



INVOICE

BILL TO:
WEL LOGISTICS INC
1625 S. BROADWAY
DE PERE, WI 54115

INVOICE DATE: 01/20/2025
INVOICE #: R73480
TERMS: NET 30
DUE DATE: 02/20/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/17/2025		1211 North 5300 West, Cedar City, UT 84721 - 220 S. Ridge Parkway, Bessemer City, NC 28016			
		Freight Income	1	\$4,400.00	\$4,400.00

TOTAL
\$4,400.00

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



WEL LOGISTICS, INC
1625 S BROADWAY
DE PERE WI 54115

PRO # 209038

Rate Confirmation

01/17/25 08:59:13 (EST)

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CONNOR HUGHES
(414) 414-2114
(888) 555-2222 (f)
Connor.hughes@welcompanies.com

ZIGI FREIGHT INC
(630) 485-7370 (p)
(630) 485-6980 (f)
MC # 944686
DOT 2828543
Driver

Truck #
Trailer #
Cell #

Size & Type: 53' VAN
Pieces:

Description: PACKAGING MATERIAL
Weight: 40000

Miles: 2091

CHARGES		DISPATCH NOTES
LINE HAUL RATE	4400.00	MUST BE SEALED Pick up NUMBER4026583 CUSTOMER RELEASE NUMBER 966362
TOTAL RATE	4400.00	

PICK 1

CEDAR CITY ADDRESS
1211 NORTH 5300 WEST
CEDAR CITY UT 84721

Appointment 01/17/25
Appt Notes: 8AM-3PM

STOP 1

DOLE FRESH VEGETABLES
220 S. RIDGE PARKWAY
BESSEMER CITY NC 28016

Must Deliver: 01/20/25
Appt Notes: 8AM-3PM

****YOUR DRIVER MAY NEED TO INFORM SHIPPER THE LOAD IS ASSIGNED TO WEL LOGISTICS**
****BY ACCEPTANCE OF SHIPMENT, CARRIER GUARANTEES THAT IT IS MANAGING ITS**
DRIVER(S) AND OPERATIONS IN ACCORD WITH THE CARRIER AGREEMENT AND ALL STATE
AND FEDERAL REQUIREMENTS FOR AUTHORIZED MOTOR CARRIERS.
****MANY SHIPPERS AND CONSIGNORS REQUIRE A TRAILER NO OLDER THAN 10 YEARS. YOU**
MAY BE TURNED AWAY AT THE PICK-UP LOCATION IF YOUR TRAILER IS OLDER THAN 10
YEARS.
****TO COMPLY WITH REGULATORY AND CUSTOMER REQUIREMENTS, CARRIER AGREES TO THE**
EXCLUSIVE USE OF ITS TRAILER FOR THE DURATION OF THE TRANSPORT OF THE FREIGHT
IDENTIFIED ON THE RATE CONFIRMATION.
****YOUR DRIVER IS RESPONSIBLE FOR COUNT. ANY TYPE OF DISCREPANCY REGARDING**
SHIPMENT MUST BE IMMEDIATELY REPORTED TO AVOID POSSIBLE FREIGHT CLAIM.
**** AFTER 3 HRS OF WAITING AT SHIPPER, PLEASE CALL THE NUMBER ON THIS RATE**
CONFIRMATION TO REPORT ANY DETENTION.
**** PLEASE SEE YOUR CONTRACT REGARDING CARGO CLAIMS AND INCIDENT REPORTING. IF**
INCIDENTS OR ACCIDENTS OCCUR RELATING TO A DELAY OF DELIVERY OR DAMAGE TO THE
CARGO. IF YOU REQUIRE A RESET ON DELIVERY DATE AND TIME, CALL THE NUMBER ON
THIS RATE CONFIRMATION FOR ASSISTANCE.
**** TO AVOID QUESTIONS REGARDING LOAD SECURITY, THE SHIPPER SHOULD SEAL THE**
LOAD AND NOTE THE SEAL NUMBER, THE DOCUMENTATION MATCHES THE SEAL NUMBER
ON THE TRAILER; AND YOUR DRIVER SHOULD ALWAYS BREAK A SEAL IN THE PRESENCE OF
A RECEIVER AND HAVE THE RECEIVER NOTE THE SEAL WAS INTACT AT THE TIME ON THE
BILL OF LADING.
****NO DOUBLE BROKERING- BROKER HAS NO DUTY TO PAY FOR TRANSPORTATION COMPLETED**
BY ANY INDIVIDUAL OR CARRIER OTHER THAN AS LISTED IN THE CARRIER SECTION ABOVE.
YOUR AGREEMENT HAS MORE DETAIL ON THIS PROHIBITION.
****LATE PICKUP OR DELIVER AT THE SET DATE AND TIME, CARRIER WILL BE SUBJECT TO**
A \$300 CHARGE PER STOP AND ANY OTHER ASSOCIATED FEES IMPOSED BY THE CUSTOMER..

(Rate Confirmation Details on Next Page)

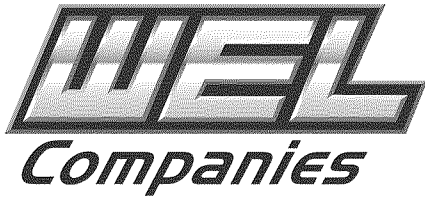
Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 26250117093793792
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 209038

must appear on all Invoices



WEL LOGISTICS, INC
1625 S BROADWAY
DE PERE WI 54115

PRO # 209038

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CONNOR HUGHES
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Connor.hughes@welcompanies.com

ZIGI FREIGHT INC
(630) 485-7370 (p)
(630) 485-6980 (f)
MC # 944686
DOT 2828543
Driver

Truck #
Trailer #
Cell #

YOUR DRIVERS(S) MUST GET A CLEAR SIGNATURE
AND TOTAL COUNT ON DELIVERY RECEIPTS. IF DELIVERY RECEIPT INDICATES OTHER
SPECIAL INSTRUCTIONS, PLEASE ADHERE TO THEM AND CALL WITH ANY QUESTIONS.
A \$50 FEE WILL BE CHARGED TO THE CARRIER FOR LOST PAPERWORK.
**CARB NOTICE- TO THE EXTENT ANY SHIPMENTS SUBJECT TO THIS AGREEMENT ARE
TRANSPORTED WITHIN THE STATE OF CALIFORNIA, CARRIER SHALL ONLY UTILIZE
EQUIPMENT WHICH IS IN FULL COMPLIANCE WITH THE CALIFORNIA AIR RESOURCES BOARD
**(ARB) TRU ACTM IN-USE REGULATIONS. CARRIER SHALL BE LIABLE FOR ITS OWN
PENALTIES OR OTHER LIABILITIES, COSTS OR DAMAGES ASSESSED AGAINST IT OR PAID
BY BROKER OR BROKER'S CUSTOMER, OR ANY OTHER THIRD PARTY, BECAUSE OF CARRIER'S
USE OF NON-COMPLIANT EQUIPMENT.
**THIS IS CONFIRMATION OF A VERBAL LOAD/RATE BETWEEN CARRIER AND THIS RATE
CONFIRMATION SERVES AS AN ADDENDUM TO THE OUTSOURCED CARRIAGE AGREEMENT
AS IT RELATES TO THIS SINGLE SHIPMENT. ALL LOADS TENDERED PURSUANT TO THIS
RATE CONFIRMATION SHALL BE SUBJECT AND SUBORDINATE TO THE CURRENT TERMS,
CONDITIONS AND PROVISION OF WEL LOGISTICS. OUR SOURCED CARRIAGE AGREEMENT
AND ANY APPLICABLE AMENDMENTS THERETO. THE TERMS AND CONDITIONS OF THE OCA
ARE HEREBY INCORPORATED BY REFERENCE. CARRIER'S SIGNATURE AND RETURN OF THE
TENDER OF BY THE ACTUAL ACCEPTANCE/CONTINUATION OF THE TENDERED
SHIPMENTS.
**PLEASE SIGN AND EMAIL BACK TO THE EMAIL ABOVE.
***PLEASE EMAIL WEL-LOGISTICSAP@WELCOMPANIES.COM FOR PAYMENT STATUS
**SEND ALL DELIVERY RECEIPTS WITH SIGNATURES ALONG WITH YOUR INVOICE, SIGNED
RATE CONFIRMATION TO LOGISTICS-PAPERWORK@WELCOMPANIES.COM
**QUICKPAY- NEED TO BE EMAIL TO WEL-LOGISTICSAP@WELCOMPANIES.COM
PLEASE PUT YOUR LOAD NUMBER IN THE SUBJECT LINE ALONG WITH 'QUICK PAY'

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 2625011709157921
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO # 209038

must appear on all Invoices

E-Signed : 01/17/2025 07:59 AM CST

Mateo Utvic

mateo@royal3inc.com
IP: 149.102.242.98

Sertifi Electronic Signature
DocID: 20250117075753792

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

RECEIVED, subject to the classifications and tariffs on the date of issue of the Original Bill of Lading.

Shipper's Bill of Lading # 5014676

Name of Carrier: BEST WAY - ROYAL 3 INC

SCAC:

Date:

Consignee / Final Destination

DOLE FRESH VEGETABLES
220 S. RIDGE PARKWAY
BESSEMER CITY, NC 28016

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 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 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 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 Cor. 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>4026583, 4026515</p> <p>Seal # 0112547</p> <p>SHIP EXACT QTY'S RECEIVING DAYS ARE MONDAY-WEDNESDAY AND FRIDAY *RECV HRS 9AM-4PM. APPT REQUIRED FOR ALL. 704-810-7078 OR 704-869-7447 APC RELEASE: 4026583, 4026515 CUSTOMER PO: 966362, 966287</p> <p>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>	60	35,070	<p>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.</p> <p><i>SW</i></p> <p>(Signature of Consignor)</p> <p>If charges are to be prepaid, write or stamp here, "To be Prepaid"</p> <p>Received \$ _____</p> <p>To apply in prepayment of the charges on items properly described herein.</p> <p>Agent or Cashier _____</p> <p>Per _____</p> <p>The signature here acknowledges only the amount prepaid.</p> <p>Charges Advanced _____</p>

1120/25

**DO NOT DOUBLE STACK
FOOD/MEDICAL GRADE
MATERIAL- DO NOT LOAD
WITH POISONS**

* 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

De BEST WAY

Driver's Name:

Driver's Signature:

Date:

Trailer # or Container #:

Cell Phone#: