



**Bill to:**  
ATN LLC  
,  
,  
,

Invoice Date: 07/08/2024  
Invoice #: 77049  
Terms: NET 30  
Due Date: 08/08/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/05/2024		196 NEWTON ST, FREDONIA NY 14063 - 4141 DISTRIBUTION CTR, NORTH LAS VEGAS NV 89030			
			1	\$3,600.00	\$3,600.00

<b>TOTAL</b>
\$3,600.00

**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**



ATN, LLC  
602 MCELWAIN COURT  
BOWLING GREEN KY 42101

PRO # 77049

Rate Confirmation

07/02/24 15:37:02 (EST)

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MIKE ALIBASIC  
(270) 297-7688  
(314) 949-2184 (f) (270) 297-7688 (c)  
mike@atnllcmail.com

ZIGI FREIGHT INC  
(201) 805-9001 (p) Att: D

MC #	944686	Truck #	1
DOT	2828543	Trailer #	1
Driver	D	Cell #	(111) 111-1111

Size & Type: 53' VAN  
Pieces: 1680

Description: PEACH MANGO LYTE 1  
Weight: 42192

Miles: 2209

CHARGES		DISPATCH NOTES
LINE HAUL RATE	3600.00	
TOTAL RATE	3600.00	

PICK 1

WAVEPOINT 3PL WAREHOUS  
196 NEWTON ST  
FREDONIA NY 14063

Appointment 07/05/24 @ 12:00  
Appt Notes: 1200-  
Pieces: 1680  
Weight: 42192

STOP 1

ONE SOLUTION (MAIN) WH  
4141 DISTRIBUTION CIR  
NORTH LAS VEGAS NV 89030

Appointment 07/08/24 @ 10:00  
Appt Notes: APPT 10:00  
Ref # 430272665

CARRIER MUST ENSURE COMMODITY IS MAINTAINED AT AMBIENT TEMPERATURE AND PROTECT FROM FREEZE IF REQUIRED. IF THERE IS CONCERN OVER FREEZING, CARRIER IS OBLIGED TO REQUEST THERMAL BLANKETS FROM WAREHOUSE BEFORE THE LOAD SHIPS. FAILURE WILL RESULT IN FULL CARGO CLAIM LIABILITY.

TERMS AND CONDITIONS:

1. UNAUTHORIZED REBROKERING IS PROHIBITED AND WILL CONSTITUTE FORFEITURE OF LINEHAUL TO THE HAULING CARRIER.
2. SUBMIT ALL INVOICES/POD'S/SIGNED BOL'S/LUMPER RECEIPTS (IF ANY) TO BROKER OR AP@ATNLOGISTICSLLC.COM WITHIN 72 HOURS OF DELIVERY OR FEES MAY APPLY. FAILURE TO PROVIDE THE BOL/POD WITHIN 72 HOURS OF DELIVERY WILL MEAN FORFEITURE OF ANY AND ALL ACCESSORIALS DUE AND WILL INCUR A 10% LINEHAUL DEDUCTION (MIN. \$150.00)
3. FAILURE TO REPORT LOAD STATUS CHANGES MAY RESULT IN RATE REDUCTION OR REMOVAL FROM LOAD. TONU'S PAID TO RECOVERY TRUCKS SOURCED DUE TO LACK OF COMMUNICATION WILL BE DIRECTLY DEDUCTED FROM CARRIER.
4. UNLESS STATED OTHERWISE IN WRITING, CARRIER AGREES TO USE A DEDICATED TRAILER OR RISK A PROPORTIONATE RATE DEDUCTION. TRAILER MUST BE FOOD GRADE (NO HOLES, ODORS OR DEBRIS). TONU'S WILL NOT BE ISSUED FOR REJECTED TRAILERS.
5. CARRIER IS RESPONSIBLE & OBLIGED TO:
  - CONFIRM SHIPMENT IS PROPERLY LOADED & SECURED BEFORE SEAL IS APPLIED. IF THERE IS CONCERN OVER LOAD SHIFTING/TILTING/DISPLACEMENT, CARRIER IS OBLIGED TO PROVIDE & APPLY LOAD LOCKS/STRAPS OR REQUEST AIRBAGS OR OTHER SECUREMENT OPTIONS FROM WAREHOUSE BEFORE THE LOAD SHIPS.
  - APPLY SEAL TO TRAILER AND CONFIRM SEAL NUMBER MATCHES SHIPPER BOL. MISSING/ NON-APPLIED SEALS OR UNLOCKED TRAILERS MAY RESULT IN FULL CARGO CLAIMS.
  - CONFIRM SHIPPING & RECEIVING ADDRESSES ON BOL MATCH RATE CONFIRMATION UNLESS

(Rate Confirmation Details on Next Page)

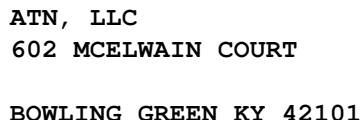
Carrier Signature Kelly Ivanovic

Date        /        /         
M D

Send Carrier Bills to the Address Above

PRO # 77049

must appear on all Invoices



07/02/24 15:37:02 (EST)

MIKE ALIBASIC  
(270) 297-7688  
(314) 949-2184 (f) (270) 297-7688 (c)  
mike@atnllcmail.com

ZIGI FREIGHT INC  
(201) 805-9001 (p) Att: D

MC # 944686  
DOT 2828543  
Driver D

Truck # 1  
Trailer # 1  
Cell # (111) 111-1111

- ACCEPT AND MAINTAIN MACROPOINT TRACKING OR PROVIDE OTHER MEANS OF VISIBILITY.  
DETENTION FEES ARE WAIVED & DEDUCTIONS (\$200.00) MAY APPLY IF NOT FULFILLED.

- REPORT ANY FORM OF DELAYS OR PRODUCT ISSUES IMMEDIATELY UPON OCCURRENCE. RISK OF DETENTION MUST BE REPORTED WITHIN TWO (2) HOURS PRIOR TO ENTERING DETENTION. ANY OR ALL ACCESSORIAL FEES MAY BE WAIVED IF NOT FULFILLED.

- DISCLOSE ANY AND ALL EXCLUSIONS ON CARRIER'S CARGO INSURANCE POLICY. CARRIER SHALL, AT THEIR OWN COST AND EXPENSE, PROCURE AND MAINTAIN ALL LICENSES AND PERMITS REQUIRED TO HAUL THE FREIGHT REFERENCED HEREIN. CARGO CLAIMS THAT RESULT IN DENIAL OF COVERAGE BY CARRIER'S CARGO INSURANCE POLICY ARE THE EXCLUSIVE RESPONSIBILITY OF THE CARRIER.

- SUBMIT CUSTOMER SIGNED BILL OF LADING, SIGNED DELIVERY RECEIPT AND FREIGHT INVOICE WITHIN 30 DAYS OF DELIVERY. FAILURE MAY RESULT IN PAYMENT FORFEITURE.

6. ACCESSORIAL PAYMENTS (IF ELIGIBLE):

- DETENTION = \$35.00 PER HOUR AFTER THREE (3) HOURS. (UP TO 6 HOURS)
- LAYOVER = \$200.00 PER DAY AFTER ORIGINAL PICKUP/DELIVERY DATE
- TRUCK ORDERED NOT USED (TONU) = \$150.00
- RECONSIGNMENT/DIVERSION/RETURN = \$1.75 PER MILE (MUST BE PRE-APPROVED)
- EXTRA STOP OFF = \$50.00

DISCLAIMER: REPOWER FEES IN CASES WHERE CAPACITY IS SOURCED BY BROKER WILL BE DEDUCTED IN WHOLE FROM ORIGINALLY TENDERED LINEHAUL RATE.

DISCLAIMER: DETENTION REQUESTS MUST BE SUBMITTED WITH IN & OUT TIMES WRITTEN ON BILL OF LADING & SIGNED BY SHIPPER/RECEIVER. DETENTION AND LAYOVER FEES WILL BE WAIVED FOR LATE ARRIVALS. LATE DELIVERIES, THROUGH NO FAULT OF BROKER, WILL BE SUBJECT TO RATE DEDUCTIONS = \$100.00 PER LATE DAY AFTER ORIGINALLY TENDERED DELIVERY DATE.

**DISCLAIMER: IN ORDER FOR REWORK FEES TO BE APPROVED, CARRIER MUST SUBMIT:**

1. PICTURES OF THE TAIL END OF THE LOADED TRAILER INDICATING ANY PRODUCT OR EQUIPMENT THAT MAY STILL BE ON THE TRAILER

2. PICTURES OF AN OVERHEAD VIEW OF ALL PRODUCT STILL LOADED ON THE TRAILER

### 3. FOCUSED IMAGES OF THE DAMAGES THAT LED TO THE LOAD BEING REJECTED

4. INCLUDE NUMBER OF AIRBAGS ON THE TRAILER AND NUMBER OF PALLETS TO REWORK

### 5. REWORK ESTIMATE AND REWORK METHOD; REWORK RECEIPT UPON COMPLETION



NOTE: LUMPER FEES ARE TO BE PAID BY CARRIER AND WILL BE REIMBURSED VIA REVISED RATE CONFIRMATION. ATN LLC DOES NOT PROVIDE QUICKPAY OR EFS PAYMENTS.

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

**must appear on all Invoices**

# Bill of Lading

WAVEPOINT

Date: Jul 05, 2024		Page 1	
<b>SHIP FROM</b>		<b>Bill Of Lading Number:</b> 0000000650	
Name: Wavepoint 3PL Address: 196 Newton Street City/State/Zip: Fredonia, NY, 14063 SID: 0000000650      FOB: <input type="checkbox"/>		 (402)0000000650	
<b>SHIP TO</b>		<b>Carrier Name:</b>	
Name: One Solution (Main) WHSE Address: 4141 DISTRIBUTION CIR City/State/Zip: NORTH LAS VEGAS, NV, 89030 CID:      FOB: <input type="checkbox"/>		Trailer Number: H03256 Seal Number(s): 4509978	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>		<b>SCAC:</b>	
Name: BASPORT NUTRITION LLC Address: 17-20 WHITESTONE EXPRESSWAY, SUITE 401 City/State/Zip: WHITESTONE, NY, 11357		<b>ProNumber:</b> <div style="text-align: center;">                       (9012K)                 </div>	
<b>SPECIAL INSTRUCTIONS:</b>		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
Master Bill Number:		Prepaid:      Collect:      3rd party:	
PO Number: 80575541		<input type="checkbox"/> Master Bill of Lading: With attached underlying Bill of Lading	

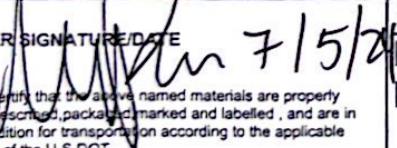
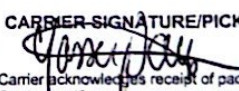
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	PKGS	WEIGHT	PALLET	SLIP	CUST ADDITIONAL INFO
430272665	1,680	40,992			
<b>GRAND TOTAL</b>	<b>1,680</b>	<b>40,992</b>			

CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		WEIGHT	HM
QTY	TYPE	QTY	TYPE		
24	PALLET	1,680	CS	40,992	
24		1,680		4,0992.00	
<b>GRAND TOTAL</b>					

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 exceeding _____ per _____"	<b>COD AMOUNT: \$</b>  Fee Terms:      Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer Check acceptable: <input type="checkbox"/>
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**NOTE:** Liability limitation for loss or damage in the shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rules or conducts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rules, classification and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the items and conditions of the NMFC Uniform Straight Bill of Lading including those on the back hereof, and the said items and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.	The carrier shall not make delivery of this shipment without payment of freight and lawful charges.  <div style="text-align: right;">                     _____                      Shipper Signature                 </div>
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<b>SHIPPER SIGNATURE/DATE</b>  7/15/24 <small>This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S.DOT.</small>	<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>  09/05/24 <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S.DOT emergency response guidebook or equivalent documentation in the vehicle.</small>
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TIME IN: 11:45  
TIME OUT: 16:15



# Bill of Lading

10 Am 10W

WAVEPOINT

Date: Jul 05, 2024		Page 1	
<b>SHIP FROM</b> Name: Wavepoint 3PL Address: 196 Newton Street City/State/Zip: Fredonia, NY, 14063 SID: 0000000650 FOB: <input type="checkbox"/>		Bill Of Lading Number: 0000000650  (402)0000000650	
<b>SHIP TO</b> Name: One Solution (Main) WHSE Address: 4141 DISTRIBUTION CIR City/State/Zip: NORTH LAS VEGAS, NV, 89030 CID: FOB: <input type="checkbox"/>		Carrier Name: Trailer Number: H03256 Seal Number(s): 4509978	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b> Name: BASPORT NUTRITION LLC Address: 17-20 WHITESTONE EXPRESSWAY, SUITE 401 City/State/Zip: WHITESTONE, NY, 11357		SCAC: ProNumber:  (9012K)	
<b>SPECIAL INSTRUCTIONS:</b> Master Bill Number:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: Collect: 3rd party:	
PO Number: 80575541		<input type="checkbox"/> Master Bill of Lading: With attached underlying Bill of Lading	

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	PKGS	WEIGHT	PALLET	SLIP	CUST ADDITIONAL INFO
430272665	1,680	40,992			
GRAND TOTAL	1,680	40,992			

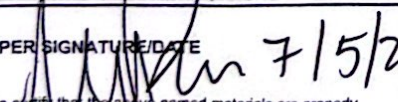
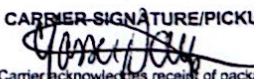
## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	HM	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with See Section 2(e) of NMFC Item 360	NMFC CLASS
24	PALLET	1,680	CS	40,992	
24		1,680		4,0992.00	
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 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 the shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rules or conducts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rules, classification and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the items and conditions of the NMFC Uniform Straight Bill of Lading including those on the back hereof, and the said items and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.	The carrier shall not make delivery of this shipment without payment of freight and lawful charges. Shipper Signature _____
--	--

SHIPPER SIGNATURE/DATE  7/5/24 This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S.DOT.	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	CARRIER SIGNATURE/PICKUP DATE  09/05/24 Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S.DOT emergency response guidebook or equivalent documentation in the vehicle.
--	--	--	---

Juliana Ayala  
 Juliana Ayala  
 7/8/24  
 10:50 AM

TIME IN: 11:45  
 TIME OUT: 16:15





**SHIP TO:**  
One Solution (Main) WHSE  
4141 DISTRIBUTION CIR

NORTH LAS VEGAS, NV 89030

**BILL TO:**  
BASPORT NUTRITION LLC  
17-20 WHITESTONE  
EXPRESSWAY  
SUITE 401

WHITESTONE, NY 11357

**SHIP FROM:**  
Wavepoint 3PL  
196 Newton Street

Fredonia, NY 14063

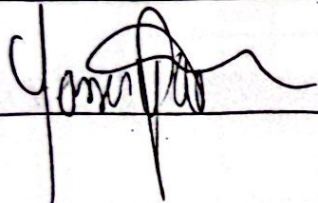
<u>CUSTOMER PO</u>	<u>ORDER NO.</u>	<u>CARRIER</u>	<u>ORDER DATE</u>
430272665	0000000650		06/28/2024

<u>LINE</u>	<u>ITEM</u>	<u>OWNER</u>	<u>DESCRIPTION</u>	<u>QTY SHIPPED</u>	<u>UOM</u>
00001	100029-1.3	BASPORT	Peach Mango LYTE 12/28oz	1680.0	CS
04265988		15624	06/04/2024	1680.0	
04265989		15624	06/04/2024	1680.0	
04265990		15624	06/04/2024	1680.0	
04265991		15624	06/04/2024	1680.0	
04265992		15624	06/04/2024	1680.0	
04265994		15624	06/04/2024	1680.0	
04265995		15624	06/04/2024	1680.0	
04265996		15624	06/04/2024	1680.0	
04265997		15624	06/04/2024	1680.0	
04265998		15624	06/04/2024	1680.0	
04265999		15624	06/04/2024	1680.0	
04266000		15624	06/04/2024	1680.0	
04266001		15624	06/04/2024	1680.0	
04266002		15624	06/04/2024	1680.0	
04266003		15624	06/04/2024	1680.0	
04266008		15624	06/04/2024	1680.0	
04266009		15624	06/04/2024	1680.0	
04266010		15624	06/04/2024	1680.0	
04266011		15624	06/04/2024	1680.0	
04266012		15624	06/04/2024	1680.0	
04266013		15624	06/04/2024	1680.0	
04293421		24156	06/04/2024	1680.0	
04293422		24156	06/04/2024	1680.0	
04293424		24156	06/04/2024	1680.0	
			Total Pallets	24	
				Total Units	1,680



By signing below, I acknowledge that the product is loaded in an acceptable manner with no damage. I also certify that I have been given a seal and that it is my responsibility to secure the product so that there is no damage in transit and to seal the trailer.

Order # 430 272665

Signature 

checked  
4/25/16  
RVP