



INVOICE

BILL TO:
OLD FRONTIER FAMILY INC
40854 HWY 41
OAKHURST, CA 93644

INVOICE DATE: 11/13/2024
INVOICE #: R65083
TERMS: NET 30
DUE DATE: 12/13/2024

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|---------------|--|----------|------------|------------|
| 11/11/2024 | | 1347 Beaver Channel Parkway, Clinton, IA, 52732 - 8975 Remington Ave, Chino, CA, 91710 | | | |
| | | 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

Old Frontier Family Inc
PO Box 216
Oakhurst, CA 93644
MC: 236611 P: 559-692-1043 F: 760-585-2169

LOAD NUMBER
323598

11/11/2024

DISPATCH CONFIRMATION

Carrier: **Royal3 Inc.** MCID: **944686** Driver: **Elizander**
Chicago, IL Reference: Cell: **702-980-6369**
Ph/Fax: **630-485-7370** **630-485-6980** Trailer: **H03262** Truck: **736**
Attn: **Mike X113**

| Load Info | | | | The Following Pay Is Authorized For This Load | | | |
|-----------------------|------------------------------|----------|----------|---|----------|--|--|
| Pieces: 17 | Miles: 1845 | Pay Code | Pay Type | Rate | Total | | |
| Space: 53 | Pallets: 17 | Load | Flat | 3,000.00 | 3,000.00 | | |
| Act Wgt: 42000 | Type: 53' DRY VAN | | | Total | 3,000.00 | | |
| As Wgt: 42000 | Trailer: Van Air Ride | | | | | | |
| Value: | Temp: 0 | | | | | | |

| Stop | From | To | Name Address | City Phone | St Zip | Ref Contact | Appt Appt Ref |
|------|------|----------------|-----------------|--|-------------------------|----------------------------------|------------------|
| 1 | PU | 11/11 12:30 | 11/11 12:30 | Sethness Products 1347 Beaver Channel Parkway | Clinton 563-243-3943 | IA 52732 FRONTIER Scott | Yes 1230pm |

Notes

*****PICKUP NUMBER 265*****

| | | | | | | | | |
|---|-----|----------------|----------------|---|-----------------------|-------------|-----------------------|--------------------|
| 2 | Del | 11/13 09:00 | 11/13 09:00 | Logistics Plus Inc. 8975 Remington Ave | Chino 323-228-0177 | CA 91710 | PO# 955430 justin. | Yes EGIQUEU/9am |
|---|-----|----------------|----------------|---|-----------------------|-------------|-----------------------|--------------------|

Notes

TRAILER MUST BE CLEAN AND ODOR FREE, NO HOLES IN WALLS OR FLOOR OR THEY MAY REFUSE IT.
THANKS

Directions

<http://getconduit.ai/scheduling/lp-law-warehouse>

| Commodity | Description Reference | Pieces Space | Weight |
|------------------|------------------------------------|-----------------|--------|
| Food Ingredients | Nissin Foods PO# 955430 PU# 265 | 17 53 | 42,000 |
| | Totals | 17 53 | 42,000 |

No Touch/Non Stackable/Clean Food Grade Trailers Only/No Vented Vans/

"DRIVER INFO" MUST BE COMPLETED BEFORE LOADING! Please Fill Out Following: (please sign all pages & fax or email back)

Full Name _____ DL#/State _____ Tractor Plate # _____
Tractor# _____ Trailer Plate # _____ Trailer# _____

Carrier shall transport all freight tendered by BROKER only on equipment operated under CARRIER's authority. Carrier shall not in any way trip lease, sub-contract, broker or arrange for the freight to be transported by a 3rd party without brokers consent. Notify broker when loaded/unloaded. Send all paperwork to Invoice@OffTrans.com. Thank you!

Jackson Glines

Old Frontier Family Inc

11/11/24

DATE:

Bill Carson

Royal3 Inc.

11/11/24

DATE:

SETHNESS ROQUETTE
EXCELLENCE IN CARAMELS

SETHNESS PRODUCTS COMPANY

9550 W HIGGINS RD
SUITE 1110
ROSEMONT IL 60018
United States
+1-847-329-2080
www.sethness-roquette.com

DOOR
13

Bill of Lading

Bill of Lading Number: BoL number



(402) 1234562000032257

Date: 11/11/24

Time: 10:40:42

| | | | | | | |
|--|-----------------|---|--|---|--------------|--------------|
| SHIP FROM Name: Sethness Roquette US Address1: Sethness Products CO. Address2: 1347 Beaver Channel Parkway City/State/ZIP: Clinton IA 52732 Country: United States SID#: 1000001338 | | SHIP TO Name: NISSIN FOODS - GARDENA Address1: Address2: 2002 W. 139TH STREET City/State/ZIP: GARDENA CA 90249 Country: United States | | THIRD PARTY FREIGHT CHARGES BILL TO Name: Address1: Address2: City/State/ZIP: Country: | | |
| Carrier Name: Trucking Company Name: ROYAL 3 Trailer #/Container #: H03262 Customer PO#: PO-0955430 | | Freight Charge Terms: (charges are prepaid unless marked) Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3 rd Party <input type="checkbox"/> Delivery Terms FOB | | | | |
| CUSTOMER ORDER INFORMATION | | | | | | |
| CUSTOMER ORDER # | # OF QTY | # OF PKGS | WEIGHT (LBS) | COMMODITY DESCRIPTION | NMFC# | CLASS |
| 1010000265 | 800.00 EA | 20.00 PAL | 42,401.016 | CARAMEL COLORING | 74095 | 65 |
| GRAND TOTAL | 800 EA | 20 PAL | 42,401.016 | | | |
| SPECIAL INSTRUCTIONS: Master Bill of Lading number CUSTOMER ORDER # PO-0955430 RT198 LOT 1984204A (516) LOT 1984278A (284) CODE SP-1004 PLEASE CALL CYNTHIA GUZMAN FOR AN APPT PRIOR TO DELIVERY AT 310-527-5779. AN APPT MUST BE MADE BEFORE SEAL # CSP 186902 SHIPMENT IS ON 20 PALLETS | | | NOTES: IN: 7:46 AM OUT: 8:18 AM 11/13/24 Bianca D. | | | |
| NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. *14706(c)(1)(A) and (B). | | | | | | |
| 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 freight and all other lawful charges. | | | |
| Pro number: | | | 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 U.S. DOT. | | | |
| Carrier | | | Shipper | | | |
| Signature / Pickup Date | | | Signature / Date | | | |
| Carrier acknowledges receipt of packages and required placards. Property described is received in good order, except as noted. | | | | | | |
| Freight Counted | | | Carrier | | | |
| | | | STI / STC | | | |