



Bill to:
CROWLEY LOGISTICS INC

Invoice Date: 07/14/2024
Invoice #: 4799172
Terms: NET 30
Due Date: 08/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/10/2024		64490 LA-434, Lacombe, LA 70445, USA - 5045 Portsmouth Blvd, Chesapeake, VA 23321, USA			
			1	\$2,400.00	\$2,400.00

TOTAL
\$2,400.00

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



CROWLEY LOGISTICS, INC.
US Transportation and Distribution
9487 Regency Square Blvd, Jacksonville, FL 32225

Sent By:
Brian Browning
brian.browning@crowley.com
07/10/2024 09:27 AM

Order Number 4799172

Division: CDTs

Trip Number 7434296

LOAD RATE CONFIRMATION

Please call 904-727-4271 for dispatch and reference order number 4799172.

Carrier: **ROYAL3 INC DBA**
Booking: 177308906
Voyage:

Truck Pay Total: **\$2,400.00**
Line Haul Rate: \$2,400.00
Fuel Surcharge: \$0.00
Accessorial(s): \$0.00

Equipment Type: VAN
Weight: 25588.97
Pieces/Pallets: 7018.00
Commodity: UNKNOWN
Mileage: 1011
Min Temp:
Max Temp:

Payment Processing:

PLEASE DO NOT SUBMIT INVOICES FOR PAYMENT

Payments will be automatically processed via ERS based on Truck Pay Total (see above), standard/negotiated payment terms, and receipt and processing of documentation requirements.
-Once Trip Segment is closed, payment terms (e.g., Net 30 day) will start from the date required documentation is processed.
-Detention must be requested and approved at the time of the occurrence. Detention in .out times must be noted on BOL/POD for payment to be used.
Please send all required documents to adminlogistics@crowley.com with only the **Order # - Authorization #** in the subject line (Example: **2542921 - 37922181401TMN**)
-All documentation must be received within 24-hours of delivery and be legible.
-Required Documentation includes but it is not limited to POD (Proof of Delivery) and/or BOL (Bill of Lading).
-Lumper Receipts must be submitted within 24 hours or the lumper amount will be deducted from Truck Pay Total.
-Payment will be denied for Accessorial permits .receipts not received within 30 days of charge occurrence.
If you need assistance or have not received payment within our agreed terms:
-Email RSMCommPmtStatus@crowley.com Subj: Order # - Authorization # and attach Rate Confirmation Sheet and supporting documentation.
-Call Payment Status Line @ 904-726-4390
-Note: Payment will not be issued for outstanding/disputed pay details not reported within 60 days of charge occurrence.

Auth# >>> POD NEEDED <<<
All Documentation/Signed POD
(All pages) Required

1. Live Load

Company: 235 - THE FOLGER COFFEE COMPANY

References: LOD: ZZ, CARF: CRYSTAL SIMMONS,
TE: (985) 3286160, A5: LAROY
BURTON, TE: (985) 3286162, CO:
42724604, PON: 7DQNFH3Q

64490 HIGHWAY 434
7/10 1415 LACOMBE,LA/ 70445

Earliest: 07/10/24 14:15
Latest: 07/10/24 14:15
Equipment: UNKNOWN

2. Live Unload

Company: AMAZON ORF2

References: LOD: ZZ, CO: 42724604, PON:
7DQNFH3Q

5045 PORTSMOUTH BLVD
CHESAPEAKE,VA/ 23321

Earliest: 07/12/24 11:00
Latest: 07/12/24 11:00
Equipment: UNKNOWN

7/12 1100 - ISA 120839008591

STOP COMMENTS

Instructions for Mobile App:

- (1) Driver must provide cellphone number to your Crowley Dispatcher.
 - (2) Upon receipt of SMS message, your driver must select the 1st link to download the app and enable tracking (one-time occurrence).
 - (3) Once the app is downloaded, close the app and return to SMS message.
 - (4) To access shipment information and start tracking, driver will click the 2nd link located on the SMS message received and hit START for the selected move prior to arriving at first stop of the day. If already onsite, driver will need to manually input arrive .depart times through the Details icon.
 - (5) When load has been delivered, please confirm all times are correct and in local time per stop, select Shipment Options, and select Complete Shipment.
 - (6) In the event of a drop .hook, once the trailer has been dropped and times are entered, driver must manually mark the shipment as Complete (Shipment Options > Complete Shipment); then hit START for the next shipment (hook) prior to leaving that location.
 - (7) To add equipment information such as Trailer#/Chassis#, select the Notes icon in shipment screen. Manually enter using following format: ABCD,1234567 (4 letters and 7 digits with a comma in between) Note: Trailer information should be added as a separate note entry; do not combine with additional note information.
 - (8) Attach Documents through App by selecting Documents then chose from gallery or take a photo. Select photo and document type to upload. Documentation submitted through the App will be received and filed by Crowley automatically against the PO it was submitted for.
- **Contact your Crowley dispatch for additional help. If you would like to integrate or use a different tracking method please contact Capacity@crowley.com for more details.****

1) All drivers must call for dispatch and check call for the following events: en-route to shipper, arrival at shipper, loaded at shipper, arrival at consignee and departure from consignee. 2) Shipments that require more than one day of transit require a check call from driver with location information during transit. 3) All overages, shortages, damages (collectively OSDs) and/or accessorial(s) must be reported to Crowley Logistics, Inc. at the time of the occurrence. If OSDs are not reported immediately, the Carrier can be held wholly or partly liable. If Fuel Surcharge is not separately stated, then Flat Rate shall be inclusive. 4) Unauthorized delays in delivery shall be charged to Carrier, not to exceed the actual charges assessed against Crowley Logistics, Inc. for which Carriers actions are at fault. A minimum charge of \$100 shall apply to appointments missed without prior notification from Carrier. Carrier agrees with the above rate confirmation for said movement and any further charges must be called and documented with a new rate confirmation to acknowledge acceptance of charges. (Section 5.3 of Broker/MC Agreement). 5) After 2 hours wait time by a driver, detention charges must be pre-authorized by Crowley Logistics, Inc. Approval will result in payment of \$25 per hour with maximum of \$150 per day to the driver. 6) CARRIER IS REMINDED THAT IT IS PROHIBITED FROM SUBCONTRACTING THIS LOAD TO ANY OTHER CARRIER OR BROKER WITHOUT FIRST OBTAINING CROWLEY LOGISTICS INC'S EXPRESS WRITTEN PERMISSION (Section 5.6 broker/MC agreement). Crowley Logistics, Inc. reserves the right to pay the delivering carrier directly and Carrier named below shall remain primarily liable as provided herein. 7) IF SHIPPER'S REQUESTED TEMPERATURE IS DIFFERENT FROM TEMPERATURE PROVIDED ABOVE, PLEASE CONTACT CROWLEY PRIOR TO LOADING.

Joey Cimbaljevic
Signature by Carrier MUST SIGN AND RETURN TO brian.browning@crowley.com BEFORE LOADING.



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Joey Cimbaljevic
Signature by Carrier MUST SIGN AND RETURN TO brian.browning@crowley.com BEFORE LOADING.

BILL OF LADING

SHIP FROM JM SMUCKER LACOMBE 64490 LA-434 Lacombe, LA 70445 FOB: <input type="checkbox"/>		Bill of Lading Number: 177308906  (402) 177308906	
SHIP TO AMAZON.COM SMUB2 ORF2 5045 PORTSMOUTH BLVD CHESAPEAKE, VA 23321-1425 FOB: <input type="checkbox"/>		Carrier Name: Crowley Logistics Trailer Number: H03245 Seal number(s): 0228701	
THIRD PARTY FREIGHT CHARGES BILL TO: THE J.M. SMUCKER COMPANY C/O CASS INFORMATION SYSTEMS COLUMBUS, OH 43218-2038		SCAC: CYLI Pro #:	
SPECIAL INSTRUCTIONS :		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# Cases	NET WEIGHT	Pallet/Slip (Circle One)		REQ DELIV	ADDITIONAL SHIPPER INFO JMS ORD NUM
7DQNFH3Q	6893.0	26003.78	Y	N	7/7/24, 11:00 PM	42724604-87569
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
GRAND TOTAL	6893	26003.78				

CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		GROSS WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY	
						Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care.		NMFC #	CLASS
						See Section 2(e) of NMFC Item 360			
QTY	TYPE	QTY	TYPE						
0.0		6893.0	Cases	26003.78	0.0	Foodstuffs, other than frozen, Group IV, viz(30 or greater)		73260	60
73.0	Full Chep	0.0		4745.0	0.0	PLATFORM			
73.0		6893.0		30748.78		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 _____.

COD Amount: \$

Fee Terms:

Collect: ☐Prepaid: ☐Customer check acceptable: ☐

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. -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 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 DOT.

Dispatched Time : _____

Trailer Loaded:

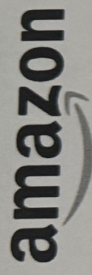
☐ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ 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.



Proof of Delivery

Appointment ID	120839008591
Carrier	COYLE TRANS INC
Amazon Warehouse	ORF2
Appointment Type	LIVE
Current Location	DD102
Expected Arrival Date	2024/07/12 11:00 EDT
Actual Arrival date	2024/07/12 10:24 EDT
	Time out 11:50 P.M.

This document serves only as a confirmation that the shipment described above from the carrier is now in the possession of Amazon. Amazon has not yet inspected the contents of the shipment and therefore makes no representations at this time about the quality, quantity, or condition of the units contained in the shipment.

X. *Shannon Costello*

Amazon Signature

120839008591

BILL OF LADING

Est Closed: 07/10/2024 06:07 PM EST

SHIP FROM
JM SMUCKER LACOMBE
64490 LA-434
Lacombe, LA 70445

SHIP TO
AMAZON.COM SMUB2 ORF2
5045 PORTSMOUTH BLVD
CHESAPEAKE, VA 23321-1425

Bill of Lading Number: 177308906

Carrier Name: Crowley Logistics
Trailer Number: H03245
Seal number(s): 0228701

SCAC: CYLI Pro #: PS 476

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

Prepaid X Collect 3rd Party

Master Bill of Lading, with attached underlying Bills of Lading (check box)

SPECIAL INSTRUCTIONS: Name: Shannon Co. Signature: Shannon Co. Date: 7/10/2024

CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER		# Cases	NET WEIGHT (Cite One)	REQ DELIV	JMS ORD NUM
7DQNFH3Q		6893.0	26003.78	Y N	42724604-87569
		0.0	0.00	Y N	
		0.0	0.00	Y N	
		0.0	0.00	Y N	
		0.0	0.00	Y N	
GRAND TOTAL		6893	26003.78		

CARRIER INFORMATION				LTL ONLY	
COMMODITY DESCRIPTION				NIMFC #	CLASS
Foodstuffs, other than frozen, Group IV, viz (30 or greater)				73260	60
PLATFORM					
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 _____

COD Amount: \$ _____ Fee Terms: _____ Prepaid: ☐ Collect: ☐

Customer check acceptable: ☐

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. -14706(c)(1)(A) and (B).
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

SHIPPER SIGNATURE/DATE _____
Trailer Loaded: ☐ By Shipper ☐ By Driver
Freight Counted: ☐ By Shipper ☐ By Driver/Pieces

Signature _____
CARRIER SIGNATURE/PICKUP DATE _____

Carrier acknowledges receipt of packages and required documents. Carrier certifies that the information provided on this bill of lading is true and correct. Carrier's emergency response guidebook or equivalent documentation in the vehicle.

Perk up: CHECK IN : 10:30 AM
CHECK OUT : 06:00 PM

Delivery: CHECK IN : 10:30 AM
CHECK OUT : 11:50 AM