



MC: 609862

RATE AGREEMENT & ADDITIONAL TERMS

**** PLEASE READ ****

This agreement is also subject to the terms of the carrier agreement previously executed between our companies.

***Shipper Will Verify at Time of Arrival the MC# Of Carrier Provided by FreightEx to pick up the Load. Any Discrepancy, Shipper Will Notify FreightEx of MC# Checked in & Delay Loading until Approval Is Given by FreightEx to Load the MC# & Carrier Name

***If Load Is Double Brokered to a Different Carrier / MC# Number Than What Is on The Load Confirmation, The Load Confirmation & Agreed to Rate Is Considered Null & Void. Carrier Agrees That Only Tractors & Trailers Covered by The Valid, Existing Cargo & Liability Insurance Will Be Used to Transport This Load. Any Substitutions in Carriers, Service, or Other Modes of Transportation Such as Railroad or Intermodal Are NOT Permitted & Will Result in Rate Reduction / Non-Payment to Carrier at FreightEx Discretion

***All Lumpers & Accessorial MUST be reported directly to booking agent via Phone or Email within 48 hours of occurrence or carrier is subject to Non-Reimbursement for Accessorial Amount

**Legible Receipts for all Lumper/Accessorial related charges must be emailed to booking agent & accounting@gofreightex.com along with BOLS/PODS within 48 hours of delivery or carrier is subject to Non-Reimbursement/ Non-Payment

***Carriers Authorized Signature on This Confirmation Verifies Carrier has Insurance in the Limits Required by FreightEx for any Loss or Damage to Shipment &/or Liability to the General Public

***Hours of Service are the Sole Responsibility of the CARRIER, & CARRIER Agrees to Comply with all Local, State, & Federal Laws & Regulations Including, But Not Limited to Those Set Forth by the DOT & Other Governing Agencies.

***Carrier Agrees Delivery & Pick-up Dates & Hours Do NOT Require CARRIER to Violate Hours of Service Regulations. Routing Instructions, If Any, are for Information | Purposes Only

1. Carrier must call to confirm TEMPERATURE, ADDRESS, & PRODUCT DESCRIPTION. If BOL differs from confirmation truck will be liable for damages, loss of cargo, \$ or extra miles incurred.
2. Appointment time Delays for ANY REASON to SHIPPER or RECEIVER must be communicated to FreightEx OR \$100 deduction PER HOUR can be withheld from carrier pay.
3. Detention rates vary per customer. Truck must check in on time & FreightEx must be contacted 2hrs after check in. Detention starts 3hrs after appointment time. – Maximum Detention Pay is \$25 Per Hour after 3 hours past appointment time with a maximum of \$200 per day.
4. Detention is paid in full one (1) hour increments after full sixty (60) minutes has passed to qualify for next hour of detention.
5. Layover Pay has a Maximum of \$200 Per Day & is also at the customer & booking agents discretion. Layover Pay is nonnegotiable by carrier for any reason & carries a maximum amount of \$200 per 24 hours after the detention time kicks in.
6. TONU rate is \$150 Maximum, regardless of empty miles before the load.
7. If you require FreightEx to Issue a wire money code for you for any reason, there will be a 4% fee along with a check code fee.
8. Freight is to be run dedicated with no additional unauthorized freight or consolidation unless specifically noted as "Partial" or "LTL" on this rate confirmation.
9. If PODs are not submitted to FreightEx by carrier within 5 days of delivery date \$250 Rate Deduction is applied to carrier.
10. All loads paid by CWT are paid by actual delivered product weight.

** By signing, I acknowledge that I have read & understand the terms & conditions that FreightEx Logistics has set forth on this contract. I also understand that failure to adhere to these terms & conditions may result in a rate reduction at the discretion of FreightEx Logistics. **

Sign: _____

Date: _____

Company: ROYAL3 INC



*** Load Confirmation ***
FreightEx Logistics, LLC
4720 Gateway Dr
Grand Forks, ND 58203

Load #: 6552494
Order Type DRY

MC: 609862

| | | | | | |
|-----------------|------------|----|-------|-----------------|------------------|
| Carrier: | ROYAL3 INC | | | Contact: | ZIGI FREIGHT INC |
| | CHICAGO | IL | 60638 | Phone: | 630-485-7370 |
| Date: | 08/12/2024 | | | Fax: | 630-485-6980 |

| | | | | |
|--------------|---------------|---------|-------------------|---------------------|
| Order | Order: | 6552494 | Commodity: | Freight All Kinds |
| | Miles: | 760.0 | Weight: | 0.0 |
| | Temp: | | Trailer: | Van or Reefer (DAT) |
| | BOL: | | | |

| | | | | |
|-------------|-----------------|------------------------------|----------------------|-----------------------------|
| PU 1 | Name: | Global Sterilization, Inc #3 | Date: | 08/12/2024 0800 |
| | Address: | 605 Wayland Ave S | | 08/12/2024 1300 |
| | | SIOUX FALLS SD 57101 | Contact: | |
| | Phone: | | Drvr Ld/Unld: | No driver loading or unload |

Instructions

Global Sterilization, Inc #3 - PICK UP /RELEASE NUMBER:
SO-03312

| | | | | |
|-------------|-----------------|---------------------------|----------------------|-----------------------------|
| SO 2 | Name: | Hearthside Food Solutions | Date: | 08/13/2024 1400 |
| | Address: | 3061 Shaffer Ave | | |
| | | KENTWOOD MI 49512 | Contact: | General |
| | Phone: | 616-284-4084 | Drvr Ld/Unld: | No driver loading or unload |

Instructions

Global Sterilization, Inc #3 - PICK UP /RELEASE NUMBER:
SO-03312

Payment**Carrier Freight Pay:** \$1,600.00 **USD****Total Carrier Pay:** \$1,600.00 **USD*******Email invoices/POD to accounting@gofreightex.com****(Payment terms are net 28 days)**

Agreement**Please sign and Email back to:****nick@gofreightex.com****BOOKING AGENT:****Nick Schaefer****Phone: 701-203-4469**

Sign: _____ Title: _____ Date: _____

Dispatch Direct Phone #: _____

Driver Phone #: _____



INVOICE

BILL TO:

FreightEx Logistics
4720 Gateway Drive,
Grand Forks,
ND,
58203

INVOICE DATE: 08/13/2024**INVOICE #:** 6552494**TERMS:** NET 30**DUE DATE:** 09/13/2024

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|---------------|---|----------|------------|------------|
| 08/12/2024 | | 605 Wayland Ave S, Sioux Falls, SD 57101 - 3061 Shaffer Ave, Kentwood, MI 49512 | | | |
| | | Freight Income | 1 | \$1,600.00 | \$1,600.00 |

TOTAL

\$1,600.00

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**

STRAIGHT BILL OF LADING - SHORT FORM - File Copy

RECEIVED, subject to the classifications and tariffs in effect on the date of issue of this Original Bill of Lading.

BOL#: 1085
Date: 8/12/2024
Page: 1 of 1

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery as said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in the Uniform Freight Classification in effect on the date hereof, if this is a rail, or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of said bill of lading, including those on the attachment thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

SHIPPER (FROM)

GLOBAL STERILIZATION AND FUMIGATION
605 S. WAYLAND AVE
SIOUX FALLS, SD 57103

PRO #:

CH20K 11 - 11.45g117 CH20K OUT. 7:55pm

CONSIGNEE (SHIP TO)

HEARTHSIDE FOOD SOLUTIONS
3061 SHAFFER AVE SE
KENTWOOD, MI 49512

CUST. ORDER#: T-00262/ SO-03312

OUR ORDER#: 072524-01

DEPT:

ROUTE:

Special Instructions:

SEND FREIGHT BILL TO: (If different than SHIPPER above)

Freight charges are:

PREPAID

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:

C.O.D. _____ AMOUNT

C.O.D. FEE _____

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

Prepaid ☐ Collect ☐

(Signature of Consignor)

| NO. PKGS | UM | HM (X) | DESCRIPTION OF ARTICLES, KIND OF PACKAGE, SPECIAL MARKS AND EXCEPTIONS | WEIGHT (subject to correction) | CLASS | NMFC | SUB |
|----------|----|--------|--|--------------------------------|-------|------|-----|
| 21 | | | 840 BAGS SUNFLOWER 35224199B03312 | 42000 | | | |

Tracy Tram 8/13/24

| | | | |
|----|--|-----------|--------|
| 21 | MARK "X" IN THE HM COLUMN TO DESIGNATE HAZARDOUS MATERIALS AS DEFINED IN DOT REGULATIONS | 42000 LBS | TOTALS |
|----|--|-----------|--------|

* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight."

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby stated by the shipper to be not exceeding

PER

* The fire boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Uniform Freight Classifications."

* Shipper's imprint in lieu of stamp; not a part of bill of lading approved by the Interstate Commerce Commission.

SHIPPER'S CERTIFICATION 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 Department of Transportation.

Per

SHIPPER: GLOBAL STERILIZATION AND FUMIGATION

PER:

Received by: HEARTHSIDE FOOD SOLUTIONS

Carrier/Driver:

EMERGENCY RESPONSE NUMBER:

CONTACT:

REGISTERED COMPANY:

PLACARDS REQUIRED

SUPPLIED BY DRIVER

3

Receiving & Carrier Signatures

Date