIRMATION MUST BE SIGNED BY CARRIER AND RECEIVED BACK BY OURBOOKING OFFICE FOR PAYMENT.

ALL ACCESSORIALS MUST BE REQUESTED, WITH ALL RECEIPTS UPLOADED WITHIN 48 HOURS OF DELIVERY

Double Brokering this load will cause this contract to become Null &Void. Double Brokering is strictly prohibited!

Signature_____ Position_____ Date_____

Carrier Signature_____ Position_____ Date_____

Driver Name_____ Driver Cell_____

Tractor #_____ Trailer#_____

By doing business with NTG you fully agree with the terms and conditions listed herein and the terms and conditions listed in the NTG Broker-Carrier Agreement.

NTG LOAD # 7713579 MUST BE INCLUDED ON YOUR INVOICE WITH A COPY OF THE P.O.D! Invoices will not be paid without a P.O.D!

SEND ALL INVOICES and PODS TO: 400 Northridge, Suite 1000, Atlanta, GA 30350 POD@NTGFREIGHT.COM, or Fax to 678-569-1059. **WANT TO GET PAID FASTER?** NTG's exclusive carrier payment program offers permanent Net-1 & Net-2 day terms for a nominal fee. Learn more by contacting your carrier Carrier Sales Representative or visiting <http://www.NTGfreight.com/Carriers> . Broker agreement & rate confirmation must be completed, signed, and on file for payment on this load. 200.00 WILL BE DEDUCTED FROM RATE IF POD IS NOT IS NOT RECEIVED WITHIN 48 HOURS OF SCHEDULED DELIVERY, OR IF THIS RATE CONFIRMATION IS USED AS A POD!

400 Northridge, Suite 1000, Atlanta, GA 30350

Nolan Transportation Group Rate Confirmation: **Load # 7713579**

CARRIER CONFIRMATION

Rate confirmation continued (page 2 / 2)

Commodity: perishable

1. Loads quoted as per bag are based on 850 bags. Any change in quantity will result in a different rate.
2. Loads quoted by CWT are based on 43000 lbs of product weight, any change will result in a different rate.
3. Driver responsible for count unless otherwise stated.
4. Driver must maintain reefer at temperature per bill of lading.
5. This is a produce load, pulp all product and record temperature on bill of lading.
6. Driver must call when loaded and check call daily before 10am or a fine of 100 dollars may be levied.
7. In the event of a shortage or damage NTG must be notified immediately or carrier assumes all responsibility for OSD.
8. Detention is on a per load basis, NTG not responsible for acts of God such as rain, hurricanes or other that may affect loading or unloading.
9. All carriers agree by signing this that they are CARB compliant and assume all responsibility thereof.
10. Unloading is the responsibility of the driver unless otherwise agreed to with NTG.
11. For flatbeds, onions will be rated on a per bag rate and need tarps unless otherwise stated.
12. Temperature sensitive foods may only be transported in equipment designed to maintain the proper temperature and normally functioning during transit.
13. Temperature requirements will be specified on the Bill-of-Lading (BOL), if required. Carrier must maintain the specified temperature throughout transit and be able to provide adequate measures to show the temperature was properly maintained.
14. For Less-than Trailer Load (LTL) shipments, appropriate measures must be taken to ensure that there is no cross-contamination or cross - contact with chemicals or allergens.
15. All personnel engaged in transportation operations for the Carrier must be properly trained and records of the training must be maintained.
16. Carrier must be able to provide records that demonstrate compliance with the Rule within 24-hours of request by NTG.
17. Vehicles provided for food transportation must be in sanitary condition prior to loading, must not have signs of pests, debris, foul odors, or spills, and must be free of damage that could lead to adulteration of food i.e. holes, leaks).
19. NTG must immediately be notified of any issue found that could compromise the integrity of the load.

Initial: _____

By doing business with NTG you fully agree with the terms and conditions listed herein and the terms and conditions listed in the NTG Broker-Carrier Agreement.

Please include our load number on your invoice with a copy of the proof of delivery. Invoices will not be paid without a P.O.D.!

SEND ALL INVOICES and PODS TO: 400 Northridge, Suite 1000, Atlanta, GA 30350 POD@NTGFREIGHT.COM, or Fax to 678-569-1059. **WANT TO GET PAID FASTER?** NTG's exclusive carrier payment program offers permanent Net-1 & Net-2 day terms for a nominal fee. Learn more by contacting your carrier Carrier Sales Representative or visiting <http://www.NTGFreight.com/Carriers>. Broker agreement & rate confirmation must be completed, signed, and on file for payment on this load. 200.00 WILL BE DEDUCTED FROM RATE IF POD IS NOT RECEIVED WITHIN 48 HOURS OF SCHEDULED DELIVERY, OR IF THIS RATE CONFIRMATION IS USED AS A POD!

1735 Founders Pkwy Suite 300, Alpharetta, GA 30009 TEL (678) 942-9666 FAX (770) 509-9612

Find Loads, Book Loads, Get Paid Fast.

beon Carrier

Beon Carrier gives you visibility and control of your business. Take advantage of enhanced load board features, rate visibility, bid and book options, real-time 1 Day and 2 Day payments and document management - all in one place!

Find Loads Hassle-free

Leverage lane preferences in Beon Carrier to receive optimized load options. With expanded equipment availabilities, carriers have access to a wide range of load preference selections.

Submit Bids & Book Loads

With Beon Carrier, you can view all relevant load details, such as loading hours, appointment times and weight information. Then, submit a bid on the load you want and book it with a single click.

Easy Tender Acceptance

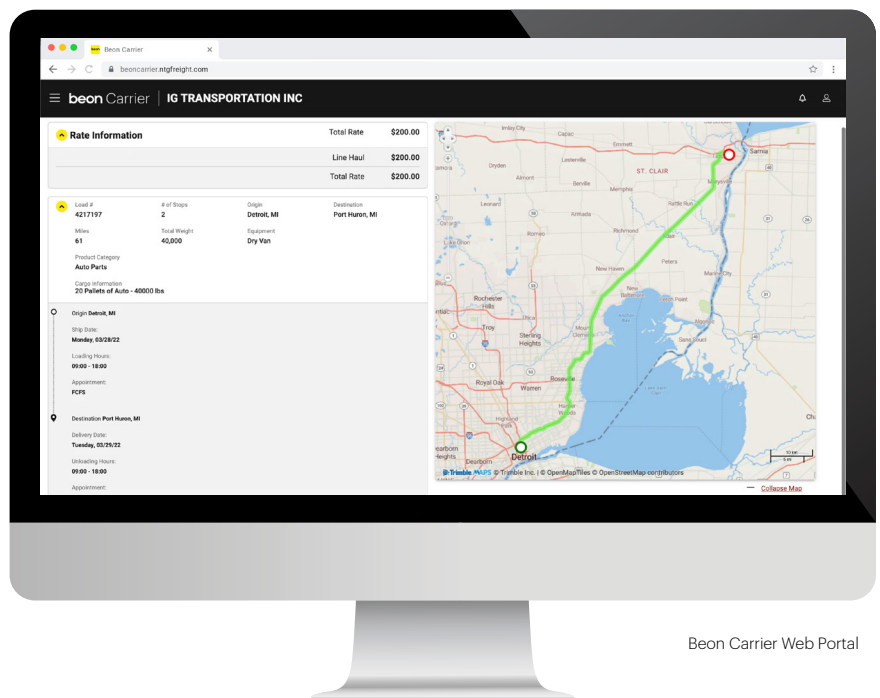
Beon Carrier makes it simple to manage your available tenders. Easily accept or decline freight tenders with the click of a button. For shipments specifically matched for you, simply accept, decline or submit a counteroffer from the tender section within Beon Carrier.

Get Paid Fast

Get paid faster with Beon Carrier – use our 1 Day and 2 Day Payment options that deposit cash directly into your checking account. Access load payment status and receive 24/7 support for any payment inquiries.

Manage Documents with Ease

Easily manage loads within Beon Carrier by uploading a picture of shipment documents. With this feature, your shipments and accessorials will be processed quickly.



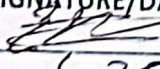
Beon Carrier Web Portal

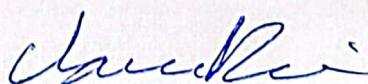
LOG IN TODAY

Don't have an account? **Register** to get started!

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DATE: 6/25/2024		BILL OF LADING		
SHIP FROM:		Bill of Lading Number: 2024-0625-01		
Name: LOVE YOUR HEALTH FOODS, LLC Address: 209 Citation Court City/State/Zip: Greensboro, NC 27409 Phone: 336-605-0773		Carrier Name: Trailer Number: Seal Number: ULINE-1626941		
SHIP TO:		SHIPPER LABEL		
Name: JA Foodservice Corp Address: 1010 W John Beers Rd City/State/Zip: Stevensville, MI 49127 Phone: 269-695-5600				
THIRD PARTY FREIGHT CHARGES BILL TO		Freight Terms: Prepaid <input type="checkbox"/> Check Collect <input checked="" type="checkbox"/> Check 3rd Party <input type="checkbox"/> Check PO#: 1812		
Name: Address: City/State/Zip: Phone: Account:				
SPECIAL INSTRUCTIONS:				
NO. SHIPPING UNITS	COMMODITY DESCRIPTION	LOT CODES	CLASS	WEIGHT
600	Dry Roasted Soy Nuts 280ct	32 @ LYH4123		
	20 PALLETS @ 30	36 @ LYH4124		
		49 @ LYH4127		
		51 @ LYH4128		
		45 @ LYH4129		
		43 @ LYH4130		
		30 @ LYH4165		
	DO NOT DOUBLE STACK!!	46 @ LYH4166		
	DO NOT BREAK STRECH WRAP!	49 @ LYH4169		
		47 @ LYH4170		
		46 @ LYH4171		
		49 @ LYH4172		
600 TOTAL CASES	***TOTAL WEIGHT INCLUDED PALLETS*** (20 PALLETS)	49 @ LYH4173	28 @ 4176	13,000 LBS.
RECEIVED subject to the classification and tariffs in effect on the date of the issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of packages unknown), marked consigned and destined as indicated above which said carrier (the word carrier being understood through this contract as meaning any person or corporation in possession of the property under contract) agrees to carry to its usual place of delivery as said destination. if on its route, otherwise to deliver to another carrier on the route to said destination. it is mutually agreed as to each carrier of all or any of said property, over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the Bill of Lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the Bill of Lading terms and conditions in the governing classification and the said terms and conditions.				
SHIPPER SIGNATURE/DATE		CARRIER SIGNATURE/PICKUP DATE		
Shipper: Date: 6-25-24		Driver Name: _____ Carrier: _____ Date: _____		

DATE: 6/25/2024		BILL OF LADING		
SHIP FROM:		Bill of Lading Number:		
Name: LOVE YOUR HEALTH FOODS, LLC		2024-0625-01		
Address: 209 Citation Court		Carrier Name:		
City/State/Zip: Greensboro, NC 27409		Trailer Number:		
Phone: 336-605-0773		Seal Number: ULINE-1626941		
SHIP TO:		SHIPPER LABEL		
Name: JA Foodservice Corp				
Address: 1010 W John Beers Rd				
City/State/Zip: Stevensville, MI 49127				
Phone: 269-695-5600				
THIRD PARTY FREIGHT CHARGES BILL TO		Freight Terms:		
Name:		Prepaid <input type="checkbox"/> Check Collect <input checked="" type="checkbox"/> Check 3rd Party <input type="checkbox"/> Check		
Address:		PO#: 1812		
City/State/Zip:				
Phone:				
Account:				
SPECIAL INSTRUCTIONS:				
NO. SHIPPING UNITS	COMMODITY DESCRIPTION	LOT CODES	CLASS	WEIGHT
600	Dry Roasted Soy Nuts 280ct	32 @ LYH4123		
	20 PALLETS @ 30	36 @ LYH4124		
		49 @ LYH4127		
		51 @ LYH4128		
		45 @ LYH4129		
		43 @ LYH4130		
		30 @ LYH4165		
	DO NOT DOUBLE STACK!!	46 @ LYH4166		
	DO NOT BREAK STRECH WRAP!	49 @ LYH4169		
		47 @ LYH4170		
		46 @ LYH4171		
		49 @ LYH4172		
600 TOTAL CASES	***TOTAL WEIGHT INCLUDED PALLETS*** (20 PALLETS)	49 @ LYH4173	28 @ 4176	13,000 LBS.
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SHIPPER SIGNATURE/DATE		CARRIER SIGNATURE/PICKUP DATE		
Shipper: 		Driver Name: _____		
Date: 6-25-24		Carrier: _____ Date: _____		



9/26/24