

Carrier Load Confirmation - 7119986

Driver must call prior to heading to shipper Call (800) 234-5863 or (470) 242-7427 and ask for Load 7119986

08/15/24 14:46 (EST)

ATTENTION: CARRIER CONTACT

CONOR

BRZ*/dba RIKI TRANSPORTATION INC. 8225 LECLAIRE AVE BURBANK, IL

(708) 303-5150

Sent To:conor@rtbrz.com

LOAD REQUIREMENTS

Equipment Type: DRY VAN

Special Equipment Needs:LOAD LOCKS

Equipment Size:53

Temp: Hazmat: NO

Estimated Weight: 44,000

ALLEN LUND BOOKING CONTACT

Contact: Sean Asip

Allen Lund Company, Atlanta

Tel: (800) 234-5863 Ofc: (470) 242-7427

Cell: (770) 596-9799 Fax: (800) 688-5863

Email: sean.asip@allenlund.com After Hours: (770) 596-9799

Comments:-

SPECIAL INSTRUCTIONS:

*Driver will be required to scale the load prior to being offloaded in eitherWinchester, VA or Fernley, NV depending upon delivery location. A scale isprovided at a Trex facility in both cities free of charge. Once the driveroffloads, then they will be required to scale out again to provide empty weightticket. Please make sure all drivers have the PO number on the BOL and weighttickets. This is crucial in determining the volume of plastic and a requirementfor billing purposes. The scale tickets must be provided at the time ofinvoicing to be paid for the load along with the bill of lading. Failure to doso could result in non-payment of the load. For combo loads or Triple loads, the drivers need to scale at each stop if available or they could go over their hour allotted time. Thank you, .

*To be in compliance, it is mandatory that tracking is started two hours prior to arrival at the pick-up location. For this reason, pick-up numbers will be provided once the ALC tracking app has been downloaded and activated. Please download and login using your cell phone # with no dashes (ex:8012345841) as your username and password. Please click the link https://allenlund.app.link/CwhJK3xMJtb in order to download our app. ALC App User guide - https://drive.google.com/file/d/19UGPx0xQDBxaLhAZMnVqEXycYvTo9ixm/view?usp=sharing

How to use the ALC Carrier App - https://youtu.be/hFePK0SSX3M

How to reset your password in the ALC Carrier App - https://youtu.be/cjg4OxSINdk

How to download the ALC Carrier App - https://www.youtube.com/watch?v=yyTUWoiJeUg

For Apple: https://apps.apple.com/us/app/alc-carrier/id1474691071

 $For Android: https://play.google.com/store/apps/details?id=com.allenlund.ALC_Tracker.$

*--PLEASE HAVE THE DRIVER CALL FOR DISPATCH. --HAVE THE DRIVER CALL WHEN LOADED --THE QUOTED RATE INCLUDES ALL SURCHARGES. --THE SHIPPER'S SEAL ON THE TRAILER DOORS MUST NOT BE BROKEN UNTIL THE TRUCK ARRIVES AT THE DESTINATION AND THE RECEIVER ACKNOWLEDGES THAT THE SEAL IS STILL INTACT. FAILURE TO DO THIS COULD RESULT IN THE REJECTION OF THE PRODUCT AND THE COSTS INCURRED TO HELP RESOLVE THE MATTER WILL BE THE CARRIER'S RESPONSIBILITY. --THANK YOU FOR THE TRUCK..

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) 234-5863.

PICKUP INFORMATION

| Pick UP #1: | SACO POLYMERS |
|-------------|-----------------------|
| Address: | 1213 PENNSYLVANIA AVE |
| | SHEBOYGAN, WI 53081 |
| Contact: | SHIPPING |
| Phone: | (920) 254-4338 |

| Pick Up Date: | 08/16/2024 Friday |
|---------------|-------------------|
| Pick Up Time: | 09:00 |
| FCFS Notes: | |
| Appt Conf #: | |
| PU/PO #: | SS 235546 |
| BOL#: | |
| | |

Directions:

| Line# | Commodity/Product | Description | | Quantity | 1 | Pallet | ts | PU PO# | DEL/PO# | BOL# | Weight |
|-------|-------------------|-------------|--------|----------|-----|--------|----|--------|---------|------|--------|
| 1 | PLASTIC/PVC | | | 1 | PLT | | | | | | 43,000 |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | 1 | 1 | Total: | 1 | | Total: | 0 | | | | |
| | | | | | | | | | | | |

DELIVERY INFORMATION

| Delivery #1: | WINCHESTER POLY RECEIVING CENTER |
|--------------|----------------------------------|
| Address: | 351 APPLE VALLEY RD |
| | WINCHESTER, VA 22602 |
| | |
| Contact: | |
| Phone: | (540) 542-6487 |

| Delivery Date: | 08/19/2024 Monday |
|----------------|-------------------|
| Delivery Time: | 08:00 |
| FCFS Notes: | |

Directions:

| Commodity/Product | Description | Quantity | | Quantity Palle | | ets |
|-------------------|-------------|----------|---|----------------|--------|-----|
| PLASTIC/PVC | | 1 | | PLT | | |
| | | Total: | 1 | | Total: | 0 |

| RATE DETAILS | | | | | | | | |
|--------------|-------------|-----------------|----------------------|--------------------------|--|--|--|--|
| | | | | | | | | |
| Description | UOM | Rate | QTY | Total | | | | |
| | FLT | \$2,400.00 | 1 | \$2,400.00 | | | | |
| | | | | \$0.00 | | | | |
| | | | | \$0.00 | | | | |
| | | | | | | | | |
| | | | | \$2,400.00 | | | | |
| | | | | \$2,400.00 | | | | |
| | Description | Description UOM | Description UOM Rate | Description UOM Rate QTY | | | | |

INVOICE INFORMATION

FOR STANDARD PAY or ACH, PLEASE EMAIL YOUR FREIGHT BILLS TO: billing@allenlund.com or FAX TO: (800) 375-5109

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: atlantadry@allenlund.com or (800) 688-5863. 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 #7119986-AT on all paperwork before emailing, faxing or mailing.

Please direct payment inquiries to: apatlanta@allenlund.com or by calling 800-234-5863.

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: (800) 688-5863 or EMAIL to: sean.asip@allenlund.com

| Riki Transportation INC dba BRZ | Conor Smith |
|---------------------------------|---|
| Carrier Name 08/15/2024 | Print Name of Authorized Signature Conor Smith |
| 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 #7119986



INVOICE

BILL TO: ALLEN LUND COMPANY LLC 4529 ANGELES CREST HWY LA CANADA, CA 91011 INVOICE DATE: 08/19/2024 INVOICE #: 7119986 TERMS: NET 30 DUE DATE: 09/19/2024

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|------------------|--|----------|------------|------------|
| 08/16/2024 | | 1213 Pennsylvania Ave, Sheboygan, WI 53081, USA - 351 Apple Valley Rd, Winchester, VA 22602, USA | | | |
| | | Freight Income | 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



SACO AEI POLYMERS, INC. 3220 CROCKER AVENUE SHEBOYGAN, WI 53081 UNITED STATES

ORIGINAL

Sold To

TREX COMPANY INC 130 EXETER DR WINCHESTER, VA 22603 UNITED STATES Phone: 540-542-6300

| Shipper ID / Sales Order SF045349 / SS235546 | Ship Date 8/14/2024 |
|---|------------------------|
| Ship Via / Carrier Name CPU / CUST PICK UP | Dock Code |
| Supplier Code | FOB SHIPPING POINT |

Third Party

Shipper

28 Skids

Ship To

Collect

TREX COMPANY INC 351 APPLE VALLEY RD WINCHESTER, VA 22602 UNITED STATES Phone: 540-542-6300

Prepaid

DOCK

| Customer | PLANT / DEST-CODE | Trailer | Terms | ASSY-PLANT | Quantity Shipped |
|-----------------|---------------------|------------------------|----------------------------|----------------|---------------------|
| 90002717 | | 24473 | NET 30 DAYS | 90002893 | 42,000.00 |
| Field Name | 100 mg | | Field Value | | |
| Mode of Transp | ort | | BLANK | | |
| Item Number / I | Description CUSTOME | R-ORDER- Custome | r Item Number / Descriptio | n Freight Clas | ss Quantity Shipped |
| | 749552 | All Masses were spirit | | 60 | 42,000.00 LB |
| LINXIDAN® LX | 4433 | | | | 28 Skids |

| | Shipment | Weight Summary | | | |
|------------------|-----------|----------------|-------------|--------------|----|
| Description | Quantity | Net Weight | Tare Weight | Gross Weight | UM |
| LINXIDAN® LX4433 | 42,000.00 | 42,000.00 | 2,520.00 | 44,520.00 | LB |
| | 42,000.00 | 42,000.00 | 2,520.00 | 44,520.00 | LB |

Amaser? 01501

9/18/24



SACO AEI POLYMERS, INC. 3220 CROCKER AVENUE SHEBOYGAN, WI 53081 UNITED STATES

ORIGINAL

Sold To

TREX COMPANY INC 130 EXETER DR WINCHESTER, VA 22603 UNITED STATES Phone: 540-542-6300

| Collect Prepaid | Shipper |
|---|------------------------|
| Supplier Code | SHIPPING POINT |
| Ship Via / Carrier Name CPU / CUST PICK UP | Dock Code |
| Shipper ID / Sales Order SF045349 / SS235546 | Ship Date 8/14/2024 |

onday pick-u

, Zip Code

Ship To

TREX COMPANY INC 351 APPLE VALLEY RD WINCHESTER, VA 22602 UNITED STATES Phone: 540-542-6300

Third Party

Uniform Domestic Straight Bill of Lading, adopted by Carriers in Official, Southern, Western, and Illinois Classification Territories.

March 15, 1922 as amended August, 1 1950 and June 15, 1941. UNIFORM STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - Not Negotiable

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 at 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 Official, Southern, Western and Illinois Freight Classifications in effect on the date hereof. If this is 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 the said bill of lading, including those on the back 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.

| 1 | 177 |
|----------|-------------------------------|
| SHIPPI | ER-SIGNATURE |
| Print Na | ame: Chris Lichterman 8-16-24 |
| Date: | 8-16-24 |
| | |
| Consign | ee Signature |
| Print Na | me: |
| Date: | |

| | | CONTROL OF THE PROPERTY OF | | |
|-------------|-----|----------------------------|---|--|
| Agent | 被差別 | | 1 | |
| Print Name: | | 1 | | |
| Date: | | | | |
| | | | | |

This load needs to deliver on 8/19/24 by ____am/pm Questions? - Phone 920-803-0778/24 hours a day