

**Bill to:**

C.H. Robinson  
14701 CHARLSON RD,  
Eden Prairie,  
MN,  
55347

Invoice Date: 07/30/2024

Invoice #: #483308701

Terms: NET 30

Due Date: 08/30/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
07/29/2024		4101 Empire RD, Kansas City, MO 64120 - FUCHS NORTH AMERICA, 1951 NORTH 42ND STREET, Grand Forks, ND 58203			
			1	\$1,550.00	\$1,550.00

<b>TOTAL</b>
\$1,550.00

**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**

**C.H. Robinson Contract Addendum and Carrier Load Confirmation - #483308701**

**This load confirmation is confidential information of CH Robinson and may not be disclosed to third parties without CH Robinson's prior written approval.**

**General Contact at Zigi Freight Inc - T5303929  
DBA: Royal3 Inc**

C.H. Robinson requires automated shipment check-in and in-transit updates from one of the approved shipment status technologies. Additional information about these technologies can be found at [www.chrobinson.com](http://www.chrobinson.com).



If you require assistance during your check-in process, please use one of our mobile apps, or call (888) 278-9441.

**C.H. Robinson Communication**

Thank you for your business.  
kelly

**Customer-Specified Equipment Requirements**

Equipment: Van - Min L=48

**Customer Requirements**

C.H. Robinson's Customer requires that Carrier provide daily in-transit tracking updates, through C.H. Robinson, every 4 hours until this shipment is delivered.

\*\*\* MUST REQUEST 2 COPIES OF BOL FROM SHIPPER \*\*\*

\*\*\* CARRIER MUST NOT BREAK SEAL UNDER ANY CIRCUMSTANCE OR WILL BE FINED UP TO FULL AMOUNT OF LINEHAUL RATE AND / OR ANY RETURNS / REINSPECTIONS FEES IF FOUND NONCOMPLIANT \*\*\*\* FOOD GRADE TRAILER ONLY - CLEAN, DRY, FREE OF HOLES.

**SHIPPER#1:** Morton Salt  
Address: 4101 EMPIRE RD  
Kansas City, MO 64120  
Phone: (816) 946-6734

Pick Up Date: 07/29/24  
\*Scheduled to Pick\*  
Pick Up Time: 09:00 Appt.  
Pickup#: 5102825921  
Appointment#:

Please ask for and confirm receipt of:

Commodity	Est Wgt	Units	Count	Pallets	Temp	Ref #
Salt	42,000	Pallet(s)	17	17		

**Shipper Instructions**

\*\*\* MUST REQUEST 2 COPIES OF BOL FROM SHIPPER \*\*\*

\*\*\* CARRIER MUST NOT BREAK SEAL UNDER ANY CIRCUMSTANCE OR WILL BE FINED UP TO FULL AMOUNT OF LINEHAUL RATE AND / OR ANY RETURNS / REINSPECTIONS FEES IF FOUND NONCOMPLIANT \*\*\*\* FOOD GRADE TRAILER ONLY - CLEAN, DRY, FREE OF HOLES.

**RECEIVER #1:** FUCHS NORTH AMERICA  
Address: 1951 NORTH 42ND STREET  
Grand Forks, ND 58203  
Phone: (701) 775-7000

Delivery Date: 07/30/24  
\*Open Delivery\*  
Delivery Time: 06:00-13:00  
Delivery#: 464010  
Appointment#:

Please confirm delivery of:

Commodity	Est Wgt	Units	Count	Pallets	Temp	Ref #
Salt	42,000	Pallet(s)	17	17		

**Receiver Instructions**

**C.H. Robinson Contract Addendum and Carrier Load Confirmation - #483308701**

Rate Details			
Service for Load #483308701	Amount	Rate	Extended
Line Haul - FLAT RATE	1	\$1,550.00	\$1,550.00
<b>Total:</b>			<b>\$1,550.00</b>

**SUBMIT FREIGHT BILL TO:**

CHRW Billing  
P.O. Box 3470  
Chicago, IL 60654  
LoadDocs@CHRobinson.com

**To insure prompt payment, all billing must be accompanied by an invoice with the Carrier Name and C.H. Robinson Load Number**

Fuel Surcharge Information
Please note that C.H. Robinson has included a \$281.22 fuel surcharge within the listed transportation rate on this confirmation. The fuel surcharge is an estimate based off of a weekly national average fuel price from the U.S. Department of Energy.

QUICK PAY and CASH ADVANCE
<p>QUICK PAY - If you are a Carrier who utilizes C.H. Robinson's Quick Pay Program, you may email your invoice and required paperwork to LoadDocs@chrobinson.com or visit NavisphereCarrier.com for other scanning options. Funds will be released from C.H. Robinson, minus the fixed discount, within two business days from receipt of complete and legible paperwork. Paperwork received by 12:00 noon (CST) will be counted as same day; paperwork received after 12:00 noon (CST) will count as the next business day. Carriers enrolled in Quick Pay are no longer required to submit original paperwork for payment in addition to using one of our billing methods unless otherwise instructed by C.H. Robinson. Carrier shall retain custody of the original paperwork and provide it to C.H. Robinson upon Request.</p> <p>C.H. Robinson also recommends that Carrier only submit "receipt" for payment once, regardless of billing method to avoid additional fees. If you would like more information about becoming enrolled in Quick Pay, please contact the Quick Pay Department at (800) 326-9977. For a list of our billing options, please visit NavisphereCarrier.com.</p> <p>CASH ADVANCE - Carriers may request a cash advance from C.H. Robinson to be issued at C.H. Robinson's sole discretion as a partial settlement to the agreed upon rate. All cash advances will be deducted from final settlement; including a transaction fee of the greater of 3% of the advance issued or \$15 for each individual advance.</p>



**C.H. Robinson Contract Addendum and Carrier Load Confirmation - #483308701****C.H. Robinson Contract Addendum and Carrier Load Confirmation Conditions**

**THIS LOAD CONFIRMATION IS SUBJECT TO THE TERMS OF THE AGREEMENT FOR MOTOR CONTRACT CARRIER SERVICES ("AGREEMENT") PREVIOUSLY EXECUTED BETWEEN OUR COMPANIES AND THIS CONSTITUTES AN ADDENDUM TO THE TERMS OF THAT AGREEMENT. WE AGREE TO PAY THE RATES AND CHARGES SHOWN ABOVE AND NO DIFFERENT TARIFF RATE OR SCHEDULE OF RATES APPLY. THIS LOAD CONFIRMATION IS INCLUSIVE OF ALL CHARGES. UNLESS ORAL AND WRITTEN FAX OBJECTIONS ARE MADE TO ITS TERMS, AT THE EARLIER OF WITHIN TWENTY-FOURS (24) HOURS OF RECEIPT OR PRIOR TO WORK BEING INITIATED, YOU HAVE AGREED TO THESE TERMS.**

**Additional Terms****1.**

Unless C.H. Robinson provides written notice herein that this term does not apply to this shipment, Carrier's motor vehicle equipment shall be dedicated to C.H. Robinson's exclusive use while transporting the cargo subject to this booking. Carrier's violation of this exclusive use requirement shall result in Carrier's forfeiting its right to be paid for the transportation services contemplated by this Load Confirmation, not as penalty, but as liquidated damages.

**2.**

Cash advance requests made after regular business hours will not be authorized. If Carrier requires a cash advance, Carrier must make arrangements with the C.H. Robinson booking representative during normal business hours and/or upon booking this shipment. Cash advance requests made outside of the C.H. Robinson booking branch's regular business hours may not be authorized. If Carrier requires a cash advance, Carrier must make arrangements with the C.H. Robinson booking branch during its normal business hours and/or upon booking this shipment.

**3.**

This rate is contingent upon successful and on-time completion of all load requirements as orally stipulated or written on this Addendum and rate may be subject to reduction if Carrier fails to complete any applicable terms and conditions. Rate may be reduced if load picks up or delivers after originally scheduled time and date. Carrier acknowledges that failure to complete any terms and conditions on this shipment may jeopardize or result in loss of future business opportunities with C.H. Robinson and/or cancelation of the Agreement.

**4.**

Accessorial charges (including but not limited to labor, detention, and/or layover charges) must be authorized and approved prior to or at time of occurrence. C.H. Robinson will not provide any reimbursement of any non, prior-approved accessorial charges. Carrier shall ensure the bill of lading is notated either when handling is required or when detention occurs, that a lump sum receipt is provided when a lump sum is hired, and/or that both are included as supporting documents with the Carrier's invoice. All overage, shortage, and damage must be reported to C.H. Robinson immediately, at time of occurrence, and noted on the bill of lading.

**5.**

C.H. Robinson's Customer requires that Carrier provide, through C.H. Robinson, the following electronic shipment status updates via EDI, NavisphereCarrier, the Navisphere driver app, or some other electronic method of providing shipment status updates (unless otherwise specified on this confirmation): - Arrival at and departure from Shipper(s) within thirty (30) minutes of occurrence; - A minimum of one check call per day, prior to 10:00am, each day that Carrier is in possession of this shipment; and - Arrival at and departure from Receiver(s) within thirty (30) minutes of occurrence.

**6.**

For any problems or issues after regular business hours or over the weekends, please contact C.H. Robinson at (888) 278-9441.

**7.**

For this shipment, Carrier agrees it shall be in possession of relevant and applicable cargo insurance coverage in an amount sufficient to cover the loss or damage of the cargo being transported. Carrier's cargo insurance policy must not exclude from coverage any commodities or cargo carried on this booking. If Carrier's cargo insurance policy contains a schedule of covered vehicles or equipment, Carrier will not transport any cargo on this booking using a vehicle and/or equipment that is not listed as scheduled on Carrier's cargo insurance policy.



# SUPPLEMENT TO THE BILL OF LADING

Page: 2

Bill of Lading Number: 9923171

## CUSTOMER ORDER INFORMATION

### ADDITIONAL SHIPPER INFO

PLACE PLACARD PALLET WITH CUSTOMER PO# INCLUDE A POLY SHEET WRAP ON PALLETS OF STAR FLAKE DENDRITIC - F113020007G OR F113020000G - PLACE POLY TOP COVER ON LOADS PLEASE MAKE SURE THAT ALL PRODUCTS SHIPPED TO FNA HAVE THE GREATER OF A MINIMUM OF SIX (6) MONTHS SHELF LIFE OR AT LEAST 50% OF THE STANDARD ITEM SHELF LIFE REMAINING

**\*\*Delivery Date: 07/29/2024\*\***

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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(a) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		833	CTNS	42,066.50		n/a	46260	55
17	PLTS	833	CTNS	42,066.50		GRAND TOTAL		





Date: 7/29/2024

## BILL OF LADING

Page 1 of 2

## SHIP FROM

Name: Morton Salt  
Address: 4101 EMPIRE RD  
City/ST/Zip: KANSAS CITY, MO 64120  
TMS#:

FOB: ☐

## SHIP TO

Name: FUCHS NORTH AMERICA  
Address: 1951 N 42ND ST  
Address:  
City/ST/Zip: GRAND FORKS, ND 58203-0837

Do Not Deliver Before Date: 07/29/2024

Delivery Requested Date: 07/26/2024

FOB: ☐

## SEND FREIGHT BILL TO:

Name: FUCHS NORTH AMERICA  
Address: 1951 N 42ND ST  
Address:  
City/ST/Zip: GRAND FORKS, ND 58203-0837

Bill of Lading Number: 9923171



CARRIER NAME: Morton Salt Customer Pick Up  
Trailer number: PTLZ244787  
Seal number(s): 7004718

SCAC: CPU9  
Pro Number:

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

Prepaid ☐ Collect ☒ 3rd Party ☐

☐  
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

Order ID: 202586501-

CID #: 5206825415

Sales Order ID: 5102825921

SPECIAL INSTRUCTIONS:

PLEASE MAKE SURE ORANGE SHRINK-WRAP IS INTACT AT DELIVERY &amp; NOTE ALL DAMAGES ON THE SIGNED DELIVERY RECEIPT

## CUSTOMER ORDER INFORMATION

PO NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO (PALLET TYPE)	(COUNT)
464010	833	42,066.50	0.42	Y N	WHITE	17
GRAND TOTAL	833	42,066.50	0.42			17

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. (See Section 20) of NMFC Item 348</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		833	CTNS	42,066.50		see addendum page for item details		
		Total Pallet weight		765.00				
17	PLTS	833	CTNS	42,831.50		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.  
Geodis Logistics, LLC

Agent for Shipper

## 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.

7/29/2024 10:16:48 AM

## 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.

7/29/2024 10:20:30 AM

Signature

Date

Number of Pieces



Date: 7/29/2024

## BILL OF LADING

Page 1 of 2

## SHIP FROM

Name: Morton Salt  
Address: 4101 EMPIRE RD  
City/ST/Zip: KANSAS CITY, MO 64120  
TMS#:

FOB: ☐

## SHIP TO

Name: FUCHS NORTH AMERICA  
Address: 1951 N 42ND ST  
Address:  
City/ST/Zip: GRAND FORKS, ND 58203-0837

Do Not Deliver Before Date: 07/20/2024  
Delivery Requested Date: 07/26/2024

FOB: ☐

## SEND FREIGHT BILL TO:

Name: FUCHS NORTH AMERICA  
Address: 1951 N 42ND ST  
Address:  
City/ST/Zip: GRAND FORKS, ND 58203-0837

Bill of Lading Number: 9923171



CARRIER NAME: Morton Salt Customer Pick Up  
Trailer number: PTLZ244787  
Seal number(s): 7004718

SCAC: CPU9  
Pro Number:

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

Prepaid ☐ Collect ☒ 3rd Party ☐

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

Order ID: 202586501-

CID #: 5206825415

Sales Order ID: 5102825921

SPECIAL INSTRUCTIONS:

PLEASE MAKE SURE ORANGE SHRINK-WRAP IS INTACT AT DELIVERY &amp; NOTE ALL DAMAGES ON THE SIGNED DELIVERY RECEIPT

## CUSTOMER ORDER INFORMATION

PO NUMBER	# PKGS	WEIGHT	CUBE	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO (PALLET TYPE) (COUNT)
464010	833	42,066.50	0.42	Y N	WHITE 17
GRAND TOTAL	833	42,066.50	0.42		17

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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(a) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
		833	CTNS	42,066.50		see addendum page for item details		
Total Pallet weight				765.00				
17	PLTS	833	CTNS	42,831.50		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.

Rec 7/30/24

## 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.

## Trailer Loaded:

☒ By Shipper  
☐ By Driver

## Freight Counted:

X By Shipper  
☐ By Driver/pallets  
same to contain  
☐ By Driver/Pieces

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

Geodis Logistics, LLC

Agent for Shipper

## 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.

Signature:   
Date: 7/29/2024 10:20:30 AM  
Number of Pieces: \_\_\_\_\_