



INVOICE

BILL TO:

PELICAN TRANS INTERNATIONAL
140 BRAYMORE CT
INVERNESS , IL 60010

INVOICE DATE: 12/06/2024**INVOICE #:** B68125**TERMS:** NET 30**DUE DATE:** 01/06/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/04/2024		871 N 5300 W, Cedar City, UT 84720, USA - 600 Benjamin Dr, Springfield, OH 45502, USA			
		Freight Income	1	\$4,600.00	\$4,600.00

TOTAL

\$4,600.00

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**

PELICAN TRANS INTERNATIONAL 1401-1403 HOWARD ST. ELK GROVE VILLAGE, IL 60007

RIKI TRANSPORTATION

American Packaging Load Confirmation

Pick up 12-4 FCFS DROP NO LATER THAN 12-6

Dole is closed on Thursday

APC RELEASE

4023440

Customer Release 962090

NOTICE

**PRODUCT IS DIRECT FOOD
CONTACT/
PHARMACEUTICAL
PACKAGING**

DO NOT SHIP WITH: HAZARDOUS MATERIALS, ALLERGENS, and CONTAMINANTS (chemical, physical, biological, odorous)

- TRAILER MUST BE CLEAN, DRY, AND ODOR FREE
- DO NOT DOUBLE STACK
- DEDICATED TRUCKS MUST BE SEALED UPON ARRIVAL
- IF ANY PRODUCT IS UNWRAPPED OR DAMAGED, PLEASE:
 - DO NOT ACCEPT DAMAGED FREIGHT
 - COMPLETE APC CLAIM FORM
 - CONTACT APC IMMEDIATELY AT 515-733-1408

Consignee:

DOLE FRESH VEGETABLES

600 BENJAMIN DRIVE

SPRINGFIELD, OH 45502-0000

Must be sealed upon arrival

Picking up at:

Cedar City Address

1211 North 5300 West

Cedar City, UT 84721

Bill To:

Pelican trans international

load# TR10547

Please invoice to: Jodie.kim@pelicanloginc.com

Rate confirmation: \$3700.00

Name of Carrier: BEST WAY

SCAC:

Date:

Consignee / Final Destination

DOLE FRESH VEGETABLES
600 BENJAMIN DRIVE
SPRINGFIELD, OH 45502-0000

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Official, Southern, Western, and Illinois Freight Classification in effect on the date hereof. Shipper hereby certifies that he is familiar with the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

☐ Check Box if = Multiple Destinations (see below for further information)

No. Package	Kind of Packages, Description of Articles, Special marks and Exceptions	Class	Sub. To Car. Weight	Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse to the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and other lawful charges.
30	<p>Plastic Food Grade Packaging</p> <p>Release #: 4023440 Seal # 0112438 YK PO# 962090</p> <p style="text-align: center;">NOTICE</p> <p>PRODUCT IS DIRECT FOOD CONTACT/PHARMACEUTICAL PACKAGING</p> <p>DO NOT SHIP WITH: HAZARDOUS MATERIALS, ALLERGENS, and CONTAMINANTS (chemical, physical, biological, odorous)</p> <p>= TRAILER MUST BE CLEAN, DRY, AND ODOR FREE, PROTECTED FROM OUTSIDE ELEMENTS</p> <p>= DO NOT DOUBLE STACK</p> <p>= DEDICATED TRUCKS MUST BE SEALED UPON ARRIVAL</p> <p>SEAL NUMBER</p> <p>= IF ANY PRODUCT IS UNWRAPPED OR DAMAGED, PLEASE:</p> <p>→ DO NOT ACCEPT DAMAGED FREIGHT</p> <p>→ COMPLETE APC CLAIM FORM</p> <p>→ CONTACT APC IMMEDIATELY</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Rec By <u>Careli Thomas</u> Date <u>12-10-24</u> Appt Time <u>700</u> Time In <u>10:10</u> / Out <u>10:55</u> Trailer # <u>244777</u> Dock Door # <u>14</u></p> </div>	60	32,834	<p style="text-align: center;">SN</p> <p>(Signature of Consignor)</p> <p>If charges are to be prepaid, write or stamp here, "To be Prepaid"</p> <hr/> <p>Received \$ _____</p> <p>To apply in prepayment of the charges on items properly described herein.</p> <hr/> <p>Agent or Cashier _____</p> <hr/> <p>Per _____</p> <p>The signature here acknowledges only the amount prepaid.</p> <hr/> <p>Charges Advanced _____</p> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">DO NOT DOUBLE STACK FOOD/MEDICAL GRADE MATERIAL- DO NOT LOAD WITH POISONS</p>

* If this shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight. Note-Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____

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 the Department of Transportation.

Per Stefani Nickell

AMERICAN PACKAGING CORPORATION

American Packaging Corporation - Flexo
1211 North 5300 West
Cedar City, UT 84721

Delivering Carrier: BEST WAY

Driver's Name: _____

Driver's Signature: _____

Date: _____

Trailer # or Container #: _____

Cell Phone #: _____