

Bill to: ALLEN LUND COMPANY, LLC PO BOX 339, La Canada Flintridge, CA, 91012 Invoice Date: 07/15/2024 Invoice #: 7064704 Terms: NET 30 Due Date: 08/15/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/12/2024		121 Technology Pl, Hot Springs National Park, AR 71913, USA - 4020 W 104th St, Hialeah, FL 33018			
			1	\$3,100.00	\$3,100.00

TOTAL	
\$3,100.00	

#### 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 Confirmation - 7064704**

## **Driver must call** prior to heading to shipper Call (800) 498-5863 or (501) 777-9007 and ask for Load 7064704

07/11/24 10:55 (CST)

#### **ATTENTION: CARRIER CONTACT**

**ROBERT** 

ZIGI FREIGHT INC \* DBA ROYAL3 INC CHICAGO, IL

(973) 563-3159

Sent To:dispatch@royal3inc.com

#### LOAD REQUIREMENTS

**Equipment Type:** VAN OR REEFER **Special Equipment Needs:**LOAD LOCKS,MP UPDATES REQUIRED

Equipment Size:53

Temp: Hazmat: NO

Estimated Weight: 41,490

#### ALLEN LUND BOOKING CONTACT

Contact: Joe Cook

Allen Lund Company, Little Rock

Tel: (800) 498-5863 Ofc: (501) 777-9007

Cell:

Email: joe.cook@allenlund.com

After Hours:

#### Comments:-

#### SPECIAL INSTRUCTIONS:

\*Drivers are not allowed to show up to the shipper more than 1 hour before their scheduled appointment time. If drivers do show up more than 1 hour before the scheduled appointment they will be asked to leave the facility and return at the appointment time. If the driver does not leave (remains parked onsite) they will reject to load the truck with no TONU being paid for drivers not complying. Drivers without appointment will be asked to leave and give phone number, if called can come back for a work in, if not, may return after 1600..

**EMERGENCY CONTACT INFO:** For any urgent problems or issues, after regular business hours or over weekends, you may reach our After Hours Dispatcher at (800) 498-5863.

#### PICKUP INFORMATION

Pick UP #1:	MOUNTAIN VALLEY WAREHOUSE - PRIMO
Address:	115 TECHNOLOGY PLACE
	HOT SPRINGS NATIONAL PARK, AR 71913
Contact:	RAQUEL BOWMAN
Phone:	(501) 520-2152

Pick Up Date:	07/12/2024 Friday
Pick Up Time:	07:00
FCFS Notes:	

#### **Directions:**

#### Notes:

Line#	Commodity/Product	Description		Quantity	/	Palle	ets
1	BOTTLED WATER			0	PLT		
		<u> </u>	Total:	0		Total:	0

#### **DELIVERY INFORMATION**

Delivery #1:	KEHE - HIALEAH
Address:	4020 W 104TH ST
	HIALEAH, FL 33018
Contact:	RECEIVING
Phone:	(855) 908-5532

Delivery Date:	07/15/2024 Monday
Delivery Time:	06:00
FCFS Notes:	

#### **Directions:**

Notes: carrier is responsible for fees from missed delivery appointments, no call no shows, and rescheduling

Commodity/Product	Description		Quanti	ty	Pall	ets
BOTTLED WATER			0	PLT		
		Total:	0		Total:	0

RATE DETAILS						
	Description	UOM	Rate	QTY	Total	
Truck Rate		FLT	\$3,100.00	1	\$3,100.00	
Advance Amount					\$0.00	
Advance Fee					\$0.00	
Additional Payments						
Total Carrier Payments					\$3,100.00	
Balance Due					\$3,100.00	

#### INVOICE INFORMATION

FOR STANDARD PAY or ACH, PLEASE EMAIL YOUR FREIGHT BILLS TO: billing@allenlund.com or FAX TO:

If you email or fax your required paperwork, please do not submit copies by mail unless otherwise instructed by the Allen Lund Company.

QUICK PAY BY COMCHECK CARRIERS ONLY: If you wish to be paid by comcheck, you may email or fax your invoice and required paperwork to: littlerockaccounting@allenlund.com or (XXX) XXX-XXXX. Please include the load number and "Quick Pay" in the subject line and ensure your invoice is marked with "Quick Pay by ComCheck."

If you request and receive payment by comcheck, please **do not mail original paperwork** unless otherwise instructed by Allen Lund Company. Carrier shall retain custody of original paperwork and provide it to the Allen Lund Company upon request.

Freight Charges will not be paid without required paperwork. To insure prompt payment, the following paperwork must be included with your invoice: copy of this load confirmation, customer signed Bill of Lading, and lumper receipts (if applicable).

In the event you wish to mail required paperwork for payment , please send all required documents listed above to: Allen Lund Company, PO BOX 339, LA CANADA, CA 91012

Please enter Load Confirmation #7064704-AR on all paperwork before emailing, faxing or mailing.

Please direct payment inquiries to: billing@allenlund.com or by calling (800) 811-0083.

#### **CONTRACT ADDENDUM AND LOAD CONFIRMATION PROVISIONS**

- 1. There will be a charge for all advances and/or advanced settlements as follows:
  - a. Fee for an advance is 2% of the due carrier amount or \$25.00, whichever amount is higher.
  - b. Fee for an advanced settlement upon delivery is 2% of the settlement amount or \$25.00, whichever is higher.
  - c. There is no fee for normal payments.

- 2. Any accessorial charges must be approved in advance by **BROKER** and must be supported by an invoice or signed receipt of funds.
- 3. FINAL PAYMENT CANNOT BE MADE WITHOUT A SIGNED COPY OF THE BILL OF LADING AND A SIGNED COPY OF THE RATE CONFIRMATION.
- 4. To facilitate payment, please include a copy of this signed RATE CONFIRMATION with your invoice.
- CARRIER REPRESENTS AND AGREES THAT ONLY TRACTORS AND TRAILERS COVERED BY THE VALID, EXISTING INSURANCE FOR BOTH LIABILITY AND CARGO RISKS WILL BE UTILIZED TO TRANSPORT THIS LOAD.
- 6. CARRIER SHALL NOT CAUSE OR PERMIT ANY SHIPMENT TENDERED HEREUNDER TO BE BROKERED TO OR TRANSPORTED BY ANY OTHER MOTOR CARRIER, OR IN SUBSTITUTED SERVICE BY RAILROAD OR BY OTHER MODES OF TRANSPORTATION.
- 7. Directions supplied by the Allen Lund Company or its customers either orally and/or written form are for informational purposes only. It is the Carrier's sole responsibility to confirm that it may lawfully operate a loaded vehicle of any weight, commodity or dimension over any highway, bridge or route.
- 8. Carrier is responsible for supplying equipment that is compliant with regulations of the California Air Resources Board (CARB) if operating in the state of California. Carrier will indemnify Allen Lund Company for any fines assessed for the carrier's failure to comply with the regulations.
- 9. The carrier agrees that it will not double-broker the load or change the specified mode of transportation. If this agreement is breached and another carrier's MC# or name is on the tractor, trailer, or bill of lading, or if other facts convincingly show that another carrier transported the load, ALC will exercise its contractual right to pay the delivering carrier directly. Additionally, ALC reserves the right to charge the booking carrier up to \$5,000 for the time and resources ALC must spend in investigating the carrier-delivery or mode-of-transportation issue. Any exceptions to this agreement must be in writing, signed by the parties, at the time the load is booked.

This document clarifies, augments and amends the carrier and broker agreement between ALLEN LUND COMPANY, INC. and CARRIER and becomes part of that agreement.

PRINT & SIGN THIS PAGE and then

FAX to: or EMAIL to: joe.cook@allenlund.com

# Carrier Name Print Name of Authorized Signature Date Authorized Carrier Signature

Thank you to all of the professional truck drivers.

Allen Lund Company appreciates your hard work and dedication to keep freight moving every day!

Load #7064704



#### BILL OF LADING -SHORT FORM - NOT NEGOTIABLE

Page 1 of 1

200					Light Book of the Control of the Con	Da	ate: 7/17/2024
	LI EV				Sales Order	/Bill of Lading	#: KE03277
SPI	LLEY RING LYER	Carrie	er: 1-WAY			Freight Charge Term (Freight charges are prepai	IS dupless made to the
	SCAC:	Traile	** 24474	6		X Prepaid	3rd Party
	Pro Number:	Seal	Number(s): 1855		WHICH AND	Collect [	Prepaid & Add
	SHIPPER (f	1000000				COD Amount: \$	
PRIMO			Please provide ZIP	codes and phone numbers.	COI	NSIGNEE (to)	
Mountai	WATER NORTH AMERI n Valley Warehouse	ICA		KEHE - HIALEAH 4020 W 104TH ST		Acct: 0070	753
115 Tech	hnology Drive RINGS, AR 71913			382 HIALEAH, FL 3301	8	Phone No.:	(800) 809-8514
(501) 52				Durchass Ords	4 0500550	Attn:	
BILL FRE	EIGHT CHARGES	TO:		Purchase Orde	er#: 2528550		
283 MOUN	ATER NORTH AMERICANTAIN VALLEY WATER	A PL		COVID-19	Requests & Other S	Special Instructions:	
(501) 520-	INGS, AR 71909						
Deliver	v Date: Mic		A CONSTRUCTION AND ADDRESS OF THE PARTY OF T	CONT.		And a	
2 cilvor	y Date: 1/15	e, le.	Am # 314	75114 Information			
			SPACE N	Commodity Des	cription		
QTY	Pallet or Rack QTY	Weight	Product UPC Code	Commodities requiring stowing must be so ma	renodal as additional	or attention in handling or ensure safe transporation em 360.	NMFC Class
1		0.00	/KEHE MKAL	KEHE 2.0% MARI	KETING ALLOWAN	CE	
1,008	18.00 Long Pallet	41,489.28	MVFG1LGPREM	MV 1 LTR SPG G	LASS 06/30	0 : 07/10	)
					A ! - !	n	7:00
						ent Time: 0	7
						val Time: 08	
						Pallets:	8
	No	of Pieces:	Charles and a second				
here the reals	Note: Liability limi	tation for loss	or damage in this at i	Tot	al Weight:	41,489.2	18
reed or declared va specifically stated in	spendent on value, shippers are required alue of the property as follows: "The agre by the shipper to be not a	d to state specifically in	writing the Subject to Section 7 of	ent may be applicable	e. See 49 USC & 14	4706(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: (DEFAULT TO SHIPPER)

By Shipper

Freight Counted: (DEFAULT TO SHIPPER)

By Shipper

consignor shall sign the following staten
SHIPPER CERTIFICATION

CARRIER CERTIFICATION

Carrier acknowledges receipt of the packages and required placards. Carrier certifies emergency responde the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described

PICK UP DATE CARRIER SIGNATURE PIECE COUNT X X



#### KeHE Distributors (Tax ID 27-1726000)

RoadSync ID: 2008 Tax ID: 27-1726000 Phone: 6303430000

1245 E. Diehl Rd. Suite 200 Naperville IL, 60563

RS	Trans#	4826135
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Generated: Jul 15, 2024 10:07 AM EDT

COMMENTS           RECEIPT DETAILS           CLERK         Edward           PAYMENT METHOD         Self-Checkout / Check           Appointment Nbr         31475114           Time Checked In         0600           Door Nbr         115           PO Nbr 1         2528550           PO Nbr 1 Type         PPD S&S=Y           PO Nbr 1 Case Count         1008           AMOUNT         \$70.00           CONVENIENCE FEE         \$1.40	PAID BY	DESTINATION
Hialeah FL, 33018   Community	ROYAL 3	31 - FTL (Miami)
COMMENTS	7547073239	4020 W 104th Street
\$70.00           COMMENTS           RECEIPT DETAILS           CLERK         Edward           PAYMENT METHOD         Self-Checkout / Check         Appointment Nbr         31475114		Hialeah FL, 33018
COMMENTS           RECEIPT DETAILS           CLERK         Edward           PAYMENT METHOD         Self-Checkout / Check           Appointment Nbr         31475114           Time Checked In         0600           Door Nbr         115           PO Nbr 1         2528550           PO Nbr 1 Type         PPD S&S=Y           PO Nbr 1 Case Count         1008           AMOUNT         \$70.00           CONVENIENCE FEE         \$1.40		LINE ITEMS
RECEIPT DETAILS           CLERK         Edward           PAYMENT METHOD         Self-Checkout / Check           Appointment Nbr         31475114           Time Checked In         0600           Door Nbr         115           PO Nbr 1         2528550           PO Nbr 1 Type         PPD S&S=Y           PO Nbr 1 Case Count         1006           AMOUNT         \$70.00           CONVENIENCE FEE         \$1.40	(1) Unload 15+ Pallets	\$70.00
CLERK       Edward         PAYMENT METHOD       Self-Checkout / Check         Appointment Nbr       31475114         Time Checked In       0600         Door Nbr       115         PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40		COMMENTS
PAYMENT METHOD       Self-Checkout / Check         Appointment Nbr       31475114         Time Checked In       0600         Door Nbr       115         PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40		RECEIPT DETAILS
Appointment Nbr       31475114         Time Checked In       0600         Door Nbr       115         PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40	CLERK	Edward
Time Checked In       0600         Door Nbr       115         PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40	PAYMENT METHOD	Self-Checkout / Check
Door Nbr       115         PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40	Appointment Nbr	31475114
PO Nbr 1       2528550         PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40	Time Checked In	0600
PO Nbr 1 Type       PPD S&S=Y         PO Nbr 1 Case Count       1008         AMOUNT       \$70.00         CONVENIENCE FEE       \$1.40	Door Nbr	115
PO Nbr 1 Case Count 1008 AMOUNT \$70.00 CONVENIENCE FEE \$1.40	PO Nbr 1	2528550
AMOUNT \$70.00 CONVENIENCE FEE \$1.40	PO Nbr 1 Type	PPD S&S=Y
CONVENIENCE FEE \$1.40	PO Nbr 1 Case Count	1008
	AMOUNT	\$70.00
\$71.40	CONVENIENCE FEE	\$1.40
	GRAND TOTAL	\$71.40

#### **PAID IN FULL**

No Refunds or Returns

OUNTA

### BILL OF LADING -SHORT FORM - NOT NEGOTIABLE

Page 1 of 1

Date: 7/17/2024

Z STATE		Sales Order/Bill of Lading #: KE03277
SCAC: Pro Number:	Carrier: 1-WAY  Trailer #: 24474  Seal Number(s): 1858	
SHIPPER (fr	om) Please provide ZII	P codes and phone numbers. CONSIGNEE (to)
PRIMO WATER NORTH AMERICA Mountain Valley Warehouse 115 Technology Drive HOT SPRINGS, AR 71913 (501) 520-2106  BILL FREIGHT CHARGES T PRIMO WATER NORTH AMERICA 283 MOUNTAIN VALLEY WATER I HOT SPRINGS, AR 71909 (501) 520-2106	CA CO:	KEHE - HIALEAH 4020 W 104TH ST 382 HIALEAH, FL 33018  Purchase Order #: 2528550  COVID-19 Requests & Other Special Instructions:
Delivery Date: 715 e LAM # 314751148  CARRIER INFORMATION		
QTY Pallet or Rack QTY	Weight Product UPC Code	Commodity Description Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transporation with ordinary care. See Section 2(e) of NMFC Item 360.  No.
1	0.00 /KEHE MKAL	KEHE 2.0% MARKETING ALLOWANCE
1,008 18.00 Long Pallet	41,489.28 MVFG1LGPREM	MV1LTR SPG GLASS 06/30 : 07/10
75	470732	The state of the s
Pallets Off Loaded / Shrink Wrap Not Intact Traiter / Reefer Temperature: Total Pallets Off Loaded_ Yes / Total Pallets Off Loaded_		
	0	Appointment Time: 07:00  Appointment Time: 08:10  Appointment Time: 08:10  Appointment Time: 08:10  Appointment Time: 08:10  # cf Pallets: 18
No	o of Pieces: 1,008.00	
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC & 14706(c)(1)(A) and (B).  Where the reate is dependent on value, shippers are required to state specifically in writing the property as follows: "The agreed or declared value of the property as follows: "The agreed or declared value of the property as follows: The agreed or declared value of the pr		
Received, subject to individually determined rates or co- writing between the carrier and shipper. If applicable, of nules that have been established by the carrier and are to all applicable state and federal regulations.	htracts that have been agreed upon in herwise to the rates, classifications, and available to the shipper, on request, and	the above named to the state of
Trailer Loaded: (DEFAULT TO SHIPPER) (D	Freight Counted:	es receipt of the packages and required placards. Carrier certifies emergency response information was made available and/or carrier has presponse guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
By Shipper	By Shipper PICK UP DA	