



**Bill to:**  
PRIORITY 1 INC  
PO BOX 398,  
Little Rock,  
AR,  
72206

Invoice Date: 07/02/2024  
Invoice #: 60107888100  
Terms: NET 30  
Due Date: 08/02/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/01/2024		4221 W 91st Place Suite 900, Hialeah, FL 33018 - 4045 Perimeter W Dr STE 700, Charlotte, NC 28214			
			1	\$900.00	\$900.00

<b>TOTAL</b>
\$9,000.00

**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**

## Carrier Load Tender

**Reference:** 60107888100 (BOL)

**Carrier:** RIKI TRANSPORTATION INC dba

BRZ (086875 0)

**Contact:** luke (luke@rtbrz.com)

**Phone:** 708) 303-5150

**Fax:**

**Tender:** 06/28/2024 20:02

**Contact:** Felix Justin

**Phone:** +16265249821

**Email:** felix@priority1inc.net

**Bill To:** Priority 1 Inc. (P.O. Box 398) North Little Rock, AR 72115

**Equipment:** 53' Dry Van ,

**Service Type:** Full

### Stop 1 Pick

Monday, July 1, 2024 13:00 - 15:00	Total Weight:	9500.00 lb	Total Quantity:	22
<b>Trading Solutions USA LLC (4221 W 91st Place Suite 900) Hialeah, FL 33018</b>				
<b>Contact:</b> Leidy Carmona Phone: +13053953903				
<b>Packaging:</b> 22 Pallet(s)	<b>Total Weight:</b> 9,500 lbs	<b>Dimensions:</b> 48" x 40" x 80"	<b>Linear Feet:</b> 53	<b>Description:</b> Snack Foods
<b>Carrier Notes:</b> drivers should park on gate 15 and 17				
<b>Special Instructions:</b>				

### Stop 2 Drop

Tuesday, July 2, 2024 08:00 - 12:00	Total Weight:	0 lb	Total Quantity:	
<b>ARTISAN TROPIC (4045 Perimeter W Dr STE 700) Charlotte, NC 28214</b>				
<b>Contact:</b> Eduardo Phone: +17048391160				
<b>Carrier Notes:</b>				
<b>Special Instructions:</b>				

### Freight Terms

Charge Details				
Description	Rate		Quantity	Charge
Line Haul	900.00	Flat Rate	1	\$900.00 USD
			Total:	\$900.00 USD

Freight Terms: \$900.00 USD Third Party ( lb )

### References

**PO: M861 Load: 4**

### Carrier Instructions

Carrier or driver is required to call Priority1 when loaded and emptied or load is subject to a \$50 penalty. Detention time starts 2 hours after the driver is on site, or if the driver is early any detention will start 2 hours after the scheduled pickup/delivery time stated on the rate confirmation. Driver must notify us of arrival at shipper/receiver. Detention is paid at \$35 per hour after the 2 free hours. If the load/shipment is double brokered, this agreement is void and the carrier will not receive payment.

Thank you for doing business with Priority 1.

DRIVERS NAME: Luke Mische

TRUCK #: \_\_\_\_\_

TRAILER #: \_\_\_\_\_

DRIVER CELL#: \_\_\_\_\_

DISPATCHER / PRIORITY 1

CARRIER SIGNATURE

All invoices & PODs are to be sent to Priority 1 within 72 hours of delivery. Please email invoice and POD to: tlap@priority1.com. Please provide Priority 1's reference number on your invoice.



BOL NO: 60107888100

## BILL OF LADING

Carrier: ,

## Shipper

Pickup Date: 06/26/2024

Trading Solutions USA LLC  
4221 W 91st Place Suite 900  
Hialeah, FL 33018  
Leidy Carmona  
P: +1 (305) 395-3903

## Origin Terminal

Hialeah, FL 33018  
Phone: P: +1 (305) 395-3903

## Destination Terminal

Charlotte, NC 28214  
Phone: P: +1 (704) 839-1160

## Consignee

ARTISAN TROPIC  
4045 Perimeter W Dr STE 700  
Charlotte, NC 28214  
Eduardo  
P: +1 (704) 839-1160

PO: M861  
Load: 4

## 3rd Party Bill To

Priority 1 Inc.  
P.O. Box 398  
North Little Rock, AR 72115  
P: +1 (501) 371-9814

## Special Instructions:

Freight Terms: ☐ Prepaid ☐ Collect ☒ 3rd Party

Units	Type	Weight	Dimensions	HM	Item Description
22	Pallet	9,500 lbs	48" x 40" x 80"		Snack Foods
22		9,500 lbs			Grand Totals

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 \_\_\_\_."

## Remit COD to:

Collect \_\_\_\_\_ Prepaid \_\_\_\_\_ Customer check acceptable \_\_\_\_\_ COD Amount: \$

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.

## Trailer Loaded:

\_\_\_ by Shipper  
\_\_\_ by Driver

## Freight Counted:

\_\_\_ by Shipper  
\_\_\_ by Driver

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

Shipper: \_\_\_\_\_

## Shipper Signature / Date

## Consignee Signature / Date

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 Department of Transportation.

Shipper: \_\_\_\_\_

Time In: \_\_\_\_\_ Time Out: \_\_\_\_\_

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 Department of Transportation.

Consignee: \_\_\_\_\_

Time In: \_\_\_\_\_ Time Out: \_\_\_\_\_

## Carrier Signature / Date

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.

Carrier: \_\_\_\_\_

X DIRKUS TANAYO DOE-2

98104197

X [Signature]

7/1/2024



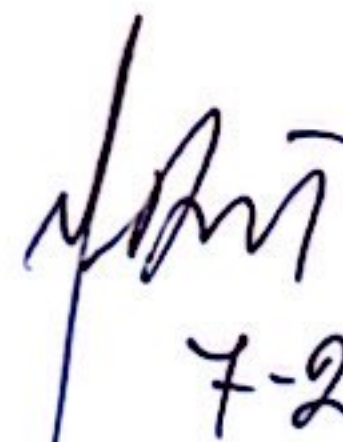
<b>BILL OF LADING</b>					Carrier: ,	
<b>Shipper</b>					Pickup Date: 06/26/2024	
<b>Trading Solutions USA LLC</b> 4221 W 91st Place Suite 900 Hialeah, FL 33018 Leidy Carmona P: +1 (305) 395-3903					<b>Origin Terminal</b>	
					Hialeah, FL 33018	
					Phone: P: +1 (305) 395-3903	
					<b>Destination Terminal</b>	
					Charlotte, NC 28214	
					Phone: P: +1 (704) 839-1160	
<b>Consignee</b>					PO: M861 Load: 4	
<b>ARTISAN TROPIC</b> 4045 Perimeter W Dr STE 700 Charlotte, NC 28214 Eduardo P: +1 (704) 839-1160						
<b>3rd Party Bill To</b>						
<b>Priority 1 Inc.</b> P.O. Box 398 North Little Rock, AR 72115 P: +1 (501) 371-9814						
<b>Special instructions:</b>						
<b>Freight Terms:</b> <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party						
<b>Units</b>	<b>Type</b>	<b>Weight</b>	<b>Dimensions</b>	<b>HM</b>	<b>Item Description</b>	
22	Pallet	9,500 lbs	48" x 40" x 80"		Snack Foods	
22		9,500 lbs			Grand Totals	
<small>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 ____."</small>						
<b>Remit COD to:</b>						
<b>Collect</b> _____ <b>Prepaid</b> _____ <b>Customer check acceptable</b> _____ <b>COD Amount: \$</b> _____						
<b>Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)</b>						
<small>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.</small>				<b>Trailer Loaded:</b>		<b>Freight Counted:</b>
				___ by Shipper ___ by Driver		
				<b>The Carrier shall not make delivery of this shipment without payment of and all other lawful charges.</b>		<b>Shipper:</b> _____
<b>Shipper Signature / Date</b>				<b>Consignee Signature / Date</b>		
<small>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 Department of Transportation.</small> <b>Shipper:</b> _____ <b>Time In:</b> _____ <b>Time Out:</b> _____				<small>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 Department of Transportation.</small> <b>Consignee:</b> _____ <b>Time In:</b> _____ <b>Time Out:</b> _____		
<b>Carrier Signature / Date</b>						
<small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.</small>						
<b>Carrier:</b> _____						

X DIRKIS TANAYO HDE 2

98104197

X DILL

7/1/2024



7-2-24