

**Bill to:**

TRANCO GLOBAL  
5901 SHALLOWFORD RD STE 104,  
Chattanooga,  
TN,  
37421

Invoice Date: 07/02/2024

Invoice #: 0057199

Terms: NET 30

Due Date: 08/02/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/01/2024		8305 Stayton Dr, JESSUP, MD 20794 - 9735 Patriot Blvd, Suite B, LADSON, SC 29456			
			1	\$1,000.00	\$1,000.00

TOTAL
\$1,000.00

**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**

\*\*\* Load Confirmation \*\*\*



Page 1

0057199

<b>Carrier:</b>	ROYAL3 INC			<b>Contact:</b>	RIKI KOVACEVIC
	CHICAGO	IL	60638	<b>Phone:</b>	630-485-7370
<b>Date:</b>	07/01/2024			<b>Fax:</b>	630-485-6980

<b>Order:</b>	0057199	<b>Commodity:</b>	FREIGHT ALL KINDS
<b>Miles:</b>	540.0	<b>Weight:</b>	10000.0
<b>Temp:</b>		<b>Trailer:</b>	Van (DAT)
<b>BOL:</b>	INVT transfer #320011132	<b>Reference:</b>	

<b>PU 1</b>	Name:	EASTLAND FOOD CORPORATION (MD)		Date:	07/01/2024 0800
	Address:	8305 Stayton Dr			07/01/2024 1200
				Contact:	
		JESSUP	MD 20794	Drvr Ld/Unld:	No driver loading or unload
	Phone:				

SO 2	Name:	EASTLAND FOOD CORPORATION (SC)		Date:	07/02/2024 0800
	Address:	9735 Patriot Blvd			07/02/2024 0900
		Suite B		Contact:	
		LADSON	SC 29456	Drvr Ld/Unld:	No driver loading or unload
	Phone:				

<b>Payment</b>	<b>Carrier Freight Pay:</b>	<b>\$1,000.00</b>
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**Total Carrier Pay:** \$1,000.00

Please sign, date and return to - <b>KayeLea Dearmon</b>	Signature: <i>Kelly Ivanovic</i>	Date:
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## Agreement

**Rate confirmation must be signed and emailed to broker before load will be tendered to carrier.**

- This load may not be double brokered.
- All overage, shortage, and/or damage must be reported to Tranco National immediately, at the time of occurrence, and noted on the bill of lading.
- Carrier must report any delays or interruptions immediately
- If any delay exists Carrier must call Tranco National (1) hour after time of scheduled appointment and report a delay.
- Detention time will begin (2) hours after scheduled appointment time.

- **Dispatch Load Number** (EX. 200001) must appear on all Invoices. All invoices are to be emailed to [ap@tranconational.com](mailto:ap@tranconational.com)

Dispatch Email Address: [dispatch@tranconational.com](mailto:dispatch@tranconational.com)

Dispatch Phone Number: 423-803-4800

**Failure to submit Proof of Delivery within 7 days will result in a \$200.00 reduction in carrier pay.**

## Instructions

Special instructions here

Please sign, date and return  
to - **KayeLea Dearmon**

Signature:

Date:

### Agreement

**Rate confirmation must be signed and emailed to broker before load will be tendered to carrier.**

- This load may not be double brokered.
- All overage, shortage, and/or damage must be reported to Tranco National immediately, at the time of occurrence, and noted on the bill of lading.
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**- Dispatch Load Number** (EX. 200001) must appear on all Invoices. All invoices are to be emailed to ap@tranconational.com

Dispatch Email Address: [dispatch@tranconational.com](mailto:dispatch@tranconational.com)

Dispatch Phone Number: [423-803-4800](tel:423-803-4800)

**Failure to submit Proof of Delivery within 7 days will result in a \$200.00 reduction in carrier pay.**

June 27, 2024

## BILL OF LADING - SHORT FORM - NOT NEGOTIABLE

Page 1 of 1

PICK UP		Bill of Lading Number:		
EASTLAND FOOD CORPORATION (MD) 8305 Stayton Dr Jessup, MD 20794		INVT transfer #320011132 Co-load: 320011135		
DELIVERY				
EASTLAND FOOD CORPORATION (SC) 9735 Patriot Blvd Ladson, SC 29456				
THIRD PARTY FREIGHT CHARGES BILL TO				
TRANCO GLOBAL 5901 SHALLOWFORD ROAD CHATTANOOGA, TN 37421 423-803-4800				
Special Instructions:  UL-2357316		Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>  <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.		
CUSTOMER ORDER INFORMATION				
Customer Order No.	# of Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information
	24	7,553	Y N	
			Y N	
			Y N	
			Y N	
Grand Total				
CARRIER INFORMATION				
Handling Unit		Package		LTL Only
Qty	Type	Qty	Type	NMFC No. Class
24		24		
		Weight	HM (X)	Commodity Description
				Commodities requiring special or additional care or 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
				Dry- Foodstuff
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 <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 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 applicable state and federal regulations.				The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. Shipper Signature <u>Deane</u> 7/1/24
Shipper Signature/Date		Trailer Loaded: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver		Freight Counted: <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces
This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.		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.



BILL OF LADING - SHORT FORM - NOT NEGOTIABLE

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Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description			NMFC No.	Class	
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<b>Shipper Signature/Date</b>  This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.						<b>Trailer Loaded:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver		<b>Freight Counted:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces		<b>Carrier Signature/Pickup Date</b>  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.	

Niram Pochu

Receiver

7/2/24 4:10 AM