



## INVOICE

**BILL TO:**  
SCOTLYNN USA DIVISION INC  
9597 GULF RESEARCH LANE  
FORT MYERS, FL 33912

**INVOICE DATE:** 01/17/2025  
**INVOICE #:** R73333  
**TERMS:** NET 30  
**DUE DATE:** 02/17/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/16/2025		2471 Palumbo Dr STE 150, LEXINGTON, KY 40509 - 185 J M Tatum Industrial Dr, Hattiesburg, MS 39401, USA			
		Freight Income	1	\$1,800.00	\$1,800.00

TOTAL
\$1,800.00

**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**

**Scotlynn USA Division**

9597 Gulf Research Lane  
 Fort Myers, FL 33912  
 Ph: 888-263-1888  
 Fax: 239-433-3372  
 www.scotlynn.com

**Operations Contact**

Jarrett Pearson  
 teamhp@scotlynn.com  
 ph: 239-207-3091 x 3091  
 cell:  
 fax: 239-207-3094

**Billing Contact**

9597 Gulf Research Lane  
 Fort Myers, FL 33912  
 ph: 800-263-9117 x 2541  
 fax: 239-603-8407  
 email: usa-accounting@scotlynn.com

**Carrier:** ROYAL3 INC  
 CHICAGO  
**Date:** 01/16/2025

IL 60638

**Contact:** Leo  
**Phone:**  
**Fax:**

**Commodity:** Dry Grocery  
**Temp:** to

Run Continuous: Y

**Trailer:** 53 Ft Van - Dry

**Stop Details**

**PU 1** **Name:** 326 - WT YOUNG LEXINGTON KY **Arrive Between:** 01/16/2025 1300  
**Address:** 2471 Palumbo Dr STE 150 **And:** 01/16/2025 1400  
 LEXINGTON KY 40509 **Contact:** Main  
**Phone:** 859-335-0506  
**Pallets:** IN: OUT:  
**Cases:**  
**Weight:**

Ref: PU 42941865

**Pcs:** 36 **Weight:** 40605.0 **Desc:**

**Stop Details**

**SO 2** **Name:** Sams Club #4792 **Arrive Between:** 01/17/2025 0700  
**Address:** 185 JM Tatum Industrial Dr. **And:**  
 HATTIESBURG MS 39401 **Contact:**  
**Phone:**  
**Pallets:** IN: OUT:  
**Cases:**  
**Weight:**

Ref: PO 5632366248

**Pcs:** 36 **Weight:** 40605.0 **Desc:**

Ref: PU CONF# 83755252

**Pcs:** **Weight:** **Desc:**

**Carrier Freight Pay:** \$1,800.00  
**Total Carrier Pay:** \$1,800.00

## Comments

326 - WT YOUNG LEXINGTON KY - THEJOROH: \*\*\*\*\*WALMART LOADS ARE NEVER TO DELIVER EARLY EVER IF YOU DO SO THERE WILL BE A \$1500 FINE\*\*\*\*\*

\*\*ALL PAPERWORK MUST BE EMAILED BY END OF DAY ON DELIVERY DATE\*\*

LUMPER RECEIPTS NEED TO BE SUBMITTED TO [usa-accounting@scotlynn.com](mailto:usa-accounting@scotlynn.com) WITHIN 72 HOURS OF DELIVERY DATE OR THEY MAY NOT BE REIMBURSED

326 - WT YOUNG LEXINGTON KY - THEJOROH: \*\*\*\*\*WALMART LOADS ARE NEVER TO DELIVER EARLY EVER IF YOU DO SO THERE WILL BE A \$1500 FINE\*\*\*\*\*

\*\*\*IF YOUR DRIVER IS FOR WHATEVER REASON, UNABLE TO MAKE ON TIME DELIVERY (BREAKDOWN, DRIVER IS SICK, OUT OF HOURS, ETC.) YOU MUST GIVE US PERMISSION TO REPOWER THE TRAILER\*\*\*

-DETENTION WILL START 4 HOURS AFTER APPOINTMENT TIME AT \$20/HR OR UNTIL LAYOVER OR \$160 IS HIT.

-LOCATION UPDATES ARE TO BE PROVIDED BY 0900AM AND 1600 EST

-DRIVERS ARE REQUIRED TO SECURE FREIGHT WITH A MINIMUM OF 2 LOAD LOCKS AND/OR STRAPS AT THE BACK OF THE TRAILER AFTER THE AIRBAG IS IN PLACE.

-LOADING AND UNLOADING UPDATES ARE DUE WITHIN 2 HOURS OF LOADING/UNLOADING


-LUMPER RECEIPTS NEED TO BE SUBMITTED WITHIN 72 HOURS OF DELIVERY DATE OR THEY MAY NOT BE REIMBURSED

- IF THERE IS A BREAKDOWN OR A DRIVER ISSUE(FAMILY ISSUE, DRIVER SICK, NOT ENOUGH HOURS) CARRIER MUST ALLOW SCOTLYNN TO REPOWER THE TRAILER OR CROSS DOCK IN ORDER TO MAKE ON TIME DELIVERY

Trailer Closed : 1/16/25, 2:06 PM

## BILL OF LADING

Page 1

<b>SHIP FROM</b> JM SMUCKER & SUBSIDIARIES 2471 PALUMBO DR Lexington, KY 40509 FOB: <input type="checkbox"/>	<b>Bill of Lading Number:</b> 185166835  (402) 185166835
<b>SHIP TO</b> SAM'S DISTRIBUTION CTR #4792 C/O SADDLE CREEK CORP 185 J M TATUM HATTIESBURG, MS 39401 FOB: <input type="checkbox"/>	<b>Carrier Name:</b> SCOTLYNN USA DIVISION INC <b>Trailer Number:</b> 0000003261 <b>Seal number(s):</b> 724197
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> THE J.M. SMUCKER COMPANY C/O CASS INFORMATION SYSTEMS COLUMBUS, OH 43218-2038	<b>SCAC:</b> SUSD <b>Pro #:</b>
<b>SPECIAL INSTRUCTIONS :</b>	<div style="text-align: right; color: red;">           Sam's DC 4792            Receiver # 154963 TR# 3261            PO# 5632366248 PLTS 36            364         </div> <b>Freight Charge Terms:</b> (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> Short <input type="checkbox"/> 3rd Party <input type="checkbox"/> Over <input type="checkbox"/> Damage Kept <input type="checkbox"/> Date 1-17-25 Rec'd By <i>Butler</i>

CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# Cases	NET WEIGHT	Pallet/Slip (Circle One)		REQ DELIV	ADDITIONAL SHIPPER INFO JMS ORD NUM
5632366248	36.0	39355.00	Y	N	1/17/25, 12:00 AM	42941865-36881
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
<b>GRAND TOTAL</b>	36	39355.00				

CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		GROSS WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. <small>See Section 2(e) of NMF C Item 360</small>	NMFC # CLASS
0.0		19.0	Cases	6460.0	0.0	Foodstuffs, other than frozen, Group IV, viz(30 or greater)	73260 60
0.0		17.0	Cases	32895.0	0.0	PEANUT BUTTER (PEANUT PASTE) OR PEANUT SPREAD	74220 60
36.0	Full Chop	0.0		1980.0	0.0	PLATFORM	
36.0		36.0		41335.0		<b>GRAND TOTAL</b>	

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: ☐Prepaid: ☐Customer check acceptable: ☐

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.

Shipper

Signature

## 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 the applicable regulations of the DOT.

Dispatched Time : \_\_\_\_\_

Trailer Loaded:

☐ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ By Driver/pallets said to contain☐ By Driver/Pieces

## CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information is marked on placard and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.