



## INVOICE

**BILL TO:**

ARRIVE LOGISTICS  
7701 METROPOLIS DRIVE, BUILDING 15  
AUSTIN, TX 78744

**INVOICE DATE:** 10/29/2024**INVOICE #:** R62884**TERMS:** NET 30**DUE DATE:** 11/29/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/25/2024		1200 W. Markland Ave, Kokomo, IN 46901 - 5305 Metro St., San Diego, CA 92110			
		Freight Income	1	\$4,000.00	\$4,000.00

**TOTAL**

\$4,000.00

**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**



7701 Metropolis Dr | Bldg 15 Austin, TX 78744

Phone: (888) 861-0650 | Fax: (512) 872-5109

Have your driver call in for dispatch at (512) 236-5545 and reference the Arrive order 6074282

Load		Carrier		Truck	
Arrive Order	6074282	Carrier	Royal3 Inc	Equipment	Van
Cargo Value	\$100,000.00	Attn	Nikola Stamenkovic	Truck Number	
Total Miles	2282 Miles	Phone	(620) 485-7370	Driver	
Total Pallets	26 Pallets	Fax		Driver Phone	
Total Weight	8668 lbs				
Load Mode	TL				
Load EQ Type	Van Only				
EQ Size	53 ft				
Driver Requirements	Autotracking				
BOL #	LD0049375				
SO #	WSH0107486				
SO #	WSH0106066				
SO #	WSH0107443				
SO #	WSH0106879				
SO #	WSH0107490				
SO #	WSH0106177				
Rate Details					
LineHaul	\$3,064.38				
Fuel Surcharge	\$935.62				
Total	\$4,000.00				

#### HOW TO GET PAID!

All invoices must either be emailed to [invoices@arrivelogistics.com](mailto:invoices@arrivelogistics.com) OR directly uploaded via the 'Documents Tab' of a load in ARRIVENow Carrier.

#### DOCUMENTS NEEDED

- Carrier invoice
- All pages of the signed Proof of Delivery (POD)
- Rate confirmation
- All approved accessorial documents and receipts previously approved by your sales rep

#### PAYMENT TERMS

- Default payment terms are Net 30 from the date all required documents are received. You can select standard terms or our QuickPay option through TriumphPay.

#### GETTING STARTED ON TriumphPay

- Visit <https://secure.triumphpay.com/> to create an account with TriumphPay or if you already have a TriumphPay account, enter your login information.
- Once logged in, select Arrive Logistics as your broker and confirm the relationship through authentication.
- Select your preferred payment term, your payment type, and verify your carrier information.

Freight handled, railed, shipped by intermodal means, or transloaded by Carrier without prior approval from Arrive results in forfeiture of full payment to Carrier.



7701 Metropolis Dr | Bldg 15 Austin, TX 78744  
Phone: (888) 861-0650 | Fax: (512) 872-5109  
Have your driver call in for dispatch at (512) 236-5545 and reference the Arrive order 6074282

Pickup #1

Pickup Address	Appointment	Ref/PO#	Commodity	Weight
SYNDICATE SALES INC 1200 W. Markland Ave Kokomo, IN 46901	Oct 25, 2024 07:30 EDT	<b>BOL #</b>  LD0049375	Floral Products 26 PALLETS	8668 lb
	<b>Appt. Type</b> By Appointment Confirmed			

Driver Instructions: BY APPOINTMENT

Pickup Notes:

Delivery #1

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
AM Floral Supply LLC 7629 Fulton Avenue North Hollywood, CA 91605	<b>Earliest Date/Time</b> Oct 28, 2024 08:00 PDT	<b>Appointment #</b>  WSH0107486	Floral Products 1 PALLETS	891 lb
	<b>Latest Date/Time</b> Oct 28, 2024 14:00 PDT			
	<b>Appt. Type</b> FCFS Confirmed			

Special Requirements: Driver Unload

Driver Instructions: FCFS APPOINTMENT.

Delivery Notes:

Delivery #2

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
Frontier Imports Inc. 12534 Raymer Street North Hollywood, CA 91605	<b>Earliest Date/Time</b> Oct 28, 2024 08:00 PDT	<b>Appointment #</b>  WSH0106066	Floral Products 1 PALLETS	845 lb
	<b>Latest Date/Time</b> Oct 28, 2024 14:00 PDT			
	<b>Appt. Type</b> FCFS Confirmed			

Special Requirements: Driver Unload

Driver Instructions: FCFS APPOINTMENT.

Delivery Notes:

Delivery #3

Delivery Address	Appointment	Ref/PO#		Commodity	Weight
Shinoda Design Center 601 W Dyer Rd Santa Ana, CA 92707	<b>Appointment #</b>	WSH0107443		Floral Products	1590 lb
	<b>Earliest Date/Time</b>			1 PALLETS	
	Oct 28, 2024 08:00 PDT				
	<b>Latest Date/Time</b>				
	Oct 28, 2024 14:00 PDT				
	<b>Appt. Type</b>				
	FCFS				
	Confirmed				

Special Requirements: Driver Unload

Driver Instructions: FCFS APPOINTMENT.

Delivery Notes:

## Delivery #4

Delivery Address	Appointment	Ref/PO#		Commodity	Weight
USA Bouquet Co. 2834 La Mirada Dr. Suite B Vista, CA 92081	<b>Appointment #</b>	WSH0106879		Floral Products	2800 lb
	<b>Earliest Date/Time</b>			1 PALLETS	
	Oct 28, 2024 08:00 PDT				
	<b>Latest Date/Time</b>				
	Oct 29, 2024 14:00 PDT				
	<b>Appt. Type</b>				
	FCFS				
	Confirmed				

Special Requirements: Driver Unload

Driver Instructions: FCFS APPOINTMENT.

Delivery Notes:

## Delivery #5

Delivery Address	Appointment	Ref/PO#		Commodity	Weight
Ramirez Wholesale Flowers, Inc. 2575 Pioneer Avenue Ste#107 Vista, CA 92081	<b>Appointment #</b>	WSH0107490		Floral Products	700 lb
	<b>Earliest Date/Time</b>			1 PALLETS	
	Oct 28, 2024 08:00 PDT				
	<b>Latest Date/Time</b>				
	Oct 29, 2024 14:00 PDT				
	<b>Appt. Type</b>				
	FCFS				
	Confirmed				

Special Requirements: Driver Unload

Driver Instructions: FCFS APPOINTMENT.

Delivery Notes:



# Delivery #6

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
Wholesale Flowers 5305 Metro St. San Diego, CA 92110	<b>Appointment #</b>  <b>Earliest Date/Time</b> Oct 28, 2024 08:00 PDT  <b>Latest Date/Time</b> Oct 29, 2024 14:00 PDT  <b>Appt. Type</b> FCFS Confirmed	<b>Appointment #</b> WSH0106177	Floral Products 1 PALLETS	22 lb

**Special Requirements:** Driver Unload

**Driver Instructions:** FCFS APPOINTMENT.

**Delivery Notes:**

**Pickup Comments** Driver Assist Required. Tailgate pallets to the the end of the trailer at each stop.

**Delivery Comments**

**All invoices must include signed proof of delivery and supporting documents.**  
**Please email to [invoices@arrivelogistics.com](mailto:invoices@arrivelogistics.com) or send to:**  
DM Trans, LLC dba Arrive Logistics  
7701 Metropolis Dr | Bldg 15  
Austin, TX 78744  
PH# (888) 861-0650 FAX (512) 872-5109



7701 Metropolis Dr | Bldg 15 Austin, TX 78744

Phone: (888) 861-0650 | Fax: (512) 872-5109

**Have your driver call in for dispatch at (512) 236-5545 and reference the Arrive order 6074282**

All trailers must be absolutely free of all debris of any kind or will be turned away and refused loading. Reasons to reject trailer at loading include, but are not limited to the following: Foul Odors, Broken glass, Metal shavings, Infestation, and mold.

Load locks or 2 straps or a combination of these two options - Mandatory for each load. Drivers will be turned away if noncompliant.

All drivers must arrive 15 minutes prior to their scheduled pick up time at this location. You will be considered late if you arrive less than 15 minutes prior to your pickup appointment.

Drivers must confirm trailer seal on correct trailer door prior to departure

#### Operational Rules:

1. **If a driver is not permitted to confirm (by visual inspection) that the load is secure and the piece count is correct.**

The driver is required to call Arrive immediately and have this information documented on the BOL with the words - Shipper Load/Count per \_\_\_\_\_ Shipper Signature / Initials.

#### **Communication to Arrive must take place PRIOR to the driver leaving the facility.**

2. Do not dispatch a driver who cannot meet transit time without violating Hours of Service or other safety rules. Nothing in this Rate Confirmation constitutes a request to violate Hours of Service or other safety rules or to coerce a driver to do so.
3. This Rate Confirmation is deemed accepted by Carrier unless it is rejected within 48 hours of receipt.
4. Receipt of shipment by Carrier constitutes acceptance of and agreement to the terms of this Rate Confirmation.
5. Double brokering without prior written authorization will result in forfeiture of payment by Arrive to Carrier.
6. Any communication regarding this load must be addressed to Arrive and not its customer.
7. All charges are included in this Rate Confirmation.
8. Carrier must give Arrive notice 1 Hour prior to detention occurring.
9. Carrier agrees in the event there are overages, shortages, or damages, Carrier will contact Arrive's office to report the discrepancy before leaving the customer's premises.
10. Payment will be made within thirty (30) days after receipt of invoice, original BOL, and signed Load-Rate Confirmation unless Arrive disputes the invoice or any part thereof.
11. Freight must not be handled, railed, shipped by intermodal means, or transloaded by Carrier without prior approval from Arrive. In the event of Carrier's violation of this Operational Rule, the limitation of liability as to cargo loss or damage set forth in the Broker Carrier Agreement between Arrive and Carrier shall be voided and payment by Arrive to Carrier shall be forfeited by Carrier in full.
12. Carrier or its agent certifies that any Transportation Refrigeration Unit (TRU or reefer) equipment furnished will be in compliance with the in-use requirements of the California TRU regulations.
13. This Rate Confirmation incorporates the terms and conditions of a Broker Carrier Agreement signed by Arrive and Carrier.
14. In the event of a conflict between this Rate Confirmation and any Broker Carrier Agreement between Arrive and Carrier, this Load-Rate Confirmation shall govern as to the provisions in conflict.

#### **If this load is a temp-controlled load follow these guidelines:**

1. All temp-controlled loads should be run on continuous.
2. The temperature must follow the Bill Of Lading.
  - If no temperature, please call Arrive immediately.
  - If there are any discrepancies in the Arrive Rate Confirmation and BOL - Please call Arrive immediately. Temp on BOL will prevail.

Do not dispatch a driver who cannot meet transit time without violating Hours of Service or other safety rules. Nothing in this Rate Confirmation constitutes a request to violate Hours of Service or other safety rules or to coerce a driver to do so.

Broker. DM Trans, LLC dba Arrive Logistics

Carrier Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Driver: \_\_\_\_\_ Cell #: \_\_\_\_\_

Truck#: \_\_\_\_\_ Tllr: \_\_\_\_\_ Tllr. Type: \_\_\_\_\_


A Rate Confirmation from Arrive Logistics will only be sent from the following email addresses: @arrivelogistics.com @arrivefresh.com @arvy.us. It is the Carriers responsibility to verify that a Rate Confirmation has come from a legitimate Arrive email prior to accepting a load and performing services; Arrive will not be held responsible for any payments, losses or damages incurred by Carrier or any third party associated with a Rate Confirmation that has not legitimately originated from Arrive.

**NOTE:**By accepting this Rate Confirmation, Carrier warrants and agrees that it will follow all rules and regulations concerning its choice of driver(s), including assigning a driver who can perform the transportation services without violating the Hours of Service of Drivers Regulations contained in 49 CFR 395 applicable at the time of acceptance of the shipment.

Date: 10/25/2024

## BILL OF LADING

Page 1 of 2

Date: 10/25/2024		SHIP FROM		Bill of Lading Number: WBOL-000032359				
Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0106879				 (402) WBOL-000032359				
SHIP TO				ATTENTION DRIVERS: ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD				
Name: USA Bouquet Co. Street: 2834 La Mirada Dr., Suite B City/State/ZIP: Vista, CA, 92081, USA CID#: 87015								
THIRD PARTY FREIGHT CHARGES BILL TO								
Name: Street: City/State/ZIP:				Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>				
Special Instructions: Master Bill of Lading Number: WBOL-000032531				<input type="checkbox"/> Master bill of lading with attached underlying bills of lading.				
Pallet count: <u>6</u>		Floorspace count: <u>3</u>						
CUSTOMER ORDER INFORMATION								
Customer Order Number		Load and Stop		Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information	
1107143		LD0049375 , 4		1,800	2,401.20	(Y) N		
						Y N		
						Y N		
						Y N		
						Y N		
Grand Total				1,800	2,401.20			
CARRIER INFORMATION								
Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	NMFC	Class
1,800		1,800		2,401.20		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
1,800		1,800		2,401.20		Grand Total		
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						COD Amount: \$ _____ Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>		
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).								
Customer Signature/Date <u>Leis Tones 10/28/24</u>								
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.						The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. Shipper Signature <u>[Signature] 10-25-24</u>		



U24

# SUPPLEMENT TO THE BILL OF LADING

Page 2 of 2


Bill of Lading Number: WBOL-000032359

<p><b>Shipper Signature/Date</b></p> <p>_____  <small>This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small></p>	<p><b>Trailer Loaded:</b>  <input checked="" type="checkbox"/> By shipper  <input type="checkbox"/> By driver</p>	<p><b>Freight Counted:</b>  <input checked="" type="checkbox"/> By shipper  <input type="checkbox"/> By driver/pallets said to contain  <input type="checkbox"/> By driver/pieces</p>	<p><b>Carrier Signature/Pickup Date</b></p> <p>_____  <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.</small></p>
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Date: 10/25/2024


BILL OF LADING

Page 1 of 2

SHIP FROM		SHIP TO	
Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0106879		Name: USA Bouquet Co. Street: 2834 La Mirada Dr., Suite B City/State/ZIP: Vista, CA, 92081, USA CID#: 87015	
THIRD PARTY FREIGHT CHARGES BILL TO			
Name: Street: City/State/ZIP:			
Special Instructions: Master Bill of Lading Number: WBOL-000032531			
Pallet count: <u>4</u> Floorspace count: <u>3</u>			
Bill of Lading Number: WBOL-000032359			
 (402) WBOL-000032359			
ATTENTION DRIVERS: ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD			
Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.			
CUSTOMER ORDER INFORMATION			
Customer Order Number	Load and Stop	Packages	Weight
1107143	LD0049375, 4	1,800	2,401.20
Grand Total			
1,800 2,401.20			
CARRIER INFORMATION			
Handling Unit	Package	Qty	Weight
1,800	1,800	1,800	2,401.20
Grand Total			
1,800 2,401.20			
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"			
Commodity Description			
Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 216) of NMFC Item 360			
Glassware, NOI, w/o trim, Density 10 but < 12 pounds /			
88'160 SUB.7 92.5			
LTL Only			
NMFC			
Class			
88'160 SUB.7 92.5			
COD Amount: \$			
Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>			
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).			
Customer Signature/Date			
<u>W.S. Jones</u> <u>10/28/24</u>			
Shipper Signature			
<u>Jim Miller</u> <u>10-25-24</u>			
The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees.			
Received, subject to individually determined rate or contracts that have been agreed upon in writing between the carrier and shipper, and subject to the carrier's standard 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.			



## Date: 10/25/2024

Bill of Lading Number: WBOL-000032358  <div style="text-align: center;">           (402) WBOL-000032358       </div>		SHIP FROM  Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0106177		SHIP TO  Name: Wholesale Flowers Street: 5305 Metro St. City/State/ZIP: San Diego, CA, 92110, USA CID#: 7226		THIRD PARTY FREIGHT CHARGES BILL TO  Name: Street: City/State/ZIP: Special Instructions: Master Bill of Lading Number: WBOL-000032531  Pallet count: 4 Floorspace count: 4	
ATTENTION DRIVERS: ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD							
Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>							
<input type="checkbox"/> Master bill of lading with attached underlying bills of lading.							
CUSTOMER ORDER INFORMATION							
Customer Order Number	Load and Stop	Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information		
	LD0049375 . 6	5,208	2,210.63	Y N			
				Y N			
				Y N			
				Y N			
				Y N			
Grand Total		5,208	2,210.63				
CARRIER INFORMATION							
Handling Unit	Package	Qty	Type	Weight	Commodity Description		
					Commodities requiring special or additional care or attention in handling or stowing must be marked with appropriate hazard labels to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360		
					SEE ATTACHED SUPPLEMENT PAGE		
5,208	5,208			2,210.63	Grand Total		
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____							
				COD Amount: \$	Customer check acceptable to		
				Fee terms: Collect to	Prepaid to		
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).							
Customer Signature/Date _____ 11/18/2024							
The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees.							
Shipper Signature _____ 10-25-24							
Freight Counted: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces							
Carrier acknowledges receipt of packages and required documentation. Carrier's emergency contact information was made available to the DOT. The DOT's emergency response guidebook or equivalent documentation in the							
Shipper Signature/Date _____							
This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.							



10/25/2024

## SUPPLEMENT TO THE BILL OF LADING

Page 2 of 2

Bill of Lading Number: WBOL-000032360

<b>Shipper Signature/Date</b>  This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	<b>Carrier Signature/Pickup Date</b>  Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
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## CARRIER INFORMATION


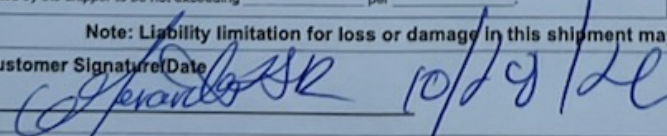
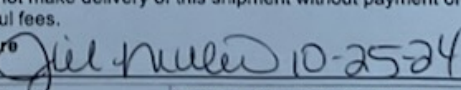
Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	NMFC	Class
288		288		81.31		Containers, Cups, packaging, NOI, Density 4 but < 6 pounds /	156600 SUB.4	150
84		84		105.01		Earthenware, NOI, RVNX \$90.00/ 9 pounds	47500	70
6,000		6,000		45.00		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
13,000		13,000		171.00		Containers, Cups, packaging, NOI, Density 10 but < 12 pounds	156600 SUB.7	92.5
624		624		721.34		Glassware, NOI, w/or w/o trim, Density 8 but < 10 pounds / C	88160 SUB.6	100
132		132		135.05		Glassware, NOI, w/or w/o trim, Density 12 but < 15 pounds /	88160 SUB.8	85
24		24		34.01		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
52		52		46.80		Glassware, NOI, w/or w/o trim, Density 15 but < 22.5 pounds	88160 SUB.9	70
80		80		234.02		Holders, flower, pin type, metal	99660	77.5
24		24		4.32		Cloth or Fabric, Cotton, NOI, Density 12 but < 15 pounds / C	49160 SUB.8	85
6		6		9.90		Staples, NOI, galvanized or plain or brass, bronze, tinned	107000	50



Date: 10/25/2024

## BILL OF LADING

Page 1 of 2

<b>SHIP FROM</b>		Bill of Lading Number: WBOL-000032362						
Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0107490		 (402) WBOL-000032362						
<b>SHIP TO</b>		<b>ATTENTION DRIVERS:</b> ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD						
Name: Ramirez Wholesale Flowers, Inc Street: 2575 Pioneer Avenue Ste#107 City/State/ZIP: Vista, CA, 92081, USA CID#: 087995								
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>								
Name: Street: City/State/ZIP:								
<b>Special Instructions:</b> Master Bill of Lading Number: WBOL-000032531		<b>Freight Charge Terms (Freight charges are prepaid unless marked otherwise):</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.						
Pallet count: <u>2</u> Floorspace count: <u>2</u>								
<b>CUSTOMER ORDER INFORMATION</b>								
<b>Customer Order Number</b>	<b>Load and Stop</b>	<b>Packages</b>	<b>Weight</b>	<b>Pallet/Slip (circle one)</b>	<b>Additional Shipper Information</b>			
	LD0049375, 5	706	699.94	Y N				
				Y N				
				Y N				
				Y N				
				Y N				
<b>Grand Total</b>		706	699.94					
<b>CARRIER INFORMATION</b>								
<b>Handling Unit</b>		<b>Package</b>		<b>LTL Only</b>				
<b>Qty</b>	<b>Type</b>	<b>Qty</b>	<b>Type</b>	<b>Weight</b>	<b>HM (X)</b>	<b>Commodity Description</b>	<b>NMFC</b>	<b>Class</b>
						Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360		
						SEE ATTACHED SUPPLEMENT PAGE		
706		706		699.94		<b>Grand Total</b>		
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"						COD Amount: \$ _____ Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>		
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).								
Customer Signature/Date:  10/25/24								
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.						The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees.		
Shipper Signature/Date: _____						Shipper Signature:  10-25-24		
Trailer Loaded: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver						Freight Counted: <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces		
Carrier Signature/Pickup Date: _____						Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the _____		


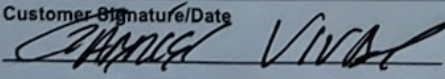
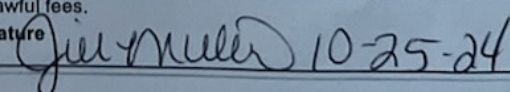


<b>SHIP FROM</b> Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0107486		<b>SHIP TO</b> Name: AM Floral Supply LLC Street: 7629 Fulton Avenue City/State/ZIP: North Hollywood, CA, 91605, USA CID#: 087929	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>			
Name: _____ Street: _____ City/State/ZIP: _____			
<b>Special Instructions:</b> Master Bill of Lading Number: WBOL-000032531			
Pallet count: <u>9</u>		Floorspace count: <u>9</u>	
<b>Freight Charge Terms (freight charges are prepaid unless marked otherwise):</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.			
<b>ATTENTION DRIVERS:</b> ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD			
<b>CUSTOMER ORDER INFORMATION</b>			
Customer Order Number	Load and Stop	Packages	Weight
	LD0049375, 1	540	891.00
<b>Grand Total</b>			
540 891.00			
<b>CARRIER INFORMATION</b>			
Handling Unit	Package	Commodity Description	LTL Only
Qty Type	Qty Type	Weight (X)	NMFC Class
540	540	891.00	157320 SUB.3 250
<b>Grand Total</b>		891.00	
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____			
<b>Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).</b>			
<b>Customer Signature/Date</b> _____ The carrier shall not make delivery of this shipment without payment of charges and all other lawfully fees. <b>Shipper Signature</b> <u>for nvl 10-25-24</u>			



Date: 10/25/2024

## BILL OF LADING

<b>SHIP FROM</b>		Bill of Lading Number: WBOL-000032360	
Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0107443		 (402) WBOL-000032360	
<b>SHIP TO</b>		<b>Carrier Name: Schnelder</b>	
Name: Shinoda Design Center, Inc. Street: 601 W. Dyer Road City/State/ZIP: Santa Ana, CA, 92707, USA CID#: 3265		<b>ATTENTION DRIVERS:</b> ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>			
Name: Street: City/State/ZIP:		<b>Freight Charge Terms</b> (Freight charges are prepaid unless marked otherwise.) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>  <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.	
<b>Special Instructions:</b> Send available backorders per Bambi  Master Bill of Lading Number: WBOL-000032531			
Pallet count: <u>3</u> Floorspace count: <u>3</u>			
<b>CUSTOMER ORDER INFORMATION</b>			
<b>Customer Order Number</b>	<b>Load and Stop</b>	<b>Packages</b>	<b>Weight</b>
4265	LD0049375 , 3	20,314	1,587.77
			(Y) N
			Y N
			Y N
			Y N
			Y N
<b>Grand Total</b>		20,314	1,587.77
<b>CARRIER INFORMATION</b>			
<b>Handling Unit</b>		<b>Package</b>	
<b>Qty</b>	<b>Type</b>	<b>Qty</b>	<b>Type</b>
		<b>Weight</b>	<b>HM (X)</b>
		<b>Commodity Description</b>	
		<small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	
			<b>SEE ATTACHED SUPPLEMENT PAGE</b>
20,314		20,314	1,587.77
<b>Grand Total</b>			
<small>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."</small>		<b>COD Amount: \$</b> _____ Fee terms: Collect <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/>	
<b>Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).</b>			
<b>Customer Signature/Date</b> 			
<small>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.</small>		The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. <b>Shipper Signature</b>  10-25-24	



## SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: WBOL-000032531

## CARRIER INFORMATION

Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	NMFC	Class
288		288		81.31		Containers, Cups, packaging, NOI, Density 4 but < 6 pounds /	156600 SUB.4	150
84		84		105.01		Earthenware, NOI, RVNX \$90.00/ 9 pounds	47500	70
6,000		6,000		45.00		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
13,000		13,000		171.00		Containers, Cups, packaging, NOI, Density 10 but < 12 pounds	156600 SUB.7	92.5
624		624		721.34		Glassware, NOI, w/or w/o trim, Density 8 but < 10 pounds / C	88160 SUB.6	100
132		132		135.05		Glassware, NOI, w/or w/o trim, Density 12 but < 15 pounds /	88160 SUB.8	85
24		24		34.01		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
52		52		46.80		Glassware, NOI, w/or w/o trim, Density 15 but < 22.5 pounds	88160 SUB.9	70
80		80		234.02		Holders, flower, pin type, metal	99660	77.5
24		24		4.32		Cloth or Fabric, Cotton, NOI, Density 12 but < 15 pounds / C	49160 SUB.8	85
6		6		9.90		Staples, NOI, galvanized or plain or brass, bronze, tinned	107000	50
540		540		891.00		Plastic or rubber articles or materials, expanded group havi	157320 SUB.3	250
46		46		67.35		Holders, flower, pin type, metal	99660	77.5
126		126		53.59		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
144		144		41.61		Containers, Cups, packaging, NOI, Density 4 but < 6 pounds /	156600 SUB.4	150
75		75		161.63		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
72		72		112.61		Glassware, NOI, w/or w/o trim, Density 8 but < 10 pounds / C	88160 SUB.6	100
72		72		49.20		Glassware, NOI, w/or w/o trim, Density 15 but < 22.5 pounds	88160 SUB.9	70
36		36		80.76		Glassware, NOI, w/or w/o trim, Density 30 or > pounds / CuFt	88160 SUB.11	60
6		6		12.04		Glassware, NOI, w/or w/o trim, Density 12 but < 15 pounds /	88160 SUB.8	85
24		24		20.41		Containers, Cups, packaging, NOI, Density 6 but < 8 pounds /	156600 SUB.5	125
8		8		6.02		Planters, or Flower or Plant Boxes, Baskets or Tubs	155850 SUB 1	250
73		73		91.50		Earthenware, NOI, RVNX \$90.00/ 9 pounds	47500	70
24		24		3.22		Containers, Cups, packaging, NOI, Density 12 but < 15 pounds	156600 SUB.8	85



10/25/2024

## SUPPLEMENT TO THE BILL OF LADING

Page 2 of 2

Bill of Lading Number: WBOL-000032362

			vehicle. Property described above is received in good order, except as noted.
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## CARRIER INFORMATION

Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	NMFC	Class
46		46		67.35		Holders, flower, pin type, metal	99660	77.5
126		126		53.59		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
144		144		41.61		Containers, Cups, packaging, NOI, Density 4 but < 6 pounds /	156600 SUB.4	150
75		75		161.63		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
72		72		112.61		Glassware, NOI, w/or w/o trim, Density 8 but < 10 pounds / C	88160 SUB.6	100
72		72		49.20		Glassware, NOI, w/or w/o trim, Density 15 but < 22.5 pounds	88160 SUB.9	70
36		36		80.76		Glassware, NOI, w/or w/o trim, Density 30 or > pounds / CuFt	88160 SUB.11	60
6		6		12.04		Glassware, NOI, w/or w/o trim, Density 12 but < 15 pounds /	88160 SUB.8	85
24		24		20.41		Containers, Cups, packaging, NOI, Density 6 but < 8 pounds /	156600 SUB.5	125
8		8		6.02		Planters, or Flower or Plant Boxes, Baskets or Tubs	155850 SUB 1	250
73		73		91.50		Earthenware, NOI, RVNX \$90.00/ 9 pounds	47500	70
24		24		3.22		Containers, Cups, packaging, NOI, Density 12 but < 15 pounds	156600 SUB.8	85



## SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: WBOL-000032531

<b>Shipper Signature/Date</b> This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	<b>Carrier Signature/Pickup Date</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.
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## CUSTOMER ORDER INFORMATION

Customer Order Number	Load and Stop	Packages	Weight	Pallet/Slip (circle one)		Additional Shipper Information
10718		5,130	841.22	(Y)	N	
		5,208	2,210.63	Y	N	
1107143		1,800	2,401.20	(Y)	N	
4265		20,314	1,587.77	(Y)	N	
		540	891.00	Y	N	
		706	699.94	Y	N	

## CARRIER INFORMATION

Handling Unit		Package					LTL Only	
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	NMFC	Class
5,004		5,004		625.50		Plastic or rubber articles or materials, expanded group havi	157320 SUB.3	250
18		18		7.00		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
4		4		44.40		Inhibitors, modifiers or regulators, plant growth	101685	65
24		24		4.32		Cloth or Fabric, Cotton, NOI, Density 12 but < 15 pounds / C	49160 SUB.8	85
80		80		160.00		Holders, flower, pin type, metal	99660	77.5
468		468		510.38		Glassware, NOI, w/or w/o trim, Density 12 but < 15 pounds /	88160 SUB.8	85
296		296		456.80		Glassware, NOI, w/or w/o trim, Density 15 but < 22.5 pounds	88160 SUB.9	70
258		258		137.76		Containers, Cups, packaging, NOI, Density 4 but < 6 pounds /	156600 SUB.4	150
24		24		35.02		Earthenware, NOI, RVNX \$90.00/ 9 pounds	47500	70
196		196		358.77		Holders, flower, pin type, metal	99660	77.5
278		278		55.09		Containers, Cups, packaging, NOI, Density 8 but < 10 pounds	156600 SUB.6	250
12		12		46.50		Glassware, NOI, w/or w/o trim, Density 6 but < 8 pounds / Cu	88160 SUB.5	125
72		72		122.01		Glassware, NOI, w/or w/o trim, Density 8 but < 10 pounds / C	88160 SUB.6	100
1,446		1,446		231.08		Plastic or rubber articles or materials, expanded group havi	157320 SUB.3	250
102		102		173.45		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5
2,000		2,000		26.00		Inhibitors, modifiers or regulators, plant growth	101685	65
8		8		13.75		Planters, or Flower or Plant Boxes, Baskets or Tubs	155850 SUB 1	250
0		0		0.00		Containers, Cups, packaging, NOI, Density 10 but < 12 pounds	156600 SUB.7	92.5
48		48		44.02		Containers, Cups, packaging, NOI, Density 6 but < 8 pounds /	156600 SUB.5	125
1,800		1,800		2,401.20		Glassware, NOI, w/or w/o trim, Density 10 but < 12 pounds /	88160 SUB.7	92.5



3/25/2024

## SUPPLEMENT TO THE BILL OF LADING

Page 2 of 2

Bill of Lading Number: WBOL-000032357


<b>Shipper Signature/Date</b>  <small>This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.</small>	<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver	<b>Freight Counted:</b> <input checked="" type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	<b>Carrier Signature/Pickup Date</b>  <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.</small>
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Date: 10/25/2024

## BILL OF LADING

Page 1 of 2

<b>SHIP FROM</b>		<b>Bill of Lading Number: WBOL-000032361</b>	
Name: Syndicate Sales, Inc. Street: 920 S. Lindsay St. City/State/ZIP: Kokomo, IN, 46901, USA SID#: WSH0107486		 (402) WBOL-000032361	
<b>SHIP TO</b>		<b>ATTENTION DRIVERS:</b> ALL PALLETS MUST BE PULLED TO THE TAIL OF THE TRAILER FOR THE CUSTOMER TO UNLOAD	
Name: AM Floral Supply LLC Street: 7629 Fulton Avenue City/State/ZIP: North Hollywood, CA, 91605, USA CID#: 087929			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>			
Name: Street: City/State/ZIP:		<b>Freight Charge Terms (Freight charges are prepaid unless marked otherwise):</b> Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
<b>Special Instructions:</b> Master Bill of Lading Number: WBOL-000032531		<input type="checkbox"/> Master bill of lading with attached underlying bills of lading.	
Pallet count: <u>9</u> Floorspace count: <u>9</u>			

CUSTOMER ORDER INFORMATION					
Customer Order Number	Load and Stop	Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information
	LD0049375 , 1	540	891.00	Y N	
				Y N	
				Y N	
				Y N	
				Y N	
Grand Total		540	891.00		

CARRIER INFORMATION								
Handling Unit		Package		Weight	HM (X)	Commodity Description <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC item 360</small>	LTL Only	
Qty	Type	Qty	Type				NMFC	Class
540		540		891.00		Plastic or rubber articles or materials, expanded group havi	157320 SUB.3	250
540		540		891.00		Grand Total		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_."

COD Amount: \$ \_\_\_\_\_

Fee terms: Collect ☐ Prepaid ☐ Customer check acceptable ☐

**Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).**

Customer Signature/Date

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.

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

Shipper Signature

Jim Miller 10-25-24



Page 1 of 2

Received, subject to individually determined rates or contracts that have been agreed upon in writing between the shipper and the carrier, that the carrier shall not make delivery of this shipment without payment of charges and all other lawful fees.

**Shipper Signature** \_\_\_\_\_



