

Signature

Carrier Rate Confirmation

Load TR-0001623926-01

| | | - | | | | | | | | | 001020 | |
|-------------------------|------------------------------|-------------------------------|-------------------|-------|----------------|-----------|------------|------|---------|--|-----------------|--------------|
| Bill To T | AB LLC | | I | Phone | e (314) | 714-3408 | | | | | | |
| 4 | 824 Park 370 Blvd | | I | Fax | (314) | 714-3420 | | | | | | |
| F | lazelwood, MO 630 | 42 | I | Email | TABa | ccounting | @ArturE | xpre | ess.com | | | |
| Carrier Z | IGI FREIGHT INC | Driver Name | | | Truck | | | | | Customer Number | 10051613 | |
| Phone (6 | (630) 485-7370 Ext Driver Id | | | | Trailer | | | | | BOL Number | 10051613 | |
| | | Cell Phone | | | Team req | uired N | No | | | Pickup Number | 2024-00-092 | 255 |
| Fax (6 | 630) 485-6980 | Equipment Reefer temp/mode | 53 Van 0.0/Off | | Hazmat | 1 | No | | | PO Number Consignee Reference | 125183 | |
| Pickup | | | | | | | | | | | | Appointme |
| Company GOLDEN ALUMINUM | | UMINUM | | | | | P/U Number | | | 8/21/2024 08:00 - 8/21/2024 16:00 - FC | | |
| Address | 1405 E 14TH | ST | | | | | | | | | | |
| City, State, 2 | Zip Ft Lupton, CO | D 80621 | | | | | | | | | Hours | Of Operation |
| Phone | (303) 654-83 | 25 | | | | | | | | | | |
| Goods | De | escription | | | Weight | Volume | Uni | ts | Pallets | | | |
| FAK | FA | K | | | 44,000.0 | 0.0 | | 0 | 0 | | | |
| | | | Т | otal | 44,000.0 | 0.0 | | 0 | 0 | | | |
| | | | | | | | | | | | | |
| Delivery | | | | | | | | | | | | Appointme |
| Company | FLORIDA CA FL | N MANUFACTURING | G - WINTER HAV | ΈN | | | Del. Co | onf. | Number | 8/22/2024 08 | :00 - 8/23/2024 | 16:00 - FCF |
| Address | 100 Florida C | Can Way | | | P | OD ASAF | AFTER | DE | LIVERY | | Hours | Of Operatio |
| City, State, 2 | Zip Winter Haver | n, FL 33884 | | | | | | | | | | |
| Phone | (863) 557-62 | 83 | | | | | | | | | | |
| Goods | De | escription | | | Weight | Volume | Uni | ts | Pallets | | | |
| FAK | FA | ĸ | | | 44,000.0 | 0.0 | | 0 | 0 | | | |
| | | | Т | otal | 44,000.0 | 0.0 | | 0 | 0 | | | |
| | | Note | | | | | | | | Quantity | Rate | Amour |
| Pay Type | | Note | | | | | | | | | | |
| Pay Type FLAT | | Note | | | | | | | | 1 \$3 | 3,000.0000 | \$3,000.0 |

By signing this rate confirmation I agree that the driver assigned to p/u and deliver this shipment will allow the use of TextLocate and while the driver is assigned to this shipment, will turn on location services and keep them on during the life of the shipment. I understand that if the driver turns location services off or does not allow TextLocate to "ping" his/her location, a \$50.00 deduction (per incident) will be applied to this agreement. TAB LLC will respect the driver's off duty time and will not request updates during off duty hours (determined by the driver at the time of dispatch).

Rate includes all accessorial charges, i.e. stop-offs, loading/unloading fees, fuel surcharge, etc. Unloading or lumper fees (if applicable) will be paid only if TAB LLC is notified at the time of delivery with a Rate includes all accessorial charges, i.e. stop-offs, loading/unloading fees, fuel surcharge, etc. Unloading or lumper fees (if applicable) will be paid only if TAB LLC is notified at the time of delivery with a lumper receipt and the original bill of lading. For payment, your invoice must include the most recent rate confirmation, signed bills of lading and any applicable receipts. For detention payment, the Bill of lading must include IN/OUT times by the shipper or the consignee. No advance of any kind will be given unless negotiated prior to the rate confirmation being sent. A minimum of 3% will be charged for all advances. TAB LLC does NOT pay detention at first come, first serve facilities. Carrier agrees to indemnify and hold harmless Broker of and from any and all claims, demands, losses, causes of action, payments to Carrier in an effort to cover such losses. If this shipment is found to be Double Brokered, this agreement is void. A MINIMUM of \$50.00 may be deducted for a Comcheck. TAB must receive a picture or copy of the signed Bill of lading from the driver or carrier at the time of delivery. Failure to do so will result in a minimum of \$50.00 deduction per day until received. Text message, email and fax copies are all acceptable forms of POD.Payment Terms: 30 days upon receipt of invoice. This rate con must be signed and returned to TAB@ arturexpress.com, TAB-tracking@arturexpress.com or faxed back to 314-714-3420.

| BY | | | ВҮ | ALEKSROZUM | |
|------------|-------------------------|--------|---------|--------------------------|--------------------|
| Carrier | ZIGI FREIGHT INC DBA RO | OYAL 3 | Company | TAB LLC | |
| Phone | (630) 485-7370 Ext. 113 | Phone: | E-mail | ALEKS.ROZUM@arturexpres | s.com |
| Fax | (630) 485-6980 | | Phone | (314) 714-3408 Ext. 3451 | Fax (314) 714-3420 |
| Authorized | | | | | |





BILL TO: TAB LLC 4824 PARK 370 BLVD HAZELWOOD, MO 63042 INVOICE DATE: 08/23/2024 INVOICE #: TR-0001623926-01 TERMS: NET 30 DUE DATE: 09/23/2024

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|------------------|--|----------|------------|------------|
| 08/21/2024 | | 1405 14th St, Fort Lupton, CO 80621, USA - 100 Florida Can Wy, Bartow, FL 33830, USA | | | |
| | | Freight Income | 1 | \$3,000.00 | \$3,000.00 |

TOTAL

\$3,000.00

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 | | ading | Short Form Shipper's #: 20342 Carrier's #: 244 Faal# 159 |
|--|---|--|---|--|---|
| at: 1405 E. 14th, I | Ft. Lupton F | Customers Ca (Name of Carrier) ion and tariffs in effect on the rom: Golden Aluminum, Inc. | date of the Bill of Lac Ship Date: <u>8/</u> | | Delivery Date: 8/15/2024 |
| a subject to all the terms and cond tapplicable motor carrier classifical hipper hereby certifies that he is | itions of the Uniform Domestic Stratt I tion tariff is this is a motor carrier ship a tamiliar with all the terms and cou | ind conditions of packages unknown), marked, consigned, rees to carry to its usual place of delivery at said destination any portion of astir route to destination, and as its oeach pa all Of Lading set forth (1) in official, Southern, Western and nem. ditions of the said bill of Inding, including those on the er adn accepted himself and his assigns. | , minora blaza v | | |
| Consigned To: FLC | ORIDA CAN MANUR | ACTURING, LLC | (Mail | or street address at co | nsignee - For purposes of notification only) |
| Delivery Address: | FLORIDA CAN MA | NUFACTURING, LLC 100 Flo | rida Can Way Winter | Haven, FL 3383 | o es and governing tariffs provide for delivery thereof |
| Delivering Carrier: | Customers Carrier | | Car or Vehi | cle Initials: | No: |
| Shipping Ticket | No. Packages | Kind of Package, Description of Articles, Special Marks, and Excep | | Check Column | Subject to Section 7 of Conditions of Applicable bill of lading, if this shipment is to be delivered to the consignce without recourse on the consignor, the consignor shall sign the following statement: |
| P54943 | 6 | Aluminum Coils | 42804 | | The carrier shall not make delivery of this shipment without payment of freight and all other lawful |
| | 57/. | | | | and particular |
| | | And a start of the | | - All | (Signature Of Consignor) |
| | 2 | | | 1 | lă charpes are to be pre-paid, write or stasp bare: "To Be Prepaid." |
| pec #: | | The second second | | The second secon | |
| | ED, BRACED, SECURED AN | D CHECKED BY DRIVER | A. | | Received \$ to apply in prepayment of the charges on property |
| HIPPER: | | | | | described hereon. |
| Arrival Time | Appointment | ime Trailer Inspected | ? Loading C | omplete | Agent Or Cashier Per |
| | | | | | (The signature here acknowledges only the amount prepaid) |
| ver certifies that weig ermediate points. | ght of load, dunnage | and tractor/trailer does not excee | d legal weight to destinat | ion and | Charges Advanced: |
| ver's Signature: | OCar | Date: B- | -21-24 | | \$ |
| NSIGNEE: | | the state of the | I dias Complete | and the second s | Shipper's imprint in lieu of stamp; not a part of Bill |
| Arrival Time | Appointm | ent Time 0 | nloading Complete | | Of Lading approved by the Interstate Commerce Commission. |
| iver's Signature: | | Date: | | - | |
| | | | | | |
| lden Aluminum, | Inc. Shipper, | Per L | po | Agent, P | er |
| manent post office ad | dress of shipper. | 1405 E. 14th St., Ft. | Lupton, CO 8062 | 1 | |
| | ······································· | | | All co | il Gout 24 A-Q |
| | | | | 8.23. | 14 ADO |
| | | | | 0 21 | Wind . |