

Rate & Load Confirmation

LOGISTIFY SOLUTIONS LLC

PO Box 212
Flossmoor, IL, USA 60422
Phone: 864-334-7256
Fax:

| | | | |
|-------------|--------------------------------|---------------|------------|
| Dispatcher: | John L | LOAD # | 5719 |
| Phone #: | 864-334-7256 | Ship Date: | 2024-09-03 |
| Fax #: | | Today's Date: | 2024-09-03 |
| Email: | J.Logan@logistifysolutions.com | | |
| W/O: | | | |

| Carrier | Phone # | Fax # | Equipment | Agreed Amount | Load Status |
|------------------|--------------|-------|-----------|----------------|-------------|
| ZIGI FREIGHT INC | 630-485-7370 | | 53' Van | \$2,335.00 USD | Open |

| | | | | | |
|---|--------------------------|--|------------------------|------------------------|---|
| Shipper 1 | Date: 2024-09-03 | Purchase Order #: 1099124,1099109,1099094,1099101,1099143,1099146,1099175,1099176 | | | |
| Standard Restaurant Equipment 5675 South Valley View Las Vegas, NV, 89118 | Time: 9:00 AM | Major Intersection: | Shipping Hours: | Appointment: No | Description: Restaurant equipments |
| | Type: TL | | | | |
| | Quantity: | | | | |
| | Weight: 35000 lbs | | | | |
| Notes: *POD signed by both shipper and receiver so that our compliance approves payments | | | | | |

| | | | | | |
|--|--------------------------|---|-------------------------|------------------------|---|
| Consignee 1 | Date: 2024-09-04 | Purchase Order #: 1099217,1099207,1099207,1099194,1099200,1099202, ASD448 and 2 warranty units | | | |
| ARVESTA 879 S 4400 W Salt Lake City, UT, 84104 | Time: 8:30 AM | Major Intersection: | Receiving Hours: | Appointment: No | Description: Restaurant equipments |
| | Type: TL | | | | |
| | Quantity: | | | | |
| | Weight: 35000 lbs | | | | |
| Notes: unloading 5 pallets then loading 5 | | | | | |

| | | | | | |
|---|--------------------------|---|-------------------------|------------------------|---|
| Consignee 2 | Date: 2024-09-04 | Purchase Order #: 1099217,1099207,1099207,1099194,1099200,1099202, ASD448 and 2 warranty units | | | |
| Standard Restaurant Equipment 6910 Fair View Boise, ID, 83704 | Time: 12:30 PM | Major Intersection: | Receiving Hours: | Appointment: No | Description: Restaurant equipments |
| | Type: TL | | | | |
| | Quantity: | | | | |
| | Weight: 35000 lbs | | | | |
| Notes: same day delivery | | | | | |
| Consignee Notes: If the carrier failed to send the invoice within 72 hours after delivering the load will be subjected to a 20% reduction from the RC. You can send the invoice to Candace at c.ferro@logistifysolutions.com and copy j.logan@logistifysolutions.com in the email. | | | | | |

Carrier Pay: Line Haul: \$2335.00, **TOTAL: \$2335.00 USD**

Accepted By: Sterling Medica **Date:** 09/03/2024 **Signature:** *Sterling Medica*

Driver Name: Dayton **Cell #:** 727-810-0369 **Truck #:** 769 **Trailer #:** H03248



INVOICE

BILL TO:
LOGISTIFY SOLUTIONS LLC
18523 CLYDE RD
HOMEWOOD, IL 60430

INVOICE DATE: 09/04/2024
INVOICE #: 5719
TERMS: NET 30
DUE DATE: 10/04/2024

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|---------------|---|----------|------------|------------|
| 09/03/2024 | | 5675 South Valley View, Las Vegas, NV, 89118 - 6910 Fair View, Boise, ID, 83704 | | | |
| | | Freight Income | 1 | \$2,335.00 | \$2,335.00 |

| |
|--------------|
| TOTAL |
| \$2,335.00 |

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

LOGISTIFY SOLUTIONS LLC

P.O BOX 212
FLOSSMOOR, IL 60422
USA
Tel: 708-351-5009

Bill Of Lading

Seal # 052690

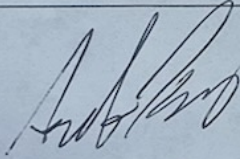
Trailer #

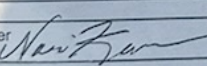
| | |
|-----------------|-----------------------------|
| Load Number | 5719 |
| BOL Number | 1 |
| Ship Date | 2024-09-03 |
| Delivery Date | 2024-09-04 |
| P.O. Number | 1099124,1099109,1099094,109 |
| Freight Charges | Prepaid |

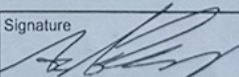
| | |
|---|--|
| Shipper | Consignee |
| Standard Restaurant Equipment 5675 South Valley View Las Vegas, NV, 89118 Tel: | ARVESTA 879 S 4400 W Salt Lake City, UT, 84104 Tel: |

| | |
|--|------------------------|
| 3rd Party Billing | Transportation Company |
| Logistify Solutions LLC PO Box 212 Flossmoor, IL, 60422 Tel: 708-300-8866 | COPY |

| # of pieces | Description of the goods, marks, exceptions | Weight in LBS. | Type | NMFC | HM | Class |
|-------------------|---|----------------------------|--------------------------|------|----|-------|
| | Restaurant equipments | 10000 | TL | | | |
| 5 | ASD448 | | | | | |
| 2 units | Warranty | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total Pieces 5 | | Total Weight 10000 LBS. | Emergency Response Phone | | | |

| | |
|--|---|
| Notes:  9/4/24 | C.O.D. Amount: \$0.00 |
| | C.O.D. Fee: Prepaid |
| | Declared Value: \$0.00 |
| | If at consignor's risk, write or stamp here |

| | | | |
|--|---------|-------------|---------------------------|
| Shipper  | Carrier | Date 9/3/24 | Number Of Pieces Received |
| Per | Per | Time | |

| | | | |
|----------------------------------|----------------|---|--------------------------------|
| Consignee Name Andrew Kennedy | Date 9/4/24 | Signature  | Number Of Pieces Received 5 |
|----------------------------------|----------------|---|--------------------------------|