



## INVOICE

**BILL TO:**  
TRIDENT TRANSPORT LLC  
505 RIVERFRONT PKWY  
CHATTANOOGA, TN 37402

**INVOICE DATE:** 02/13/2025  
**INVOICE #:** B77026  
**TERMS:** NET 30  
**DUE DATE:** 03/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/11/2025		840 HWY 463 South, Trumann, AR 72472 - 9305 Gerwig Ln Suite T, Columbia, MD 21046			
		Freight Income	1	\$2,800.00	\$2,800.00

TOTAL
\$2,800.00

**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**



## **Rate Confirmation Agreement for Trident Transport, LLC**

- No Double Brokering allowed. Please send Invoices to [accounting@tridenttransport.com](mailto:accounting@tridenttransport.com)
- No additional charges will be paid without prior approval.
- Accessorials must be reported at the time of shipment prior to departure.
- We require exclusive use of the trailer.
- NO CO-MINGLING ALLOWED unless otherwise specified on the rate confirmation.
- By accepting, transporting, handling, signing, or otherwise engaging with the load described in this rate confirmation, Carrier agrees to all terms and conditions stated herein.

**Trident Transport, LLC**  
**505 Riverfront Parkway**  
**Chattanooga, TN 37402**  
**(423) 805-3705**

\*TRYI-825853\*

Trident Transport, LLC  
505 Riverfront Pkwy  
Chattanooga, TN 37402  
423-805-3705 423-805-3701



**TRIDENT**

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**Load Confirmation**

**0816347**

<b>Carrier:</b>	BRZ	<b>Contact:</b>	Marcus
	BURBANK IL 60459	<b>Phone:</b>	708-303-5150 x103
<b>Date:</b>	02/11/2025	<b>Fax:</b>	

<b>Order</b>	<b>Order:</b> 0816347	<b>Commodity:</b> CONVEYOR Systems
	<b>Miles:</b> 935.0	<b>Weight:</b> 12000.0
	<b>Temp:</b>	<b>Trailer:</b> Van (DAT)
	<b>Cases/pieces:</b>	<b>Reference:</b>
	<b>BOL:</b>	<b>Order Type:</b> TL

<b>PU 1</b>	<b>Name:</b> Roach Conveyors	<b>Date:</b> 02/11/2025 1500
	<b>Address:</b> 840 HWY 463 South	02/11/2025 1500
		<b>Contact:</b> *
	<b>TRUMANN AR 72472</b>	<b>Driver Load:</b> No driver loading or unload
	<b>Phone:</b> 870-483-7631	

<b>SO 2</b>	<b>Name:</b> Impact Automation, Inc.	<b>Date:</b> 02/13/2025 0800
	<b>Address:</b> 9305 Gerwig Ln suite t	02/13/2025 1200
		<b>Contact:</b> Frank Byrns
	<b>COLUMBIA MD 21046</b>	<b>Driver Load:</b> No driver loading or unload
	<b>Phone:</b> 410-910-6644	

<b>Payment</b>	<b>Carrier Freight Pay:</b>	\$2,800.00
	<b>Total Carrier Pay:</b>	\$2,800.00

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

Roach Conveyors - \*\*\*\* STRICT PICKUP AND DELIVERY WINDOWS/TIMES. FOR EVERY HOUR LATE, DRIVER'S RATE WILL BE REDUCED BY \$100/HOUR \*\*\*\*

\*\*\*\* CARRIER MUST HAVE MACRO-POINT TRACKING TURNED ON THROUGHOUT TRANSIT. FAILURE TO DO SO WILL RESULT IN RATE REDUCTION AT BROKER'S DISCRETION\*\*\*\*

\*\*\*\* DETENTION TIME WILL START AFTER 4 HOURS UPON ARRIVAL \*\*\*\*

**Please Sign:** *Smith Dabic*

**Driver Name:** Noel  
**Driver Cell:** 786-715-3931  
**Driver Email:**  
**Tractor #:** 604  
**Trailer #:** W94942  
**Tractor VIN:** 1588

(X) Accept

( ) Decline

**Attention:** Kris Hunsucker  
423-270-6219  
kris.hunsucker@tridenttransport.com





# Bill of Lading

DATE: 02/11/2025

## Load Information

LOAD NUMBER: 0816347

BOL NUMBER: 0816347

SHIP DATE: 02/11/2025

DELIVERY: 02/13/2025

PO NUMBER:

OTHER REF#:

### Shipper

### Consignee

NAME: Roach Conveyors  
ADDRESS: 840 Hwy 463 S  
Trumann, AR 72472

NAME: Impact Automation  
ADDRESS: 9525 Berger Rd Suites A-C  
~~8805 E. Main St Suite M~~  
Columbia, MD 21046



### 3rd Party Billing

### Transportation Company

NAME: Trident Transport, LLC

NAME: METN LLC

### Load Details

PCS:  
56

LBS: 12000  
DESCRIPTION OF GOODS: Conveyor Systems

TYPE: NFM: HM: CLASS:

TOTAL PCS TOTAL LBS C.O.D AMOUNT (US\$)  
12000

C.O.D FEE:

DECLARED VALUE:

IF AT CONSIGNOR'S RISK, WRITE HERE OR STAMP HERE:

EMERGENCY PHONE #:  
423-847-7152

NOTES:

### Acknowledgement / Agreement

DATE & TIME:

SHIPPER:

CARRIER:

CONSIGNEE:

DATE & TIME:

# OF PIECES RECEIVED:

PER CONTACT NAME:

PER CONTACT NAME:

# OF PIECES RECEIVED:

SIGN HERE:

2/11/25  
Maurit Joes  
Don Rikley  
2-13-25