



## INVOICE

**BILL TO:**  
ALLEN LUND COMPANY LLC  
4529 ANGELES CREST HWY  
LA CANADA, CA 91011

**INVOICE DATE:** 02/22/2025  
**INVOICE #:** B78448  
**TERMS:** NET 30  
**DUE DATE:** 03/22/2025

| DATE       | CUSTOMER<br>REF# | ORIGIN - DESTINATION   | QUANTITY | RATE       | AMOUNT     |
|------------|------------------|--|----------|------------|------------|
| 02/21/2025 |                  | 1200 McGrath Ave Ste 200, Effingham, IL 62401 - 1720 Pineview Dr, Columbia, SC 29209 |          |            |            |
|            |                  | Freight Income   | 1        | \$1,600.00 | \$1,600.00 |

| TOTAL      |
|------------|
| \$1,600.00 |

**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**



## Carrier Load Confirmation - 7477603

**Driver must call prior to heading to shipper**  
 Call (800) 234-5863 or (404) 538-8849 and ask for Load 7477603

02/21/25 08:38 (EST)

| ATTENTION: CARRIER CONTACT   | LOAD REQUIREMENTS  | ALLEN LUND BOOKING CONTACT  |
|--|--|---|
| DABIC<br><br>BRZ*/dba RIKI TRANSPORTATION INC.<br>8225 LECLAIRE AVE<br>BURBANK, IL<br><br>(708) 303-5150<br>Sent To:dispatch@rtbrz.com | <b>Equipment Type:</b> DRY VAN<br><b>Special Equipment Needs:</b> FOOD<br>GRADE,LOAD LOCKS AND STRAPS<br><b>Equipment Size:</b> 53<br><b>Temp:</b><br><b>Hazmat:</b> NO<br><b>Estimated Weight:</b> 27,994 | <b>Contact:</b> Ian Hughes<br>Allen Lund Company, Atlanta<br><b>Tel:</b> (800) 234-5863 <b>Ofc:</b> (404) 538-8849<br><b>Cell:</b> (404) 538-8849<br><b>Fax:</b> (800) 688-5863<br><b>Email:</b> ian.hughes@allenlund.com<br><b>After Hours:</b> (404) 538-8849 |

**Comments:-** Driver must track for the duration of the load via the Macropoint tracking app.

Driver must call in to be dispatched.

Please sign and return the RateCon to acknowledge the load.

This load pays \$1600, which is a base rate of \$1400, plus \$100 for tracking and \$100 for on time delivery.

### SPECIAL INSTRUCTIONS:

\*--PLEASE HAVE THE DRIVER CALL FOR DISPATCH. --HAVE THE DRIVER CALL WHEN LOADED --THE QUOTED RATE INCLUDES ALL SURCHARGES. --THE SHIPPER'S SEAL ON THE TRAILER DOORS MUST NOT BE BROKEN UNTIL THE TRUCK ARRIVES AT THE DESTINATION AND THE RECEIVER ACKNOWLEDGES THAT THE SEAL IS STILL INTACT. FAILURE TO DO THIS COULD RESULT IN THE REJECTION OF THE PRODUCT AND THE COSTS INCURRED TO HELP RESOLVE THE MATTER WILL BE THE CARRIER'S RESPONSIBILITY. --THANK YOU FOR THE TRUCK..

\*Trailer must be food grade. No holes, odors, moisture, dirt or debris. Trailers must be empty or will be rejected..

**EMERGENCY CONTACT INFO:** For any urgent problems or issues, after regular business hours or over weekends, you may reach our After Hours Dispatcher at (800) 234-5863.

### PICKUP INFORMATION

|                    |                          |
|--------------------|--------------------------|
| <b>Pick UP #1:</b> | ADM-EFFINGHAM            |
| <b>Address:</b>    | 1200 MCGRATH AVE STE 200 |
|                    | EFFINGHAM, IL 62401      |
| <b>Contact:</b>    |                          |
| <b>Phone:</b>      | (217) 540-2262           |

**Directions :**

|                      |                   |
|----------------------|-------------------|
| <b>Pick Up Date:</b> | 02/21/2025 Friday |
| <b>Pick Up Time:</b> | 11:00             |
| <b>FCFS Notes:</b>   |                   |

| Line# | Commodity/Product | Description | Quantity | Pallets |
|-------|-------------------|-------------|----------|---------|
|-------|-------------------|-------------|----------|---------|

ALLEN LUND RATE CONFIRMATION

|   |          |                                 |        |       |           |
|---|----------|---------------------------------|--------|-------|-----------|
| 1 | PET FOOD | PX PED ADL MPN95<br>VIT 2019 SS | 12698  | KG    | 14        |
|   |          |                                 | Total: | 12698 | Total: 14 |

| DELIVERY INFORMATION     |                                    |                     |                       |                     |  |
|--------------------------|------------------------------------|---------------------|-----------------------|---------------------|--|
| <b>Delivery #1:</b>      | MARS PETCARE US                    |                     | <b>Delivery Date:</b> | 02/22/2025 Saturday |  |
| <b>Address:</b>          | 1720 PINEVIEW DR                   |                     | <b>Delivery Time:</b> | 12:00               |  |
|                          | COLUMBIA, SC 29209                 |                     | <b>FCFS Notes:</b>    |                     |  |
| <b>Contact:</b>          |                                    |                     |                       |                     |  |
| <b>Phone:</b>            |                                    |                     |                       |                     |  |
| <br><b>Directions:</b>   |                                    |                     |                       |                     |  |
| <br>                     |                                    |                     |                       |                     |  |
| <b>Commodity/Product</b> | <b>Description</b>                 | <b>Quantity</b>     | <b>Pallets</b>        |                     |  |
| PET FOOD                 | PX PED ADL<br>MPN95 VIT<br>2019 SS | 12698 KG            | 14                    |                     |  |
|                          |                                    | <b>Total:</b> 12698 | <b>Total:</b> 14      |                     |  |

| RATE DETAILS           |             |     |            |     |            |
|------------------------|-------------|-----|------------|-----|------------|
|                        | Description | UOM | Rate       | QTY | Total      |
| Truck Rate             |             | FLT | \$1,600.00 | 1   | \$1,600.00 |
| Advance Amount         | \$0.00      |     |            |     |            |
| Advance Fee            | \$0.00      |     |            |     |            |
| Additional Payments    |             |     |            |     |            |
| Total Carrier Payments | \$1,600.00  |     |            |     |            |
| Balance Due            | \$1,600.00  |     |            |     |            |
|                        |             |     |            |     |            |

| INVOICE INFORMATION  |
|--|
| <p><b>FOR STANDARD PAY or ACH, PLEASE EMAIL YOUR FREIGHT BILLS TO: <a href="mailto:billing@allenlund.com">billing@allenlund.com</a> or FAX TO: (800) 375-5109</b></p> <p><i>If you email or fax your required paperwork, please do not submit copies by mail unless otherwise instructed by the Allen Lund Company.</i></p> <p><b>QUICK PAY BY COMCHECK CARRIERS ONLY:</b> If you wish to be paid by comcheck, you may email or fax your invoice and required paperwork to: <a href="mailto:atlantadry@allenlund.com">atlantadry@allenlund.com</a> or (800) 688-5863. Please include the load number and "Quick Pay" in the subject line and ensure your invoice is marked with "Quick Pay by ComCheck."</p> <p><i>If you request and receive payment by comcheck, please <b>do not mail original paperwork</b> unless otherwise instructed by Allen Lund Company. Carrier shall retain custody of original paperwork and provide it to the Allen Lund Company upon request.</i></p> <p>Freight Charges will not be paid without required paperwork. To insure prompt payment, the following paperwork must be included with your invoice: copy of this load confirmation, customer signed Bill of Lading, and lumper receipts (if applicable).</p> <p>In the event you wish to mail required paperwork for payment, please send all required documents listed above to: Allen Lund Company, PO BOX 339, LA CANADA, CA 91012</p> <p><b>Please enter Load Confirmation #7477603-AT on all paperwork before emailing, faxing or mailing.</b></p> |

## CONTRACT ADDENDUM AND LOAD CONFIRMATION PROVISIONS

1. There will be a charge for all advances and/or advanced settlements as follows:
  - a. Fee for an advance is 2% of the due carrier amount or \$25.00, whichever amount is higher.
  - b. Fee for an advanced settlement upon delivery is 2% of the settlement amount or \$25.00, whichever is higher.
  - c. There is no fee for normal payments.
2. Any accessorial charges must be approved in advance by **BROKER** and must be supported by an invoice or signed receipt of funds.
3. FINAL PAYMENT CANNOT BE MADE WITHOUT A SIGNED COPY OF THE BILL OF LADING AND A SIGNED COPY OF THE RATE CONFIRMATION.
4. To facilitate payment, please include a copy of this signed RATE CONFIRMATION with your invoice.
5. CARRIER REPRESENTS AND AGREES THAT ONLY TRACTORS AND TRAILERS COVERED BY THE VALID, EXISTING INSURANCE FOR BOTH LIABILITY AND CARGO RISKS WILL BE UTILIZED TO TRANSPORT THIS LOAD.
6. CARRIER SHALL NOT CAUSE OR PERMIT ANY SHIPMENT TENDERED HEREUNDER TO BE BROKERED TO OR TRANSPORTED BY ANY OTHER MOTOR CARRIER, OR IN SUBSTITUTED SERVICE BY RAILROAD OR BY OTHER MODES OF TRANSPORTATION.
7. Directions supplied by the Allen Lund Company or its customers either orally and/or written form are for informational purposes only. It is the Carrier's sole responsibility to confirm that it may lawfully operate a loaded vehicle of any weight, commodity or dimension over any highway, bridge or route.
8. Carrier is responsible for supplying equipment that is compliant with regulations of the California Air Resources Board (CARB) if operating in the state of California. Carrier will indemnify Allen Lund Company for any fines assessed for the carrier's failure to comply with the regulations.
9. The carrier agrees that it will not double-broker the load or change the specified mode of transportation. If this agreement is breached and another carrier's MC# or name is on the tractor, trailer, or bill of lading, or if other facts convincingly show that another carrier transported the load, ALC will exercise its contractual right to pay the delivering carrier directly. Additionally, ALC reserves the right to charge the booking carrier up to \$5,000 for the time and resources ALC must spend in investigating the carrier-delivery or mode-of-transportation issue. Any exceptions to this agreement must be in writing, signed by the parties, at the time the load is booked.

This document clarifies, augments and amends the carrier and broker agreement between ALLEN LUND COMPANY, INC. and CARRIER and becomes part of that agreement.

PRINT & SIGN THIS PAGE and then  
FAX to: (800) 688-5863 or EMAIL to: [ian.hughes@allenlund.com](mailto:ian.hughes@allenlund.com)

-----  
Carrier Name

-----  
Print Name of Authorized Signature

-----  
Date

-----  
Authorized Carrier Signature

Thank you to all of the professional truck drivers.  
Allen Lund Company appreciates your hard work and dedication to keep freight moving every day!

Load #7477603



ADM

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

RECEIVED, subject to the classifications and lawfully fixed tariffs in effect on the date of the issue of receipt by the carrier of the property described in the Original bill of lading, the property described herein in apparent good order, except as noted (contents and condition of contents of packages unknown, marked, consigned, and destined as indicated above, 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 of, said property over all or any portion of 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 Uniform Freight Classifications in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, 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.

This is to certify that the named materials are properly classified, described, packaged, marked & labeled, and are in proper condition for transportation, according to the applicable regulations for the Department of Transportation. SM0245-1018

Bill of Lading Number  
B182953

Type  
BOL

Master BOL

Booking Number

Trip Name  
3284557

Delivery Name  
4004564

Shipper/Exporter (Principal or Seller  
Licenses and Full Address)

82:EFFINGHAM, IL - MCGRATH(82)  
1200 MCGRATH AVE  
EFFINGHAM IL 62401  
US

Forwarding Agent/Carrier (References, F.  
M.C. No.)

Consignee (Name, Full Address)

ADM MARS PETCARE USA (COLUMBIA,  
SC)  
1720 PINEVIEW ROAD  
COLUMBIA SC 29209  
US

**Special Instructions**

DEL REQ 2/24

UPDATED FROM 2/20

ARS 2/18

WAITING ON RELEASES- EXPECTED 2/21

**\*\*NO WOOD SIDED TRAILERS/DON'T LOAD ON WOOD SIDED TRAILERS\*\***

¿Please attach "INGREDIENT ORIGIN FORM"¿

**PLEASE SEND COA WITH SHIPMENT ON NECESSARY INGREDIENTS!**

leon.hunter@effem.com; rodney.burgess@effem.com;

harold.brown@effem.com; adrienne.hill@effem.com

**Routing Instructions**

ANY NON-PREMIUM PRODUCT MUST HAVE  
PLACARD ON 1 SIDE OF PALLET THAT  
INCLUDES MARS GRD & DESCRIPTION

ALL LTL SHIPMENTS INVOICE FREIGHT CHARGES TO :  
TRANSPALCE TEXAS, LP / PO BOX 425  
LOWELL, AR 72745

ALL TL SHIPMENTS INVOICE FREIGHT CHARGES TO :  
CASS INFORMATION SYSTEMS  
C/O MARS PETCARE, PO BOX 67  
ST LOUIS, MO 63166

Shipper Export Reference

Carrier Export Reference

Notify Party/Intermediate Consignee

Carrier Code (SCAC)

Also Notify (Name and Full Address)/  
Domestic Routing/Export Instructions/Pier  
Terminal/ Onward Routing From Point Of  
Destination/ Additional Instructions

Trailer Number

Initial/Pre-Carriage by (mode)

Place Of Delivery by Oncarrier

Port Of Loading

Port Of Discharge

AETC Number

Incoterms (Shipping Terms)

Issuing Office

Issuing Person

Booking Office

Pooled Location

EFFINGHAM, IL - MCGRATH(82):  
EFFINGHAM

Country Of Origin of Goods  
US

Delivery Carrier  
CUSTOMER PICKUP

Seal Number  
82531412

Place Of Receipt  
507652:COLUMBIA

Export Carrier  
000001\_CUST-PU\_T\_CPU

Ship Method  
CUST-PU-Truck-Customer Pickup  
Dock Code

Date Issued  
21-FEB-2025

Waybill Number

2-22-25  
482



ADM Animal Nutrition

Report Date 21-FEB-2025 10:01  
Page 2 of 2

ADM

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

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of receipt by the carrier of the property described in the Original bill of lading, 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 above, 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 of, said property over all or any portion of 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 Uniform Freight Classifications in effect on the date hereof, if this is a rail or rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, 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.

This is to certify that the named materials are properly classified, described, packaged, marked & labeled, and are in proper condition for transportation, according to the applicable regulations for the Department of Transportation. SM0245-1018

**Particulars Furnished by Shipper**

| Marks and Numbers | M D | Item Number / Description / Information | Quantity      | Weight |           |
|-------------------|-----|---|---------------|--------|-----------|
|                   |     |   |               | G      | N         |
|                   |     | KM3097TM - M1448458 PX PED VIT ADL      |               |        |           |
|                   |     | Lot 389178EF13FEB2025                   | 4.00000 TOT   |        | 28,043 LB |
|                   |     | Lot 388802EF05FEB2025                   | 3.98500 TOT   |        | 27,903 LB |
|                   |     | Lot 388804EF05FEB2025                   | 3.97800 TOT   |        | 140 LB    |
|                   |     | Lot 389176EF13FEB2025                   | 1.98850 TOT   |        |           |
|                   |     | Order # 9714757 Requisition # 372290    |               |        |           |
|                   |     | PO # 1006891403                         |               |        |           |
|                   |     |   | Total Weight: | G      | 28,043 LB |
|                   |     |   |               | N      | 27,903 LB |
|                   |     |   |               | T      | 140 LB    |

**Signatures**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Shipper Signed By *[Signature]* 2-21-25

Carrier Signed By *[Signature]* 2-21-25

Proof of Delivery Signed By \_\_\_\_\_

Total Number of LPNs 0

End of Report

MAILED BY \_\_\_\_\_

FEB 22 AM 11:10

COLUMBIA, SC (KCS)  
COLUMBIA CO. INFORMATION

2-22-25

*[Signature]*