



INVOICE

BILL TO:

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

INVOICE DATE: 12/13/2024**INVOICE #:** B69295**TERMS:** NET 30**DUE DATE:** 01/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/12/2024		97 Locust Road, Lewistown, PA 17044 - 501 Landsdowne Road, Fredericksburg, VA 22408			
		Freight Income	1	\$950.00	\$950.00

TOTAL

\$950.00

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 6198562

Load		Carrier		Truck	
Arrive Order	6198562	Carrier	Brz	Equipment	-
Cargo Value	\$100,000.00	Attn		Truck Number	
Total Miles	230 Miles	Phone		Driver	
Total Pallets	60 Pallets	Fax		Driver Phone	
Total Weight	26709 lbs				
Load Mode	TL				
Load EQ Type	Van Only				
EQ Size	53 ft				
Customer Ref #	LD002773546				
PO #	3174487				
PO #	3174488				
Reference #3	LD002773546				
Shipment ID	LD002773546				
Notes 1	611410442				
Rate Details					
LineHaul	\$950.00				
Total	\$950.00				

HOW TO GET PAID!

All invoices must either be emailed to 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 6198562

Pickup #1

Pickup Address	Appointment	Ref/PO#	Commodity	Weight
First Quality Consumer Products LLC 97 Locust Road Lewistown, PA 17044	Dec 12, 2024 15:00 EST Appt. Type By Appointment Confirmed	Special Instructions Customer Ref # PO # Reference #3	SN565748 LD002773546 3174487 LD002773546	Absorbent Hygiene Products 26709 lb 60 PALLETS

Driver Instructions: BY APPOINTMENT

Pickup Notes: No Note

Delivery #1

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
CVS DC# M101 (Fredericksburg) 500 LANSLOWNE ROAD Fredericksburg, VA 22408	Dec 13, 2024 05:00 EST Appt. Type By Appointment Confirmed	Special Instructions Customer Ref # PO # Reference #3	SN565748 LD002773546 3174487 LD002773546	Absorbent Hygiene Products 26709 lb 60 PALLETS

Driver Instructions: BY APPOINTMENT

Delivery Notes: No Note

Delivery #2

Delivery Address	Appointment	Ref/PO#	Commodity	Weight
CVS Dist. - Fredericksburg Bulk 501 Landsdowne Road Fredericksburg, VA 22408 5408345635	Dec 13, 2024 08:30 EST Appt. Type By Appointment Confirmed	Customer Ref # PO # Reference #3	LD002773546 3174487 LD002773546	

Special Requirements: Lumper Expected

Driver Instructions: BY APPOINTMENT

Delivery Notes:

Pickup Comments DRIVER MUST HAVE VALID & PHYSICAL US ID TO BE UNLOADED *AUTOTRACKING/DR. CONTACT REQUIRED* DRIVER MUST HAVE HOURS TO MAKE ON-TIME PICKUP & DELIVERY. ACCESSORIALS, INCLUDING DETENTION AND LUMPERS, MUST BE REQUESTED WITHIN 72 HOURS

Delivery Comments NO YARDING. SAME DRIVER MUST PICK/DELIVER ARRIVE WILL NOT PAY ANY LAYOVERS OR STORAGE FEES FOR MISSED DELIVERIES.

All invoices must include signed proof of delivery and supporting documents.

Please email to 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 6198562

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.

SHIP FROM		BILL OF LADING NUMBER: 611410442 01	
FQCP - Retail (US) 97 Locust Road Lewistown PA 17044			
SHIP TO		CARRIER NAME: Customer's CARRIER	
CVS DC M101 500 Landsdowne Rd Fredericksburg VA 22408		Trailer Number: W94950 Seal Number(s): 18489884	
Freight Charges Bill To		PRO (9012K)	
CVS One Cvs Dr Woonsocket RI 02895 USA			
		Freight Charge Terms: (Prepaid unless marked otherwise) Prepaid _____ Collect <u>X</u> 3rd Party _____	
		<input type="checkbox"/> Master Bill of Lading: with underlying Bill of Lading	

SPECIAL INSTRUCTIONS: PO Number: 3174488 Appointment: LD002773546 Appointment Date :12/02/2024 Appointment Time :00:00:00	SHIPPING INSTRUCTIONS: <div style="font-size: 2em; font-family: cursive;"> CVS STC 12/13/24 C Smith </div>
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CUSTOMER ORDER INFORMATION				ADDITIONAL SHIPPER INFO	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP		
3174488	2,225 CS	7930KG(17483LB)	N	Marie Wilson - 540-834-5635	
GRAND TOTAL	2,225 CS	7930KG(17483LB)			

CARRIER INFORMATION						LTL ONLY	
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		NMFC #	CLASS
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	<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>	
		952	CS	2185KG(4817LB)		Class 70	
		1,273	CS	5723KG(12617LB)		Class 110	
39		2,225		7930KG(17483LB)		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"/>
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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 applicable 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
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SHIPPER SIGNATURE/DATE 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 applicable regulations of the U.S. DOT. <div style="text-align: center; margin-top: 20px;">  Signed by shipper on 12/12/2024 at 16:27:11 </div>	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 Pick Appointment: 12/12/2024 15:00 Driver Arrived: 12/12/2024 14:28	CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges the receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the US DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. <div style="text-align: center; margin-top: 20px;">  Signed by carrier on 12/12/2024 at 16:27:09 </div>
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SUPPLEMENT TO THE BILL OF LADING



Date: 12/12/2024

Page 2 of 2

Bill of Lading Number: 611410442 01

Delivery	Material number	Customer/Catalog number	Description	Qty	UOM
33665809	10004217	795728	CVS BCPAD UL EX COV 4/27	144	CS
33665809	10009025	240487	CVS BCPAD MOD 9/20	49	CS
33665809	10005204	335475	CVS PROT UND WMN XXL 4/14	24	CS
33665809	10009024	535872	CVS BCPAD MOD 4/66	150	CS
33665809	10007989	242743	CVS BCPAD MOD EX COV 4/54	24	CS
33665809	10009149	520577	CVS WSHCLOTH SCT SFT PK 3/48	840	CS
33665809	10004103	489350	CVS PROT UND WMN LG SUP 4/18	72	CS
33665809	10008894	489372	CVS PROT UND MEN S/M SUP 4/20	40	CS
33665809	10009026	714508	CVS BCPAD UL 4/33	140	CS
33665809	10008892	489366	CVS PROT UND MEN L/X SUP 4/18	72	CS
33665809	10005121	424332	CVS BCPAD VLT LNR LNG 6/44	119	CS
33665809	10009173	489356	CVS PROT UND WMN XL 4/18	36	CS
33665809	10004221	288243	CVS BCPAD MAX EX COV 1/84	48	CS
33665809	10008323	693861	CVS UG BLTD XABS 4/30	21	CS
33665809	10004102	489330	CVS PROT UND WMN S/M SUP 4/20	80	CS
33665809	10010072	816326	CVS WSHCLOTH SCT SFT PK 3/96	112	CS
33665809	10007134	699083	CVS BCPAD MAX TH 4/48	96	CS
33665809	10007013	349651	CVS BCPAD EXHVVY LNG TH 4/28	50	CS
33665809	10007133	349529	CVS BCPAD LT 6/30	63	CS
33665809	10007135	181771	CVS BCPAD MOD TH 4/66	45	CS

SHIP FROM		BILL OF LADING NUMBER: 611410442 02	
FQCP - Retail (US) 97 Locust Road Lewistown PA 17044			
SHIP TO		CARRIER NAME: Customer's CARRIER	
CVS DC M303 501 Landsdowne Rd Fredericksburg VA 22408		Trailer Number: W94950 Seal Number(s): 18489884	
Freight Charges Bill To		PRO (9012K)	
CVS One Cvs Dr Woonsocket RI 02895 USA			
		Freight Charge Terms: (Prepaid unless marked otherwise) Prepaid _____ Collect <u>X</u> 3rd Party _____	
		<input type="checkbox"/> Master Bill of Lading: with underlying Bill of Lading	

SPECIAL INSTRUCTIONS: PO Number: 3174487 Appointment: LD002773546 Appointment Date :12/02/2024 Appointment Time :00:00:00	SHIPPING INSTRUCTIONS:
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CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
3174487	911 CS	4668KG(10291LB)	N	Marie Wilson - 540-834-5635
<i>Handwritten: CVS 200 GHS 12/13/24 [Signature]</i>				
GRAND TOTAL	911 CS	4668KG(10291LB)		

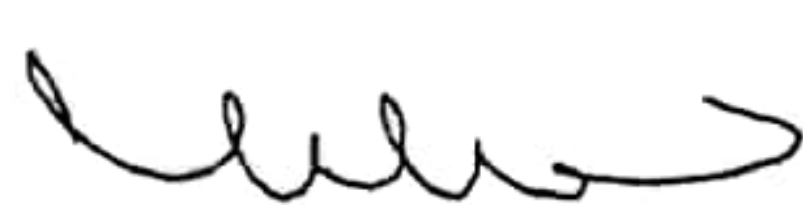

CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)
		911	CS	4490KG(9898LB)	
21		911		4668KG(10291LB)	
				GRAND TOTAL	

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"/>
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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 applicable 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

SHIPPER SIGNATURE/DATE 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 applicable regulations of the U.S. DOT.  Signed by shipper on 12/12/2024 at 16:27:11	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 Pick Appointment: 12/12/2024 15:00 Driver Arrived: 12/12/2024 14:28	CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges the receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the US DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.  Signed by carrier on 12/12/2024 at 16:27:09
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SUPPLEMENT TO THE BILL OF LADING



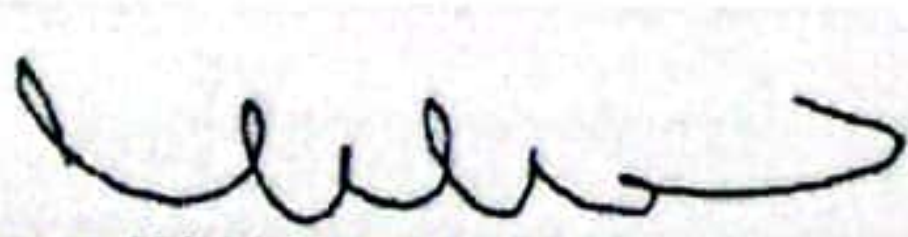



Bill of Lading Number: 611410442 02

Delivery	Material number	Customer/Catalog number	Description	Qty	UOM
33665814	10004107	830474	CVS PROT UND WMN XL SUP 2/28	252	CS
33665814	10004106	830475	CVS PROT UND WMN LG SUP 2/32	72	CS
33665814	10004108	617720	CVS PROT UND WMN S/M SUP 1/44	51	CS
33665814	10004109	618504	CVS PROT UND WMN LG SUP 1/40	51	CS
33665814	10008895	830473	CVS PROT UND MEN S/M SUP 2/36	160	CS
33665814	10008002	512509	CVS UNDERPAD OGSCT 23X36 4/18	280	CS
33665814	10004110	617944	CVS PROT UND WMN XL SUP 1/38	45	CS

MASTER BILL OF LADING

Date: 12/12/2024 Page 1 of 1


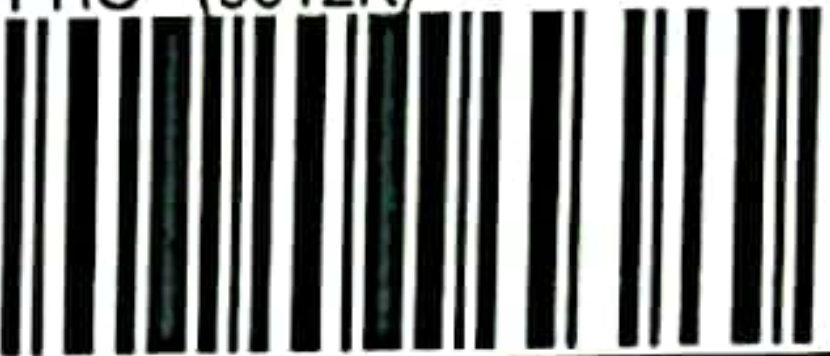
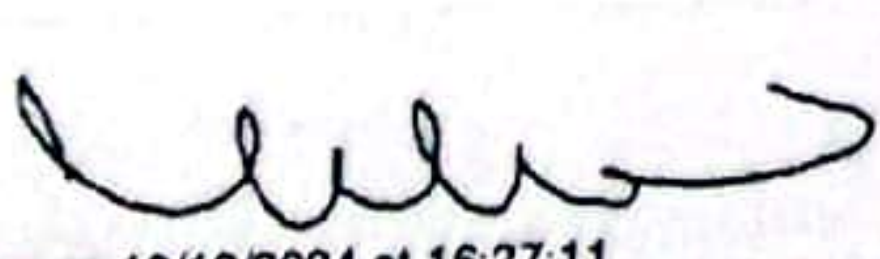
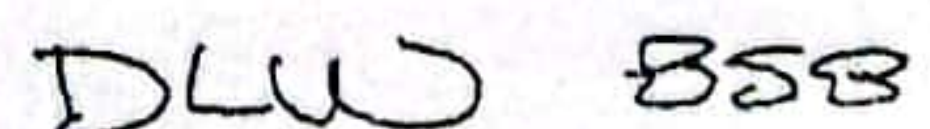
SHIP FROM		BILL OF LADING NUMBER: 611410442	
FQCP - Retail (US) 97 Locust Road Lewistown PA 17044 Phone: (717) 247-3907			
SHIP TO		CARRIER NAME: Customer's CARRIER	
CVS DC M303 501 Landsdowne Rd Fredericksburg VA 22408 Phone: 540-834-5635		Trailer Number: W94950 Seal Number(s): 18489884	
Freight Charges Bill To		PRO (9012K)	
CVS One Cvs Dr Woonsocket RI 02895 USA			
		Freight Charge Terms: (Prepaid unless marked otherwise) Prepaid _____ Collect <u>X</u> 3rd Party _____	
		<input checked="" type="checkbox"/> Master Bill of Lading: with underlying Bill of Lading	
SPECIAL INSTRUCTIONS: "Multiple Stop Load:" Stop#1: 3174488 3174487, Stop#2: 3174488 3174487 Appointment Date :12/02/2024 Appointment Time :00:00:00		SHIPPING INSTRUCTIONS:	
CUSTOMER ORDER INFORMATION			
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT
See Attached Underlying Bills of Lading			
GRAND TOTAL		3,136	12598KG(27775LB)
CARRIER INFORMATION			
HANDLING UNIT		PACKAGE	
QTY	TYPE	QTY	TYPE
60		3,136	
COMMODITY DESCRIPTION		LTL ONLY	
See Attached Underlying Bills of Lading		NMFC # CLASS	
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 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 applicable 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	
SHIPPER SIGNATURE/DATE 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 applicable regulations of the U.S. DOT.  Signed by shipper on 12/12/2024 at 16:27:11		CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges the receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the US DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.  Signed by carrier on 12/12/2024 at 16:27:09	
Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Pick Appointment: 12/12/2024 15:00 Driver Arrived: 12/12/2024 14:28		Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	

SUPPLEMENT TO THE BILL OF LADING

Date: 12/12/2024 Page 2 of 2

Bill of Lading Number: 611410442 01

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33665809	10009026	714508	CVS BCPAD UL 4/33	140	CS
33665809	10008892	489366	CVS PROT UND MEN L/X SUP 4/18	72	CS
33665809	10005121	424332	CVS BCPAD VLT LNR LNG 6/44	119	CS
33665809	10009173	489356	CVS PROT UND WMN XL 4/18	36	CS
33665809	10004221	288243	CVS BCPAD MAX EX COV 1/84	48	CS
33665809	10008323	693861	CVS UG BLTD XABS 4/30	21	CS
33665809	10004102	489330	CVS PROT UND WMN S/M SUP 4/20	80	CS
33665809	10010072	816326	CVS WSHCLOTH SCT SFT PK 3/96	112	CS
33665809	10007134	699083	CVS BCPAD MAX TH 4/48	96	CS
33665809	10007013	349651	CVS BCPAD EXHVVY LNG TH 4/28	50	CS
33665809	10007133	349529	CVS BCPAD LT 6/30	63	CS
33665809	10007135	181771	CVS BCPAD MOD TH 4/66	45	CS

SHIP FROM				BILL OF LADING NUMBER: 611410442			
FQCP - Retail (US) 97 Locust Road Lewistown PA 17044 Phone: (717) 247-3907							
SHIP TO				CARRIER NAME: Customer's CARRIER			
CVS DC M303 501 Landsdowne Rd Fredericksburg VA 22408 Phone: 540-834-5635				Trailer Number: W94950 Seal Number(s): 18489884			
Freight Charges Bill To				PRO (9012K)			
CVS One Cvs Dr Woonsocket RI 02895 USA							
				Freight Charge Terms: (Prepaid unless marked otherwise) Prepaid _____ Collect <u>X</u> 3rd Party _____			
				<input checked="" type="checkbox"/> Master Bill of Lading: with underlying Bill of Lading			
SPECIAL INSTRUCTIONS: *Multiple Stop Load: Stop#1: 3174488 3174487, Stop#2: 3174488 3174487 Appointment Date :12/02/2024 Appointment Time :00:00:00				SHIPPING INSTRUCTIONS:			
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER		# PKGS		WEIGHT		PALLET/SLIP	
						ADDITIONAL SHIPPER INFO	
See Attached Underlying Bills of Lading						Marie Wilson - 540-834-5635	
GRAND TOTAL		3,136		12598KG(27775LB)			
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	NMFC #	CLASS
60		3,136		12598KG(27775LB)			
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 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 applicable 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	
SHIPPER SIGNATURE/DATE				Trailer Loaded:		Freight Counted:	
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 applicable regulations of the U.S. DOT.  Signed by shipper on 12/12/2024 at 16:27:11				<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	
				Pick Appointment: 12/12/2024 15:00		12/12/2024 15:00	
				Driver Arrived: 12/12/2024 14:28		12/12/2024 14:28	
				CARRIER SIGNATURE/PICKUP DATE			
				Carrier acknowledges the receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the US DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.  Signed by carrier on 12/12/2024 at 16:27:09			



BILL OF LADING

Date: 12/12/2024 Page 1 of 2

SHIP FROM				BILL OF LADING NUMBER: 611410442 02			
FQCP - Retail (US) 97 Locust Road Lewistown PA 17044 Phone: (717) 247-3907							
SHIP TO				CARRIER NAME: Customer's CARRIER			
CVS DC M303 501 Landsdowne Rd Fredericksburg VA 22408 Phone: 540-834-5635				Trailer Number: W94950 Seal Number(s): 18489884			
Freight Charges Bill To				PRO (9012K) 			
CVS One Cvs Dr Woonsocket RI 02895 USA				Freight Charge Terms: (Prepaid unless marked otherwise) Prepaid _____ Collect <input checked="" type="checkbox"/> 3rd Party _____ <input type="checkbox"/> Master Bill of Lading: with underlying Bill of Lading			
SPECIAL INSTRUCTIONS: PO Number: 3174487 Appointment: LD002773546 Appointment Date : 12/02/2024 Appointment Time : 00:00:00				SHIPPING INSTRUCTIONS:			
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO		
3174487		911 CS	4668KG(10291LB)	N	Marie Wilson - 540-834-5635		
GRAND TOTAL		911 CS	4668KG(10291LB)				
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	NMFC #	CLASS
		911	CS	4490KG(9898LB)			
21		911		4668KG(10291LB)		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 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 applicable 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		
SHIPPER SIGNATURE/DATE 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 applicable regulations of the U.S. DOT. Signed by shipper on 12/12/2024 at 16:27:11				Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Pick Appointment: 12/12/2024 15:00 Driver Arrived: 12/12/2024 14:28		Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges the receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the US DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. Signed by carrier on 12/12/2024 at 16:27:09	

SUPPLEMENT TO THE BILL OF LADING



Date: 12/12/2024

Page 2 of 2

Bill of Lading Number: 611410442 02

Delivery	Material number	Customer/Catalog number	Description	Qty	UOM
33665814	10004107	830474	CVS PROT UND WMN XL SUP 2/28	252	CS
33665814	10004106	830475	CVS PROT UND WMN LG SUP 2/32	72	CS
33665814	10004108	617720	CVS PROT UND WMN S/M SUP 1/44	51	CS
33665814	10004109	618504	CVS PROT UND WMN LG SUP 1/40	51	CS
33665814	10008895	830473	CVS PROT UND MEN S/M SUP 2/36	160	CS
33665814	10008002	512509	CVS UNDERPAD OGSCCT 23X36 4/18	280	CS
33665814	10004110	617944	CVS PROT UND WMN XL SUP 1/38	45	CS