

**Bill to:**

KCH TRANSPORTATION, INC.  
6695 PEACHTREE INDUSTRIAL BLVD,  
Atlanta,  
GA,  
30301

Invoice Date: 06/29/2024

Invoice #: 8820907

Terms: NET 30

Due Date: 07/29/2024

| Date       | Customer Ref # | Origin - Destination   | Quantity | Rate       | Amount     |
|------------|----------------|--|----------|------------|------------|
| 06/28/2024 |                | 242 Westfork Court, Suite A, Lithia Springs, GA US 30122 - 900 Convention Center Way, NEW ORLEANS, LA US 70130 |          |            |            |
|            |                |  | 1        | \$1,500.00 | \$1,500.00 |

|              |
|--------------|
| <b>TOTAL</b> |
| \$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**

## Carrier Rate and Load Confirmation



KCH Transportation, Inc.  
1208 King Street Suite 320  
Chattanooga, TN 37403  
Christian Valdivia  
(404) 797-9429 (phone)  
cvaldivia@kchtrans.com

**Load Number:** 8820907

**Date:** 06/28/2024

**Equipment Type:** Dry Van 53'

**Cargo Summary:** 1 trade show, 35000 lbs

**Carrier:** ZIGI FREIGHT INC

**Contact:** Joey, (p) (f)

**Bill of Lading Number:** 378280920

**Customer Reference Number:** essence 8am

### Shipper Pickup (Stop 1)

RPM  
242 Westfork Court, Suite A  
Lithia Springs, GA US 30122  
**Expected Date:** 06/28/2024  
**Appointment Required:** Yes  
**Appointment Time:** 08:00

**Shipper References:**  
**Instructions:**  
**Pickup/Delivery Number:**

### Consignee Delivery (Stop 2)

New Orleans Conv Ctr  
900 Convention Center Way  
NEW ORLEANS, LA US 70130  
**Expected Date:** 06/29/2024  
**Shipping/Receiving Hours:** 06:00-07:00  
**Appointment Required:** No

**Consignee References:**  
**Instructions:**  
**Pickup/Delivery Number:**

### Shipment Information

| Handling Unit |      | Package |      |           |                       |
|---------------|------|---------|------|-----------|-----------------------|
| Qty           | Type | Qty     | Type | Weight    | Commodity Description |
| 1             |      |         |      | 35000 lbs | trade show            |

### Carrier Fees

| Description         | Cost         |
|---------------------|--------------|
| Net Freight Charges | USD 1,500.00 |
| Total Cost          | USD 1,500.00 |

RATE CONFIRMATION AGREEMENT FOR KCH TRANSPORTATION, INC.

- The 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 KCH loads are dedicated shipments unless otherwise specified.
- Any unauthorized unloading will only be reimbursed with a valid unloading receipt.
- Check calls must be made daily by 9 am EST or the carrier will be charged a penalty of \$100 per day.
- If pickup or delivery times are missed, the carrier will be subject to penalty charges of up to \$250 rate deduction per occurrence. Additional late delivery charges assessed by the consignee may also apply.
- To collect detention carrier must notify KCH TRANSPORTATION, INC within 2 hours after the appointment time of any delays. Late pick-ups or late deliveries are not eligible for detention charges. If a facility is FCFS, detention will only be paid if the 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.
- All refrigerated loads must be run continuously unless otherwise stated.
- All Comchecks issued are subject to a 3% Admin Fee.
- The driver is responsible for all load counts. If the driver is not granted access to the loading dock, they must call the broker to notify them immediately.
- Driver must pulp product before leaving shipper. (Bulk Shipments Only)
- Failure to accept and maintain load tracking may result in a \$250 rate deduction.
- Any directions given to the carrier are for informational purposes only.
- 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 KCH TRANSPORTATION, INC. 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.
- POD & backup docs must be submitted to **POD@kchtrans.com** within 24 hours of delivery or a deduction of \$100.00 will be taken from the carrier rate.

**All Carrier Payments are now processed through TriumphPay.com**

Please register online in order to receive payments:

1. Go to [www.secure.TriumphPay.com](http://www.secure.TriumphPay.com)
2. Register your company
3. Connect with **KCH Transportation, Inc.**
4. Add your payment information
5. Control your money!

Login to TriumphPay.com to set up your default payment method.

**Todos los pagos del operador ahora se procesan a través de TriumphPay.com**

Regístrese en línea para recibir pagos:

1. Ir a [www.secure.TriumphPay.com](http://www.secure.TriumphPay.com)
2. Registre su empresa
3. Conéctese con **KCH Transportation, Inc.**
4. Agregue su información de pago
5. ¡Controla tu dinero!

Inicie sesión en TriumphPay.com para configurar su método de pago predeterminado.

**For Quick Pay please send your paperwork to [payments@kchtrans.com](mailto:payments@kchtrans.com)**

**Please send all invoices and supporting documents to [billing@kchtrans.com](mailto:billing@kchtrans.com) for payment processing.**

*Pay terms begin once KCH Transportation has received a carrier invoice, legibly signed proof of delivery, and all other supporting documents.*

**KCH TRANSPORTATION, INC.**  
**1208 King Street, Suite 320**  
**Chattanooga, TN 37403**  
**(770) 962-6829**  
**[www.kchtrans.com](http://www.kchtrans.com)**



TRANSIT TIME: Overnight ☐ 2 Day ☐ 3-5 Days ☐ 5-7 Days ☐

28228

TIME IN: \_\_\_\_\_

Carrier \_\_\_\_\_

**rpm**  
X P O

**EXCEEDING YOUR  
EXPECTATIONS**

**BILL OF LADING  
TRANSPORTATION  
AGREEMENT**

TRACKING NO.

**Instructions:** Complete all areas legibly in Ink. Return all copies to the RPM Service Center once all materials are packed, labeled and ready for shipment.

IS THIS A SPLIT SHIPMENT? YES ☐ NO ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Date Prepared: \_\_\_\_\_

|  |                    |  |                    |
|--|--------------------|--|--------------------|
| <b>FROM:</b> Show Name <u>ESSENCE FESTIVAL</u> |                    | <b>TO:</b> Show Name <u>ESSENCE FESTIVAL</u>       |                    |
| Exhibiting Company <u>RPM XPO</u>              | Booth Number _____ | Consignee <u>ERNEST N. MORAL CC.</u>               | Booth Number _____ |
| Facility/Show <u>RPM XPO WUSE</u>              |                    | C/O <u>RPM XPO</u>                                 |                    |
| Facility/Address <u>242 WESTFORK CT</u>        |                    | Facility/Address <u>900 CONVENTION CENTER BLVD</u> |                    |
| Address - cont. _____                          |                    | Address - cont. _____                              |                    |
| City <u>LITHIA SPRINGS</u>                     |                    | City <u>NEW ORLEANS</u>                            |                    |
| State <u>GA.</u> ZIP <u>30122</u>              |                    | State <u>LA.</u> ZIP <u>70130</u> Phone _____      |                    |

**Please note:** By accepting this Bill of Lading, RPMXPO assumes no responsibility for shipments left in booth by exhibitor. All materials are subject to final count and correction at time of actual removal from booth.

| No. Pcs. | Description of Articles / Exceptions                   | Weight   | SPECIAL INSTRUCTIONS  |
|----------|--|--|---|
|          | Crates Exhibit Material (Wooden) <u>SEAL # 4776930</u> |  | No shipment will be delivered without pre-payment arrangements.                           |
|          | Cartons <u>PHONE # 551-444-2340</u>                    |  |   |
|          | Cases/Trunks (Fiber) - Color                           |  |   |
|          | Skids/Pallets  |  |   |
| <u>1</u> | Carpet - Color <u>AIRLE CARPET TUXEDO BLUE JAY</u>     | <u>35000</u>   | <b>ST / OT</b><br>Overtime will be charged at a rate of 25% of Material Handling charges. |
| <u>1</u> | <b>TOTAL PIECES</b>                                    | <b>TOTAL WEIGHT SUBJECT TO VERIFICATION AND CORRECTION</b> <u>35,000</u> |   |
|          |  |  | RE-ROUTE <input type="checkbox"/> Common Carrier  |

In the event your designated carrier fails to show by

Date \_\_\_\_\_ Time \_\_\_\_\_

your freight will be re-routed via the carrier designated by RPM. Payment must be arranged before delivery or 25% of freight charges will be added for storage and handling.

**AUTHORIZATION FOR SERVICES  
IMPORTANT! PLEASE READ CAREFULLY:**

You are entering a contract which defines the respective responsibilities and liabilities of the parties involved. Terms and conditions of the contract are on the reverse side of this form. Exhibitor's/Exhibitor Agent's signature indicates authorization for RPM to provide transportation services, correctness of above information and agreement to terms of contract. Exhibitor agrees that payment for these services will not be withheld due to a pending claim or claim or litigation caused by delay, loss or damage to shipped goods documented above. Payment must be arranged in advance to guarantee delivery of freight.

Exhibitor (print) \_\_\_\_\_ On-Site Rep Phone (MUST HAVE) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Charges Prepaid ☐

Bill To: ☐

Exhibitor Company Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP \_\_\_\_\_

On shipments where RPM is listed as carrier, freight charges are guaranteed by exhibiting company. Credit card guarantee required, either by credit card on file or newly submitted credit card.

Above listed articles received in good order, except as noted.

Carrier (print) \_\_\_\_\_

Driver (print) \_\_\_\_\_

Signature \_\_\_\_\_

Date 6/20/24

LOADED BY: CHRIS

TRAILER #: PTL2 241144

START TIME: \_\_\_\_\_

FINISH TIME: \_\_\_\_\_

WHITE - RPM

YELLOW - DRIVER

PINK - CONTROL

GOLD - EXHIBITOR

Rev 012715



## SHIP FROM

Name: RPM  
Address: 242 Westfork Court, Suite A  
City/State/Zip: Lithia Springs GA 30122  
Expected Ship Date: 06/28/2024  
Shipping Hours: 08:00-12:00  
Appointment Time: 08:00  
Instructions:  
Pickup/Delivery Number:  
Shipping/Receiving Contact:

## SHIP TO

Name: New Orleans Conv Ctr  
Address: 900 Convention Center Way  
City/State/Zip: NEW ORLEANS LA 70130  
Expected Delivery Date: 06/29/2024  
Receiving Hours: 06:00-07:00  
Instructions:  
Pickup/Delivery Number:  
Shipping/Receiving Contact:

## THIRD PARTY FREIGHT CHARGES BILL TO

Name:  
Address:  
City/State/Zip:

SPECIAL INSTRUCTIONS:

**KCH**  
Transportation

Bill of Lading: 378280920

Load Number: 8820907  
Equipment Type: Dry Van 53'  
Customer Reference Number: essence 8am  
Carrier Name: ZIGI FREIGHT INC  
Carrier SCAC: ZFIH  
Quote/Contract Id: PTLZ 241144

Container Number: TBD1

Freight Charge Terms (freight charges are prepaid unless marked otherwise):

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ Third Party X☐ Master Bill of Lading: with attached underlying Bills of Lading

PHONE # 551.444.2280

## CUSTOMER ORDER INFORMATION

| CUSTOMER ORDER NUMBER | # PKGS | WEIGHT     | PALLET/SLIP | ADDITIONAL SHIPPER INFO |
|-----------------------|--------|------------|-------------|-------------------------|
|                       |        | 35,000 lbs | Y N         |                         |
| GRAND TOTAL           |        | 35,000 lbs |             |                         |

## CARRIER INFORMATION

| HANDLING UNIT |      | PACKAGE |      |            |                       |
|---------------|------|---------|------|------------|-----------------------|
| QTY           | TYPE | QTY     | TYPE | WEIGHT     | COMMODITY DESCRIPTION |
| 1             |      |         |      | 35,000 lbs | trade show            |
| 1             |      |         |      | 35,000 lbs | 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

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: 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.

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



TRANSIT TIME: Overnight ☐ 2 Day ☐ 3-5 Days ☐ 5-7 Days ☐ 20220

TIME IN: \_\_\_\_\_

Carrier \_\_\_\_\_

**rpm**  
X P O

**EXCEEDING YOUR  
EXPECTATIONS**

**BILL OF LADING  
TRANSPORTATION  
AGREEMENT**

TRACKING NO. \_\_\_\_\_

**Instructions:** Complete all areas legibly in ink. Return all copies to the RPM Service Center once all materials are packed, labeled and ready for shipment.

IS THIS A SPLIT SHIPMENT? YES ☐ NO ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ Date Prepared: \_\_\_\_\_

|  |                    |  |                    |
|--|--------------------|--|--------------------|
| <b>FROM:</b> Show Name <u>ESSENCE FESTIVAL</u> |                    | <b>TO:</b> Show Name <u>ESSENCE FESTIVAL</u>       |                    |
| Exhibiting Company <u>RPM XPO</u>              | Booth Number _____ | Consignee <u>ERNEST N. MORAL C.C.</u>              | Booth Number _____ |
| Facility/Show <u>RPM XPO WISE</u>              |                    | C/O <u>RPM XPO</u>                                 |                    |
| Facility/Address <u>242 WESTFORK CT</u>        |                    | Facility/Address <u>900 CONVENTION CENTER BLVD</u> |                    |
| Address - cont. _____                          |                    | Address - cont. _____                              |                    |
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| State <u>GA.</u> ZIP <u>30122</u>              |                    | State <u>LA.</u> ZIP <u>70130</u> Phone _____      |                    |

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|----------|--|---------------|---|
|          | Crates Exhibit Material (Wooden) <u>SEAL # 4776930</u>     |               | No shipment will be delivered without pre-payment arrangements.                           |
|          | Cartons <u>PHONE # 551-444-2380</u>                        |               |   |
|          | Cases/Trunks (Fiber) - Color                               |               |   |
|          | Skids/Pallets  |               |   |
| 1        | Carpet - Color <u>AIRLE CADET TUXEDO BLUE JAY</u>          | 35000         | <b>ST / OT</b><br>Overtime will be charged at a rate of 25% of Material Handling charges. |
| 1        | <b>TOTAL PIECES</b>  | <b>35,000</b> |   |
|          | <b>TOTAL WEIGHT SUBJECT TO VERIFICATION AND CORRECTION</b> |               | <b>RE-ROUTE</b> _____<br><input type="checkbox"/> Common Carrier                          |

In the event your designated carrier fails to show by  
**Date** \_\_\_\_\_ **Time** \_\_\_\_\_  
 your freight will be re-routed via the carrier designated by RPM.  
 Payment must be arranged before delivery or 25% of freight charges  
 will be added for storage and handling.

**AUTHORIZATION FOR SERVICES  
IMPORTANT! PLEASE READ CAREFULLY:**

You are entering a contract which defines the respective responsibilities and liabilities of the parties involved. Terms and conditions of the contract are on the reverse side of this form. Exhibitor's/Exhibitor Agent's signature indicates authorization for RPM to provide transportation services, correctness of above information and agreement to terms of contract. Exhibitor agrees that payment for these services will not be withheld due to a pending claim or claim or litigation caused by delay, loss or damage to shipped goods documented above. Payment must be arranged in advance to guarantee delivery of freight.

Exhibitor (print) \_\_\_\_\_ On-Site Rep Phone (MUST HAVE) \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**Charges Prepaid** ☐ **Bill To:** \_\_\_\_\_

Exhibitor Company Name \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

On shipments where RPM is listed as carrier, freight charges are guaranteed by exhibiting company. Credit card guarantee required, either by credit card on file or newly submitted credit card.

Above listed articles received in good order, except as noted.

Carrier (print) ZIGI FREIGHT INC Driver (print) \_\_\_\_\_  
 Signature [Signature] Date 6/29/24

LOADED BY: CHRIS

TRAILER #: PTL2 241144

START TIME: \_\_\_\_\_

FINISH TIME: \_\_\_\_\_

WHITE - RPM

YELLOW - DRIVER

PINK - CONTROL

GOLD - EXHIBITOR

CS Scanned with CamScanner

Received: David RPMXPO  
 Allard

6/29/24



Date: 06/28/2024

## BILL OF LADING

Page 1

## SHIP FROM

Name: RPM  
Address: 242 Westfork Court, Suite A  
City/State/Zip: Lithia Springs GA 30122  
Expected Ship Date: 06/28/2024  
Shipping Hours: 08:00-12:00  
Appointment Time: 08:00  
Instructions:  
Pickup/Delivery Number:  
Shipping/Receiving Contact:

## SHIP TO

Name: New Orleans Conv Ctr  
Address: 900 Convention Center Way  
City/State/Zip: NEW ORLEANS LA 70130  
Expected Delivery Date: 06/29/2024  
Receiving Hours: 06:00-07:00  
Instructions:  
Pickup/Delivery Number:  
Shipping/Receiving Contact:

## THIRD PARTY FREIGHT CHARGES BILL TO

Name:  
Address:  
City/State/Zip:

SPECIAL INSTRUCTIONS:

**KCH**  
Transportation

Bill of Lading: 378280920

Load Number: 8820907  
Equipment Type: Dry Van 53'  
Customer Reference Number: essence 8am  
Carrier Name: ZIGI FREIGHT INC  
Carrier SCAC: ZFIH  
Quote/Contract Id: PLZ 241144

Container Number: TBD1

Freight Charge Terms (freight charges are prepaid unless marked otherwise):

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ Third Party X

Master Bill of Lading: with attached  
underlying Bills of Lading

PHONE # 551.444.2280

## CUSTOMER ORDER INFORMATION

| CUSTOMER ORDER NUMBER | # PKGS | WEIGHT     | PALLET/SLIP | ADDITIONAL SHIPPER INFO |
|-----------------------|--------|------------|-------------|-------------------------|
|                       |        | 35,000 lbs | Y           | N                       |
| GRAND TOTAL           |        | 35,000 lbs |             |                         |

## CARRIER INFORMATION

| HANDLING UNIT |      | PACKAGE |      | WEIGHT     | COMMODITY DESCRIPTION |
|---------------|------|---------|------|------------|-----------------------|
| QTY           | TYPE | QTY     | TYPE |            |                       |
| 1             |      |         |      | 35,000 lbs | trade show            |
| 1             |      |         |      | 35,000 lbs | GRAND TOTAL           |

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

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## SHIPPER SIGNATURE / DATE

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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.

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



# 551.444.2280 250459  
DOCK ACCESS PASS

TODAY'S DATE 6/29/24

EVENT ESSENCE

GENERAL CONTRACTOR RPM

YARD MASTER D. Vaughn

TRUCKING CO. Royal 3

DRIVER # 2

PLATE # P1066193 IL

DRIVER NAME George

LICENSE # N/A

DOCK/ BAY # B

BOOTH # DECO

MCC TIME IN MCC TIME OUT