



INVOICE

BILL TO:

COVAR TRANSPORTATION
1785 NORTHPOINTE PKWY SUITE #240
LUTZ, FL 33558

INVOICE DATE: 12/12/2024**INVOICE #:** R68908**TERMS:** NET 30**DUE DATE:** 01/12/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/10/2024		2699 Highwood Blvd #9304, Smyrna, TN 37167 - 7245 Henry Clay Blvd, Liverpool, NY 13088			
		Freight Income	1	\$2,500.00	\$2,500.00

TOTAL

\$2,500.00

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

COVAR TRANSPORTATION
1785 NORTHPOINTE PARKWAY
LUTZ, FL 33558
727-240-3366



Page 1

Date Sent: 12/10/2024 0804

Load Confirmation: 23215490

Carrier Name: ROYAL3 INC
CHICAGO IL 60638

Tractor: 723 Trailer:
Driver Name: Adonis
Driver Cell: 786-371-9411

Dispatch Name: Joey
Dispatch Phone: 321-465-5667

Order Order: 23215490
Miles: 1014.0
PU # 391677, 391368
PO #

Commodity: Snack food, palletized
Trailer: Van or Reefer (DAT)
Weight: 10000.0
Temp:

PU 1 Name: GOGGIN WAREHOUSING
Address: 2699 HIGHWOOD BLVD #9304
SMYRNA TN 37167
Phone: 615-462-0187

Date: 12/10/2024 1330
Contact: Main
Driver Load: No driver loading or unload

SO 2 Name: RITE AID
Address: 601 CHELSEA ROAD
ABERDEEN MD 21001
Phone:

Date: 12/11/2024 0800
12/11/2024 1200
Contact:
Driver Load: No driver loading or unload

SO 3 Name: Rite Aid DC #55
Address: 7245 Henry Clay Blvd
LIVERPOOL NY 13088
Phone: 315-451-8000

Date: 12/12/2024 0800
Contact: Main
Driver Load: No driver loading or unload

Payment Carrier Freight Pay: \$2,500.00
Total Carrier Pay: \$2,500.00

Load Specific Requirements

Type

LBAR - Load Bar

Applies to

Both Shipper and Consignee



Load Specific Requirements

Type	Applies to
FOOD - Food Grade/Clean/Dry/Odorless/No Holes	Shipper Only

Load Specific Requirements

Type	Applies to
SWEP - Sweep, Clean trailer	Shipper Only

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

GOGGIN WAREHOUSING - *****IMPORTATANT*****

Reminder PODs are required to be sent to us prior to the driver departing the facility.

IF POD NOT RECEIVED BY TIME DRIVER LEAVES RECEIVER A \$500 DEDUCTION WILL BE ENFORCED FROM THE RATE CONFIRMATION.

POD must show the signature, date and cases received.

GOGGIN WAREHOUSING - Due to the fact that you are hauling food products meant for human consumption, CoVar reserves the right to re-power a load 2 days after the first missed delivery appointment to ensure we do everything in our power to avoid a potential claim due to spoiled product. By signing this confirmation, you understand and agree to the 2 day re-power requirement. CoVar of course will only hire vetted and approved transportation providers (carriers) to repower the load. If re-power of a load is triggered, you will receive an insurance cert with the re-power carrier's insurance info & your trailer VIN/Make/Model to show there is coverage on your equipment. The cost of re-powering the load to make delivery and avoid a claim will be taken from the agreed upon rate on this confirmation.

Please Sign: *ASTA MIJAC*

(X) Accept

() Decline

Attention: Jeremiah Schimka
727-240-3366
Operations@covartransport.com

Driver Name: Adonis
Driver Cell: 786-371-9411
Driver Email: ASTA@ROYAL3INC.COM
Tractor #: 723
Trailer #:

23292290



RATE CONFIRMATION AGREEMENT FOR COVAR TRANSPORTATION

****ALL LOADS REQUIRE MACRO-POINT TO BE TRACKED BY DRIVER CELL OR TRACTOR NUMBER****

All communication should include your booking rep and Operations@covartransport.com

Afterhours is available till 22:00 nightly and resumes at 0600:00am following day. If you have a late-night lumper that you will need a comcheck or relay code payment issued by CoVar; please requests prior to 22:00

Assistance for Lumper payments please send your CoVar order number and amount for lumper payment to:

Operations@covartransport.com

- If you need a comcheck for any lumpers, late fees, or accessorial it will be a \$10 fee per transaction. Lumper receipts must be submitted within 48 hours of delivery to be reimbursed/or paid out or payment will not be processed.
- If you can pay for the lumper yourself, please submit your lumper receipt and load number. CoVar will send you an updated rate confirmation for reimbursement.

Maximum layover is \$200/day. Maximum Truck Order Not Used is \$150 unless otherwise specified. Any detention requests must be notified at time of occurrence, times for in and out must be signed, your time will need to show you arrived before your appointment time. CoVar will cross reference your times with Macro-Point tracking. Note that detention pay is not guaranteed at all facilities. Detention is paid at \$30/hr and starts two hours after appointment time. Additional stop off pay is \$50.

If shipper and receiver address do not match on the Bill of Lading, you must notify your booking rep to confirm the correct address.

In Accordance with 49 CFR Part 392.9, Drivers must inspect their cargo and securement devices prior to leaving the shipper.

All loads that are rejected due to shifting or damaged pallets must have pictures taken at receiver. Investigations will take place internally to determine the proper disposition of the load-return to origin or destruction. Damages could result in a claim. All restacked loads will be at the expense of the Driver.

Rework Guidelines:

- 1 Nothing is shifted or leaning.
- 2 All pallets are full and normal height. (No extra cases or missing cases)
- 3 Cases must be stacked with the same cases they originated with. (No batch mixing)
- 4 Pallet tags are included, and clear wrap is used.
- 5 Chep pallets.
- 6 No damaged cases

CoVar is a licensed freight broker (**MC895138**), who does not condone any driver to operate a commercial motor vehicle, when the driver reports that he/she would not be able to drive due to hours of service, vehicle maintenance, fatigue, or equipment regulations. Carrier's motor vehicle equipment shall be dedicated to CoVar's exclusive use while transportation freight tendered by CoVar. **Double Brokering is strictly prohibited.** This load confirmation is subject to the terms of the agreement for motor contract carrier services previously executed between our companies. If there is a violation, carrier shall forfeit its right to be paid for transportation services.

Carrier's cargo insurance policy must not exclude from coverage any commodities or cargo carried on this order. If carrier's cargo insurance policy contains a schedule of covered vehicles, carrier will not transport any cargo on this shipment using a vehicle that is not listed as a scheduled vehicle on carrier's cargo insurance policy.

Invoice Instructions:

Please send all invoices to: Accounting@covartransport.com

- CoVar Load # 232***** must be in the subject line of your invoice email to accounting in order to avoid processing delays
- Submit your invoice with invoice number, amount, lumper/accessorial and remit address.
- BOL must be legible with clear signatures and/or stamps proving order was delivered to destination.
- All lumper receipts must have the lumper service FEIN number listed along with the correct PO number that matches your BOL.
- CoVar offers Quickpay at 3%. First time carriers are not eligible for Quickpay through CoVar.



STRAIGHT BILL OF LADING

BOL #: ORD-321953

Carrier: Not yet assigned
MS 00000 yet assigned

SCAC: .ALL

Page 1 of 1

RECEIVED, subject to the classification and written agreement between carrier and shipper in effect on the date of issue of this original Bill of Lading.

The property described below is received in good order, except as noted in remarks and condition of contents unknown marked, conveyed, and delivered as indicated below, which said carrier does warrant being understood throughout this contract as meaning any parcels or packages in possession of the property under the contract agree 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 part of said property that every service to be performed hereunder shall be subject to the same and conditions of the Uniform Freight Classification, Freight Bill of Lading and the Uniform Freight Classification in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff of rate is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading 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 agents.

SHIPPER

Suntree Snack Foods
2699 Highwood Blvd.
Smyrna
TN 37167

DELIVER TO (CONSIGNEE)

MID ATLANTIC
DISTRIBUTION CENTER
601 CHELSEA ROAD
Aberdeen, MD 21001Seal 1 : 0050071
Freight Term : CollectPO#
Customer Ref#: 391368
Order Date: 8229683
Ship Date: 12.10.24
Arrival Date: 12.10.24
12.11.24

4 pallets

Quantity	Haz	Item No/ Lot No	Description	Weight	Class	Ck Col.
100 CS		36416	12/5oz PNT BUTR MX	191.42	FAK	00
100 CS		3716215-251126		191.42		
100 CS		36417	12/5oz S'MORES TR MX	192.86	FAK	00
100 CS		3716119-251115		192.86		
80 CS		36418	12/5oz ELOTE TR MX	152.86	FAK	00
80 CS		3716397-251127		152.86		
100 CS		36419	12/4.5oz HOT HONEY CASH	174.18	FAK	00
100 CS		3713401-251203		174.18		

LTL pallet

RITE AID-0010

DATE: _____
CTNS RCVD: _____
CTNS OVER: _____
CTNS DAMAGED: _____
NO# CHEP PALLETS: _____
PRINT NAME: _____
SIGNATURE: _____
PALLETS RCVD: _____
CTNS SHORT: _____
CTNS RTV: _____
PACKING LIST: _____

12/10/24

has pack list

*****TOTALS*****

380

173.71 FT

G:

711.31 LBS

N:

711.31 LBS

Drivers are responsible for their own load and count. No recourse after signing for load.

Received in Good Order: Driver's Signature

Date

12/10/24

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

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

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'Carriers or Shippers 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 stated by the shipper to be not exceeding \$ _____

Per

Charges are to be prepaid only if stated herein.

Received \$

to apply in prepayment of the charges on the property described herein.

Per

(Acknowledges prepaid amt.)

(Signature of consignor)

SHIP FROM

Goggin Warehousing, LLC (I24)
2699 Highwood Blvd
Smyrna TN, 37167

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.

Shippers Agent, Per

STRAIGHT BILL OF LADING

BOL #: ORD-321548

Carrier: Not yet assigned
MS 00000

SCAC: .ALL

Page 1 of 1

RECEIVED, subject to the classification and written agreement between carrier and shipper in effect on the date of issue of this original Bill of Lading.

the property described below in apparent good order, except as noted (contents and condition of contents unknown) marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as 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 said property over all or any portion of said route to destination, and as to each party at any time interested in 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 as set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading 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.

SHIPPER

Suntree Snack Foods
2699 Highwood Blvd.
Smyrna
TN 37167

DELIVER TO (CONSIGNEE)

LIVERPOOL DIST CENTER
7245 HENRY CLAY BLVD
Liverpool, NY 13088

Seal 1 : 0050066
Freight Term : Collect

PO# : 391677
Customer Ref#: 8229684
Order Date : 12.06.24
Ship Date : 12.09.24
Arrival Date : 12.09.24

4 pallets

Quantity	Haz	Item No/ Lot No	Description	Weight	Class	Ck Col.
80 CS		36416 12/5oz	PNT BUTR MX	153.13	FAK	00
80 CS		3716215-251126		153.13		
80 CS		36417 12/5oz	S'MORES TR MX	154.29	FAK	00
80 CS		3716119-251115		154.29		
60 CS		36418 12/5oz	ELOTE TR MX	114.64	FAK	00
60 CS		3716397-251127		114.64		
80 CS		36419 12/4.5oz	HOT HONEY CASH	139.34	FAK	00
80 CS		3713401-251203		139.34		

LTL pallet

Rite Aid
300 received
4 sup in 8 out
w/packer (BOL).
12/12/24

*****TOTALS*****
300 137.14 FT G: 561.40 LBS
N: 561.40 LBS

Drivers are responsible for their own load and count. No recourse after signing for load.

Received in Good Order: Driver's Signature

Date

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.
The carrier shall not make delivery of this shipment without payment of freight and all lawful charges.

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'Carriers or Shippers 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 stated by the shipper to be not exceeding \$

Charges are to be prepaid only if stated here.

Received \$
to apply in prepayment of the charges on the property described herein.

(Signature of consignor)

Per

Per

(Acknowledges prepaid amt.)

SHIP FROM

Goggin Warehousing, LLC (I24)
2699 Highwood Blvd
Smyrna TN, 37167

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Shippers Agent, Per

STRAIGHT BILL OF LADING

Carrier: Not yet assigned
 RECEIVED, subject to the classification and written agreement between carrier and shipper in effect on the date of issue of this original Bill of Lading.

BOL #: ORD-321953

SCAC: .ALL

Page 1 of 1

SHIPPER

Suntree Snack Foods
 2699 Highwood Blvd.
 Smyrna
 TN 37167

DELIVER TO (CONSIGNEE)

MID ATLANTIC
 DISTRIBUTION CENTER
 601 CHELSEA ROAD
 Aberdeen, MD 21001

Seal 1 : 0050071
 Freight Term : Collect

PO#
 Customer Ref#: 391368
 Order Date : 8229683
 Ship Date : 12.10.24
 Arrival Date : 12.10.24
 12.11.24

4 pallets

Quantity	Haz	Item No/ Lot No	Description	Weight	Class	Ck Col.
100 CS		36416 12/5oz	PNT BUTR MX	191.42	FAK	00
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80 CS		36418 12/5oz	ELOTE TR MX	152.86	FAK	00
80 CS		3716397-251127		152.86		
100 CS		36419 12/4.5oz	HOT HONEY CASH	174.18	FAK	00
100 CS		3713401-251203		174.18		

LTL pallet

RITE AID-0010

DATE: _____
 CTNS RCVD: _____ PALLET RCVD: _____
 CTNS OVER: _____ CTNS SHORT: _____
 CTNS DAMAGED: _____ CTNS RTV: _____
 NO# CHEP PALLETS: _____ PACKING LIST: _____
 PRINT NAME: _____
 SIGNATURE: _____

has pack list

*****TOTALS*****
 173.71 FT G: 711.31 LBS
 N: 711.31 LBS

Drivers are responsible for their own load and count. No recourse after signing for load.

Received in Good Order: Driver's Signature

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
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 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 stated by the shipper to be not exceeding \$ _____

Per _____

Date 12/10/24

Charges are to be prepaid only if stated here.

Received \$ _____
 to apply in prepayment of the charges on the property described herein.

Per _____
 (Acknowledges prepaid amt.)

(Signature of consignor)

SHIP FROM

Goggin Warehousing, LLC (I24)
 2699 Highwood Blvd
 Smyrna TN, 37167

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.

Shippers Agent, Per _____