



# INVOICE

**BILL TO:**  
COYOTE LOGISTICS LLC  
2545 W. DIVERSEY AVENUE  
CHICAGO, IL 60647

**INVOICE DATE:** 11/29/2024  
**INVOICE #:** B67162  
**TERMS:** NET 30  
**DUE DATE:** 12/29/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
11/26/2024		11901 Amedicus Lane, Unit B, Fort Myers, FL 33907 - 5000 5th Ave, Hines, IL 60141, USA			
		Freight Income	1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

**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**



# Rate Confirmation Load 32454841

Send invoices to:  
[CarrierInvoices@coyote.com](mailto:CarrierInvoices@coyote.com)  
960 Northpoint Parkway  
Suite 150  
Alpharetta, GA 30005

877-6COYOTE  
(877-626-9683)

## Cust Requirements

Equipment	Van, 53'
Pre Cooled Temp	None
Load Temp	None
Tarps	Undefined
Value	\$100,000

## Booked By

Jared Soderholm  
Jared.Soderholm@coyote.com  
Phone: +1 (773) 365 6497  
x2228  
Fax: +1 (773) 365 7804



## Get CoyoteGO Today!

- Dispatch
- Send updates
- Check in
- Submit paperwork

*Available for An-  
droid or iPhone,  
at App Store or  
Google Play*

## Load Requirements

Tech Tracking Required

## Equipment Requirements

Food Grade No Reefer

## Notes

All Van/Container loads MUST be sealed at origin either by shipper or driver with a seal number noted on bill of lading. The driver is responsible for re-sealing the trailer after each pickup/drop on a multi-stop shipment. In the event a shipment that was sealed at origin or after each additional pickup/drop arrives at the destination with a tampered seal or without the seal intact then (i) the Carrier shall be liable for any shortage or damage claims with respect to such shipment and (ii) the shipper shall have the right, in its sole discretion, to deem the entire shipment damaged, adulterated/contaminated and unsalvageable, without the need for any inspection and the Carrier shall be liable for the full value of the shipment. Carrier is required to weigh shipment within 50 miles of departing each shipper. If carrier fails to weigh shipment within 50 miles of departing each shipper, any citations/expenses incurred due to the equipment and/or shipment weight will be the carrier's sole responsibility. Carrier must meet and comply to shipper requirements at the facility. All drivers must wear masks or facial coverings to the extent required by laws or facilities. **Carrier must be in full compliance with the Food Safety Modernization Act (FSMA), if applicable. By accepting the shipment, Carrier agrees that the driver has consented to receiving text messages and/or phone calls from or on behalf of Coyote.**

Approval for payment of detention is contingent upon the following eligibility requirements:

- 1) Carrier must report facility departure time and total detention hours within 24 hours of shipment delivery at the final facility.
- 2) Carrier must provide proof of the on time arrival and departure times in the form of a BOL or other shipping document with arrival and departure times notated by facility within 24 hours of shipment delivery at final facility.

## Route Directions

Carrier acknowledges that any routing instructions from the shipper herein are being provided for convenience only, and the Carrier may choose the route.

## Signature Line

By signing below, BRZ agrees to the terms and conditions set forth below and provided herewith, if any.



# Rate Confirmation

## Load 32454841

### Stop 1: Pick Up

Pick Up None Numbers	Appointment Scheduled For Tue 11/26/2024 at 14:00	Facility Notes V only. NO REEFERS EVEN WITH UNIT TURNED OFF MUST DELIVER 11/29
Confirmation None Numbers		
Facility First Nation Group	Driver Work No Touch	
Address 11901 Amedicus Lane Unit B Fort Myers, FL 33907	SLIC N/A	
Contact Jose Phone +1 (239) 333 1293		

### Stop 1 Requirements

Strict Appt

Commodity	Load On	Exp Wt	Pieces
Medical supplies	Pallets	38,000 Lbs	24

### Stop 2: Delivery

Delivery None Numbers	Scheduled For Fri 11/29/2024 from 07:00 - 14:00	Facility Notes gps address: 5000 5th ave 0700-1400 Closed on weekends
Confirmation None Numbers		
Facility Department Of Veterans	Driver Work No Touch	
Address 1st Ave - Bldg 37 Service Center Bldg 37 - 1 Block N of 22nd Hines, IL 60141	SLIC N/A	
Contact John Burke Phone +1 (708) 786 7758		

### Stop 2 Requirements

\$300 Late Fee FCFS

Commodity	Load On	Exp Wt	Pieces
Medical supplies	Pallets	40,000 Lbs	24

### Charges

Description	Units	Per	Amount
Fuel Surcharge	1310.00	\$0.420	\$550.20
Flat Rate	1.00	\$849.800	\$849.80

### Contact

Send invoices to: 960 Northpoint Parkway Suite 150 Alpharetta, GA 30005	Please contact Coyote at 877-626-9683 if the charges are incorrect.
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# Rate Confirmation

## Load 32454841

Total USD \$1,400.00

### Agreement

Carrier Riki Transportation Inc  
USDOT 3119062  
Phone None  
Email shawn@rtbrz.com  
Fax None

Broker Coyote Logistics, LLC  
Rep Jared Soderholm  
Title Sales Rep  
Phone +1 (773) 365 6497 x2228  
Fax +1 (773) 365 7804  
Date 11/26/2024 08:22

*By signing below, BRZ agrees to the terms and conditions set forth below and provided herewith, if any.*

\_\_\_\_\_  
Name and Title (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE SIGN THIS AGREEMENT AND EMAIL TO [Jared.Soderholm@coyote.com](mailto:Jared.Soderholm@coyote.com)**

Coyote Logistics, LLC is an Equal Opportunity Employer



# Rate Confirmation

# Load 32454841

## Terms and Conditions

The Broker-Carrier Agreement or Carrier Agreement (in each case, the "Agreement") between Coyote Logistics, LLC, a Licensed Property Broker - USDOT # 2236410, and BRZ is amended by the verbal agreement between Jared Soderholm of Coyote Logistics, LLC hereafter referred to as BROKER, and Shawn of BRZ hereafter referred to as CARRIER, dated 11/26/2024.

This confirmation is subject to the terms of the Agreement and this document constitutes an amendment thereto. If the CARRIER has not signed the Agreement, then the rate shown above is the agreed individually negotiated rate and no other rate shall apply including any carrier tariff rate or terms.

THIS LOAD SHALL NOT BE DOUBLE BROKERED. No additional charges not listed above may be added by the CARRIER. Any additional charges must appear on a revised confirmation sheet signed by the BROKER. CARRIER must include signed copy of the shipper's bill of lading and any other proof of delivery with invoice to BROKER. Rates, except as specifically designated above, are inclusive of any fuel surcharge. CARRIER certifies that it is in compliance with all requirements of the California Air Resources Board (CARB) that are applicable to the scope of CARRIER's operations, including, but not limited to: Statewide Truck and Bus Regulations, Transport Refrigeration Unit (TRU) Regulations, Tractor-Trailer Greenhouse (GHG) Gas Regulations, and Drayage Truck Regulations. CARRIER also warrants that it is in compliance with any comparable requirements of the Environmental Protection Agency (EPA) and other states, where applicable. CARRIER shall be responsible for any fines imposed on BROKER and/or shipper resulting from noncompliance.

CARRIER hereby confirms that it maintains applicable and valid insurance without exclusions that would prevent coverage for the items listed above. CARRIER has at least \$100,000.00 in cargo insurance and \$1,000,000.00 in automobile liability coverage. CARRIER further confirms that in transporting the shipment described hereinabove, it will comply with all U.S. DOT and FDA regulations applicable to its operations while transporting said shipment, including, but not limited to drivers' hours of service, and the Food Safety Modernization Act (FSMA), if applicable. CARRIER agrees to the attached requirements from the shipper, if any.

### **ALL LOADS ARE SUBJECT TO ELECTRONIC TRACKING**

By accepting this shipment, CARRIER agrees that it has obtained a written agreement from each driver transporting a shipment tendered by BROKER to CARRIER pursuant to the Agreement in which each driver provides all necessary consents to (i) receiving text messages and/or phone calls from or on behalf of BROKER and (ii) allowing BROKER or its vendor to track such driver's location while transporting such shipment. CARRIER shall comply with all applicable laws relating to the collection, use, storage, retention, disclosure, and disposal of any information CARRIER provides to BROKER, including information regarding the drivers transporting shipments. CARRIER shall indemnify, defend, and hold BROKER and its affiliates harmless from and against any and all claims, damages, liabilities, losses, actions and expenses (including attorneys' fees) arising out of or in connection with CARRIER's breach of this Section. This Section shall survive the expiration or termination of the Agreement between BROKER and CARRIER.



## BILL OF LADING

## Shipper

First Nation Group  
11901 Amedicus Lane Unit B  
Fort Myers, FL 33907  
P: 1 (239) 333-1293 Name: Jose

## Consignee

Department Of Veterans  
1st Ave - Bldg 37  
Hines, IL 60141  
P: 1 (708) 786-7758 Name: John Burke

Warehouse in &amp; out time:

## 3rd Party Freight Charges Bill To

Coyote Logistics (prepaid/third party) PO# 791D50591 # 791D50540  
960 North Point Parkway, Suite 150 # 791D50593 # 791D50535  
Alpharetta, GA 30005 # 791D50508 # 791D50364 # 791D50538

BRZ

Shipment #:

PU#:

DEL#:

BOOK#:

Seal # 1304631

SPECIAL INSTRUCTIONS: V only. NO REEFERS EVEN WITH UNIT TURNED OFF  
MUST DELIVER 11/29

Freight Terms:

Prepaid: \_\_\_\_\_  
Collect: \_\_\_\_\_  
3rd Party: X

Qty	Type	Weight	HM(X)	Commodity	LTL Class
21	PLT	11,000		Medical supplies	
				Dimensions: 0.00 x 0.00 x 0.00	
GRAND TOTALS					

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 \_\_\_\_\_."

Remit COD to:

Collect: \_\_\_\_\_ Prepaid: \_\_\_\_\_ Customer Check Acceptable: \_\_\_\_\_ COD Amount: \$

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 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.

Trailer

Loaded:

\_\_\_ by Shipper  
\_\_\_ by Driver

Freight

Counted:

\_\_\_ by Shipper  
\_\_\_ by Driver

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

Shipper: \_\_\_\_\_

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 Department of Transportation.

Shipper: \_\_\_\_\_

11/26/24

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 Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.

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

Consignee Signature / Delivery Date:

Consignee acknowledges receipt of packages and required placards. Property described above is received in good order, except as noted.

REC: 21 PLT  
Steen Cuk VA

Consignee: \_\_\_\_\_ 11/29/24