

**Bill to:**

LONGSHIP (QUALITY LOGISTICS LLC/KY)
P.O. BOX 12590 only ps +30,
Lexington,
KY,
40583

Invoice Date: 08/05/2024

Invoice #: 494130

Terms: NET 30

Due Date: 09/05/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/03/2024		100 TIMBERLINE DR HAZLE, HAZLE TOWNSHIP, PA 18202 - 1900 NORTH ST, MUSKOGEE, OK 74403			
			1	\$2,100.00	\$2,100.00

TOTAL
\$2,100.00

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



Rate Confirmation

LS PO#: 494130

Longship

P.O. Box 12307 - Lexington, KY 40582

Phone: (855) 440-2828 Ext: 1189 - Fax: (727) 231-4743 - Email: jmcclure@longship.us

8/3/2024 8:56 am

Load Information

LS PO#: 494130 Trailer: Van or Reefer Size: 53 ft Temperature: DRY
Pick Up Date: 08/03/2024 Delivery Date: 08/05/2024 Weight: 37,200

Carrier Information

Carrier: ROYAL3 INC MC: 944686 Phone: (630) 485-7370 Fax: (630) 485-6980
Driver: RAPHAEL Driver Cell: (347) 794-8768
Dispatcher: STERLING Dispatcher Phone: (630) 566-0616
Estimated Rate (To The Truck): \$2,100.00

Rate	Description	Quantity	Total
\$2,100.00	FLAT	1	\$2,100.00

(Rates based upon weight or count will be calculated from the quantities loaded.)

Carrier IS NOT Responsible For Unloading Charges

Carrier IS NOT Responsible For Pallet Exchange

Pick Ups

Shed	City	State	Zip	Date	Time	Phone	PU Number
NIAGARA - HAZLE TOWNSHIP	TOWNSHIP	PA	18202	8/3/2024	2100 APPT		36595777
Physical Address: 100 TIMBERLINE DR HAZLE		Shipping Hours:					
Commodities: 24 PALLETS HYDRATION DRINKS		Weight:		Pallet Count:		Case / Piece Count:	

Deliveries

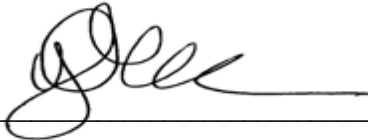
Consignee	City	State	Zip	Temp	Date	Time	Phone	Delivery PO
CUSTOMIZED DISTRIBUTION SERVICE	MUSKOGEE	OK	74403	DRY	8/5/2024	1400 APPT		TO-PH-0008828
Physical Address: 1900 NORTH ST		Receiving Hours:						
		Weight:		Pallet Count:		Case / Piece Count:		

SPECIAL INSTRUCTIONS: DETENTION IS CASE BY CASE AND DOES NOT APPLY TO FCFS SHIPPERS, FCFS RECIEVERS, OR PRODUCE LOADS. ALL OVERAGES, SHORTAGES AND DAMAGES MUST BE REPORTED BEFORE DRIVER LEAVES RECEIVER TO AVOID DEDUCTION PENALTIES. FLATBED, SD AND RGN LOADS MUST HAVE STRAPS OR CHAINS TO SECURE THE LOAD. MUST HAVE TARPS TO COVER THE ENTIRE LOAD. CARRIER MUST SECURE/STRAP PRODUCT ACCORDING TO SHIPPER INSTRUCTIONS. LONGSHIP IS NOT RESPONSIBLE FOR DAMAGED TARPS OR DAMAGED PRODUCT. ONCE LOADED, DRIVER MUST CONFIRM WITH SHIPPER THAT THE LOAD IS SECURED PROPERLY BEFORE LEAVING THE FACILITY. ANY DAMAGES TO EQUIPMENT DUE TO NOT PROPERLY SECURING THE LOAD IS THE CARRIERS RESPONSIBILITY. IN THE EVENT OF A REJECTION OF ANY KIND CARRIER IS RESPONSIBLE FOR RE-DELIVERING THE REJECTED PRODUCT AND COMPENSATION WILL BE NEGOTIATED ON A CASE-BY-CASE BASIS AND WILL NOT EXCEED \$2/MILE. IF THE CARRIER DOES NOT ACCEPT THESE TERMS, CROSS DOCKING/RECOVERY TRUCK FEES WILL BE TAKEN FROM THEIR ORIGINALLY AGREED UPON RATE. POD & UNLOADING/LUMPER RECEIPTS MUST BE TURNED IN

**WITHIN 24 HOURS OF DELIVERY OR A \$200 FINE WILL INCURE. EMAIL TO
JMCCLURE@LONGSHIP.US OR TEAMMCCLURE@LONGSHIP.US**

1. For prompt payment please email all paperwork including BOLs, Lumper receipts, Carrier Invoice, etc. to accounting@longship.us or if originals are required mail them to P.O. Box 12590 Lexington, KY 40583. For Quick Pay please email all paperwork to quickpay@longship.us or upload through the TriumphPay App.
2. This load is subject to all terms and conditions of the Broker- Carrier Agreement and all quick pay fees are subject to change at any time without prior notification.
3. All Drivers are required to check call every day (including Sat., Sun., and holidays), between 8:00am and 9:00 am Eastern Time. Failure to provide timely check calls could result in a penalty against the carriers final settlement.
4. Longship is available 24 hours a day 7 days a week. Failure to call immediately could result in a penalty against the final settlement.
5. Driver must have a minimum of 2 load locks to secure the load.
6. A fee of \$7.50 per pallet will be charged on loads that the carrier is responsible to supply pallets for exchange and they do not.
7. If any loads are sealed the driver/carrier cannot break any seal or there will be a claim charged to the carrier.
8. Unless originals are required please FAX or EMAIL BOLs to your LS Crew Member email directly to accounting@longship.us. Once paperwork has been received (whichever comes first via e-mail, fax, or mail), no further adjustments can be made.
9. Unloading receipts must be included with initial submission or they will NOT be reimbursed .
10. Detention is handled on a case by case basis and carrier MUST notify LS Crew Member 1 hour before detention begins to accrue. Note: Detention does not apply to produce loads. Loads delivered late may be subject to late fees.
11. Advances are limited to 40% of the linehaul rate.
12. Longship Full truckload shipments (FTL) may NOT be paired with other Less than truckload (LTL) shipments without written permission from a Longship Crew Member or deductions may apply.

If you have any comments or concerns about your experience with Longship, please email us at info@longship.us. Your feedback is very important to us. Thank you for helping us better serve our customers!



Jordon McClure

LS REPRESENTATIVE SIGNATURE

Electronically Signed By RIKI KOVACEVIC On 08/03/2024



CARRIER REPRESENTATIVE SIGNATURE

*** IMMEDIATELY FAX A COPY OF THIS SIGNED CONFIRMATION TO (727) 231-4743**

Load Summary

Estimated Rate (To The Truck): **\$2,100.00**

First Pick:

NIAGARA - HAZLE TOWNSHIP	100 TIMBERLINE DR HAZLE	TOWNSHIP	PA	18202
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Last Drop:

CUSTOMIZED DISTRIBUTION SERVICE	1900 NORTH ST	MUSKOGEE	OK	74403
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STRAIGHT BILL OF LADING - SHORT FORM - Not negotiable

Niagara Bottling, LLC

Page 1 of 1

Date: 08/03/24 7:28 PM		SHIP FROM		Bill of Lading Number: 36595777	
Name: HAZ		Master Bill of Lading Number: 57126828		Customer PO #: TO-PH-0008928	
Address: 100 Timberline Dr.		Reference #:		Delivery #:	
City/State/Zip: Hazle Township, PA 18202		SID#: 57126828		Seal Number: 18384874	
FOB: <input type="checkbox"/>		SHIP TO		CARRIER DETAILS	
Name: PRIME HYDRATION LLC		Carrier Name: CUSTOMER PICKUP		Address: 2560 PHILADELPHIA AVE.	
Location #: 401 S. 41ST ST E		City/State/Zip: ONTARIO CA		91761	
City/State/Zip: MUSKOGEE, OK 74403		SCAC: CPU		Pro number: W97039	
CID#: FOB: <input type="checkbox"/>		Trailer number: 18384874		Seal Number: 18384874	
Customer Phone:		Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>		Customer Pick Up <input type="checkbox"/>	
Freight Charge (freight charges are prepaid unless marked otherwise)		POD INSTRUCTIONS: Carrier FAX (909) 494-4456		Or Email To: Orders@niagarawater.com	
Terms:		TO:			
Customer Order Information					
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID
3024	45360	3024	24	PHY12Z15PLDCHT	PH12Z01LMN 12Z AS PRIME LEMONADE 15P T.126 OH
				UPC Code	Weight
				NONE	39923 lbs
				Totals	
				3024	45360
				3024	24
				39923 lbs	
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (
Receiving Stamp:					
CARRIER					
CARRIER SIGNATURE/PICKUP DATE			If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the back of this bill of lading. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
Print Name:			Consignor Signature		
Date			Date		
COD Amount: \$			LTL ONLY NMFC # CLASS		
0			0		
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.			Driver Name: rafael fals		
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and carrier has the U.S DOT emergency response guidebook or equivalent documentation in the vehicle.			Driver Initials: NBL Initials:		
CARRIER INSTRUCTIONS					
Driver: Should you encounter any delays preventing the on time delivery of this shipment, please dial 909-230-4486 for assistance.					



STRAIGHT BILL OF LADING - SHORT FORM - Not negotiable

Niagara Bottling, LLC

Page 1 of 1

Date: 08/03/24 7:28 PM

BILL OF LADING

SHIP FROM

Name: HAZ
Address: 100 Timberline Dr.
City/State/Zip: Hazle Township, PA 18202
SID#: 57126828 FOB: ☐

Bill of Lading Number: 36595777
Master Bill of Lading Number: 57126828
Customer PO#: TO-PH-0008828
Reference #:
Delivery #: 36595777
Shipment #: 57126828

SHIP TO

Name: PRIME HYDRATION LLC
Location #:
Address: 401 S. 41ST ST E
City/State/Zip: MUSKOGEE, OK 74403
CID#: FOB: ☐
Customer Phone:

CARRIER DETAILS

Carrier Name: CUSTOMER PICKUP
Address: 2560 PHILADELPHIA AVE.
City/State/Zip: ONTARIO CA 91761
SCAC: CPU Pro number:
Trailer number: W97039
Seal Number: 18384874

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

Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To: Orders@niagarawater.com

Customer Order Information

Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
3024	45360	3024	24	PHY12Z15PLDCHT	PH12Z01LMN	PH12Z01LMN 12Z.AS.PRIME LEMONADE.15P.T.126.CH	NONE	39923 lbs

Totals

3024	45360	3024	24					39923 lbs
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All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (

Receiving Stamp:

CARRIER

CARRIER SIGNATURE/PICKUP DATE

Property described above is received in good Order, except as noted.

Print Name: 

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.

If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.
Consignor Signature _____
Date _____

COD Amount: \$

LTL ONLY

NMFC #

CLASS

0

FACILITY CHECKOUT

Appt Time: 8/3/24 6:00 PM
Check In Time: 8/3/24 5:59 PM
Check Out Time: 8/3/24 7:28 PM
Delivery Time: 8/5/24 8:59 AM

Driver Name: rafael fais

Driver Initials: _____

NBL Initials: _____

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.

CARRIER INSTRUCTIONS

Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.

8/5/24