



BILL TO: TRIDENT TRANSPORT LLC 505 RIVERFRONT PKWY CHATTANOOGA, TN 37402 INVOICE DATE: 02/14/2025 INVOICE #: R77380 TERMS: NET 30 DUE DATE: 03/14/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/13/2025		19111 Darvin Dr, Mokena, IL 60448, USA - 6000 North Noah Drive, Saxonburg, PA 16056			
		Freight Income	1	\$1,350.00	\$1,350.00

TOTAL

\$1,350.00

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 <u>accounting@tridenttransport.com</u>
- 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

123-805-37	ga, TN 3 705 42	23-805-3701		L	oad Confir	mation		0813831
Carrier: Date:	ROYAL3 INC CHICAGO IL 60638 02/13/2025					Contact: Phone: Fax:	RIKI KOVACEVIC 630-485-7370	
Order	Orde Miles Tem Case BOL	s: 459.(p: es/pieces:				Commodity: Weight: Trailer: Reference: Order Type;	Dry Food Goods 12000.0 Van (DAT) 7503948690 ENT	
	PU <u>1</u>	Name: Address:	Up at Dawn Inc. 9000 W. 192nd			Date: Contact:	02/13/2025 0900 02/13/2025 1500	_
		Phone:	NEW LENOX	٦L	60451		d: No driver loading or	unioad
		Reference	number:	22	1499.00			
		Reference	number:	PO	7503948690			
		Reference	number:	SI	10			
		Reference	e number: Z		peer to peer	tender		
	SO 2 Name: ALDI SAXONBURG Address: 6000 NORTH NOAH I				RIVE	Dater	02/13/2025 2300 02/13/2025 2300	
		Phone:	SAXONBURG	PA	16056	Contact: Driver Loa	d: No driver loading or	unload
		Reference number: KI Reference number: PO			5317299996	79448		
					7503948690			
		Reference	number:	SI	10			
Payment		Carrier Fr	eight Pay:		\$1,350.00			
•		Total Carr	- 		\$1,350.00			



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

Up at Dawn Inc. - ALDIBAI1: ***Lumper receipts submitted for payment after initial invoice has already been submitted for payment will NOT be paid. Lumper receipts must be submitted with initial invoice or prior to billing to be reimbursed.*** Up at Dawn Inc. - ALDIBAI1: **\$250 Rescheduling Fee will incur on all shipments without 24 hr notice** Up at Dawn Inc. - ALDIBAI1: *TRACKING: MACROPOINT OR TRUCKERTOOLS REQUIRED* Up at Dawn Inc. - ALDIBAI1: CUSTOMS BROKER: If crossing Canadian/USA border, carrier must obtain customs broker information from shipper. Up at Dawn Inc. - ALDIBAI1: **POD must be obtained AND STAMPED BY ALDI FACILITY before leaving receiving Aldi Facility. A signature

from the receiver without a stamp is NOT sufficient**

Up at Dawn Inc. - ALDIBAI1: Pickup:

PO#

Delivery: DEL#

LUMPER REQUIRED AT DELIVERY. EMAIL RECEIPT OR UPLOAD TO TEXTLOCATE WITHIN 24-HOURS TO YOUR TRIDENT DISPATCHER FOR REIMBURSEMENT.

ALL ACCESSORIAL REQUESTS & PAPERWORK MUST BE EMAILED TO: YOUB TRIDENT DISPATCHER WITHIN 24-HOURS OF DELIVERY

*DRIVER IS RESPONSIBLE FOR ANY COSTS INCURRED FROM LOAD SHIFTS, PRODUCT DAMAGE, NONCOMPLIANCE WITH FACILITIES/BROKER, UNTIMELY TRANSIT, AND/OR POOR COMMUNICATION.

*Carrier's responsibility to verify that ALL POs on rate confirmation match POs on Shippers BOL. Failure to do so could result in rate reduction. *MUST send pictures for any RE-STACKS at delivery for reimbursement

Trailers must be: CLEAN, DRY, NO HOLES, NO ODORS, & must be able to scale the full weight.

*Detention will not be paid without verified in & out times on signed BOL's - all detention requests must go through proper approval process that can take 2-4 weeks

*Driver MUST report any overages, shortages, or damaged product immediately.

Please Sign: Bonnie R

(X) Accept

() Decline

Attention: Matthew Hickey 423-498-3485 matthew.hickey@tridenttransport.com Driver Name: ^{angel} Driver Cell: ³⁰⁵⁻⁴⁰⁷⁻⁶⁵¹⁶ Driver Email: Tractor #: ⁷¹⁹ Trailer #: ^{W94924} Tractor VIN: x





(949) 481-0685

Aldi (ALDSAX), Saxonburg, PA

Tax Id	461734845
WO	*
ALDSAX1019	302142025012907
Time	2/14/2025 1:29:00 AM
PO#	7503948690
Truck #	719
Trailar #	HD3238
Door #	61
Client's Dept	Unloading (GRP)
Product	GM
Vendor	Up at Dawn Inc.
Carrier	Royal 3
Bill To	Up at Dawn Inc.
QTY < Case >	1000
Activity	\$112.00
Work Order Charge	\$112.00
Service Charge	\$8.00
Total	\$120.00
Payment	Relay
Authorization	10039655
Driver	ANCEL

Driver's Signature

Supervisor's Signature

02/14/2025 02:23 www.meritlogistics.com

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MOKENA, IL 60448												
CID#:												
Ships To:	ALDLINC. Location No: 4453							Carrier Name: ROYAL3 IN	C			
omps for	6000 NORTH NOAH ROAD SAXONBURG, PA 16056						Trailer No: H03238 Seal Number(s): 26085937					
724-352-9393								SCAC:				
CIDA	124-332	-9393						Pro No:				
CID#:	1.01	DUU	Ter					PIONO:				
Third Party Freight Charges - Bill To:												
1						Freight Charge Terms (Prepaid unless marked otherwise)						
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Special Instruc	tions:							Master BOL: w/attached underlying BOLs				
Purchase Order		7	503948690									
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Where the rate is de	prendent on val	lue, shippe	rs are required to	state			Fee Ter		paid			
specifically in writin	g the agreed or i	declared v	alue of the propert	ty as follows:			i ce i ci	Customer Check Acceptable				
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						pplicable.	See 4	U.S.C - 14706c(1)(A) and (B).	chinmentwitt			
RECEIVED: Subject upon in writing betw								The carrier shall not make delivery of this shipment with out payment of freight and all other lawful charges.				
classifications and								en pomenter neight eine en einer einer eine gene				
the shipper, on request, and to all applicable state and federal regulations.								Shipper Signature				
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This is to certify that	t the above n	amed ma	terials are	A STATISTICS				Carrier acknowledged receipt of packages				
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are in proper condit applicable regulation	ons of the DO	T.	according to th	ie				documentation in the vehicle. Property de				
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ARRIVAL TIME:			2:25 PI	н	APPOINTMENT TIME	MAG		DEPARTURE TIME: 3:25 PM				