



## INVOICE

**BILL TO:**  
FIRST FREIGHT INC  
2597 233RD ST  
FORT MADISON, IA 52627

**INVOICE DATE:** 02/28/2025  
**INVOICE #:** R79234  
**TERMS:** NET 30  
**DUE DATE:** 03/28/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/27/2025		1910 48th Street, Fort Madison, IA 52627 - 12375 Industrial Parkway, Marysville, OH 43040			
		Freight Income	1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

**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**



FIRST FREIGHT INC.  
2597 233RD ST  
FORT MADISON IA 52627

PRO # 78280

Rate Confirmation

02/26/25 12:13:50 (EST)

F  
R  
O  
M  
  
C  
A  
R  
R  
I  
E  
R

SEAN CONRAD  
(319) 316-1905  
seanconrad@firstfreightinc.com

ROYAL3 INC  
(630) 485-7370 (p) Att: SAM  
(630) 485-6980 (f)  
MC # 944686 Truck # 761  
DOT 2828543 Trailer # W94949  
Driver JOHNY Cell # (561) 475-9754

Size & Type: VAN  
Pieces: 36

Description: WEED SPRAY  
Weight: 42088

Miles: 503

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1400.00	
TOTAL RATE	1400.00	

PICK 1

THE SCOTTS COMPANY  
1910 48TH STREET  
FORT MADISON IA 52627

Appointment 02/27/25 @ 12:00  
Ref # 832237503

STOP 1

CENTRAL OH WHSE  
12575 INDUSTRIAL PARKWAY  
MARYSVILLE OH 43040

Appointment 02/28/25 @ 10:00  
Ref # 832237503

Remarks: Please submit ALL pages of the POD within 48 hours of delivery to  
invoicing@firstfreightinc.com.

CARRIER SPECIAL INSTRUCTIONS

- Carriers must inform First Freight Inc. 1 hour before entering detention.
- Detention will not be paid at PU/DEL without IN/OUT times marked on the BOLs by the shipper or consignee and prior approval by broker.
- Carrier must notify First Freight Inc. immediately of any issues that may cause the carrier to miss the scheduled PU/DEL time.
- All late PU/DEL not communicated to broker will result in \$100 fine per day.
- All load concerns should be communicated to First Freight Inc. ONLY.
- The carrier must not contact the shipper or consignee for any reason.
- Trailer seals may only be removed by customer or authorized personnel.
- Carrier is liable for all transportation costs associated with a return shipment if the driver breaks the trailer seal without authorization.
- Carrier must inform broker if the trailer seal is broken during transit.
- Carrier must have clean, dry, odorless trailer.
- If this shipment is re-brokered, co-brokered, subcontracted, assigned, or interlined, agreement is VOID.
- Carrier must adhere to all FMCSA regulations.
- Carrier is responsible for compliance with California Air Resources Board regulations if operating in California.
- Carrier is required to inform broker of any overages, shortages, and damages at the shipper or consignee.
- Carrier shall be liable for all loss, damage and liability occurred by the transportation of property arranged by broker.
- Any additional charges must be approved by broker prior to invoicing.

Carrier Signature

*Samm Stanojevic*

Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
M D

Send Carrier Bills to the Address Above

PRO # 78280

must appear on all Invoices

BILL OF LADING Page: 01 of 01

SHIP FROM

Name: The Scotts Company and Subsidiaries  
Address: 1910 48th St.  
City/State/Zip: Ft. Madison, IA 52627-3208  
Phone: 1-800-233-5296  
SID#: 3050-5005

Bill of Lading Number: **832237503**



FOB: ☐

## SHIP TO

Name: Central OH Whse      Location#:  
Address: 12575 Industrial Parkway  
City/State/Zip: MARYSVILLE , OH 43040  
Phone:  
CID#: P30J2

FOB: ☐

**THIRD PARTY FREIGHT CHARGES BILL TO**

Name: The Scotts Company - Freight Payables C/O Sterling TMS  
Address: 14111 Scottslawn Road  
City/State/Zip: Marysville, OH 43040

**SPECIAL INSTRUCTIONS:**

Appt : 00:00:00

CARRIER NAME: FIRST FREIGHT

Trailer number:

Seal number(s):

SCAC: **FFRC**  
Pro number: **78280**  
Equipment:

113251

**Load ID :**

**Freight Charge Terms::** *(freight charges are prepaid unless marked otherwise)*

Prepaid ☐ Collect ☐ 3rd Party ☒

Shipment Number : 6802223008

☐ Master Bill of Lading: with attached underlying Bills of Lading

**Shipment Number : 6802223008**

### CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	#PKGS	WEIGHT	PALLETS (Y/N)	ADDITIONAL SHIPPER INFO
5001718206	1,080	42,088	Y	
<b>GRAND TOTAL</b>	1,080	42,088 LB		

### CARRIER INFORMATION

PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care <u>see section 2(e) of NMFC Item 360</u>	NMFC#	CLASS
1,080	42,088		Fertilizing Compounds (Mfg Fertilizers)	68140-S5	50
1,080	42,088 LB		PALLETS:36 #CHEP:0 #PECO:0 EACHES:4320		

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:

**COD Amount: \$**

**Fee Terms: Collect:** ☐

**Customer check acceptable:** ☐

NOTE Liability 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.

Signature \_\_\_\_\_ Shipper

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 Department of Transportation.

Trailer Loaded:

☒ By Shipper  
☐ By Driver

Freight Counted:

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

CARRIER SIGNATURE/PICKUP DATE &amp; TIME

**CARRIER SIGNATURE/TICKET DATE & TIME**  
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

\*\*\* EMERGENCY CONTACT - CHEMTREC (800) 424-9300 DAY/NIGHT \*\*\*

2-28 10:23

62