



INVOICE

BILL TO:

JAT OF FORT WAYNE INC
5031 INDUSTRIAL ROAD
FORT WAYNE, IN 46825

INVOICE DATE: 03/03/2025**INVOICE #:** R79630**TERMS:** NET 30**DUE DATE:** 04/03/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
03/02/2025		35 Rix Mills Rd, New Concord, OH 43762, USA - 950 Wenstrup Ln, Walton, KY 41094, USA			
		Freight Income	1	\$600.00	\$600.00

TOTAL

\$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

**JAT OF FORT WAYNE, INC.**

5031 Industrial Rd
Fort Wayne, IN 46825
Phone: 260-399-9867
Fax: 260-440-8663

LOAD CONFIRMATION**LOAD #: 10397263****DATE SENT: 2/28/2025 12:04:18PM****DISPATCHER:** Alec B.**CELL:** (260) 385-8779 / **DIRECT:** (260) 573-4560
abunt@jatfw.com

CARRIER NAME: ROYAL 3 INC	CONTACT: JOEY
CITY/ST: CHICAGO IL 60638	DRIVER:
EMAIL: joey@royal3inc.com	TRUCK:
PHONE: 630-465-5667	TRAILER:

PICK UP: Sunday 3/2/2025 3:30:00PM to 3:30:00PM APPT MADE

<u>LOCATION</u>	<u>FB#</u>	<u>INFO</u>	<u>DESCRIPTION / INSTRUCTIONS</u>	<u>PCS</u>	<u>PLTS</u>	<u>WGT</u>	<u>TEMP</u>
COLGATE 35 RIX MILLS ROAD NEW CONCORD, OH 43762	10397263		Bill of Lading: 901126469 Purchase Order: 7001611075 Delivery #: 857144635	0	35	42,028.1	NONE

DELIVER: Monday 3/3/2025 10:00:00AM to 10:00:00AM APPT MADE

<u>LOCATION</u>	<u>FB#</u>	<u>INFO</u>	<u>DESCRIPTION / INSTRUCTIONS</u>	<u>PCS</u>	<u>PLTS</u>	<u>WGT</u>	<u>TEMP</u>
WALTON DOLLAR GENERAL DC 950 WENSTRUP LN WALTON, KY 41094	10397263		Bill of Lading: 901126469 Other: 700161107520KF69 Other: 700161107522VX56 Purchase Order: 7001611075 Delivery #: 857144635	0	35	42,028.1	NONE

**JAT OF FORT WAYNE, INC.**

5031 Industrial Rd
Fort Wayne, IN 46825
Phone: 260-399-9867
Fax: 260-440-8663

LOAD CONFIRMATION**LOAD #: 10397263****DATE SENT: 2/28/2025 12:04:22PM****DISPATCHER:** Alec B.**CELL: (260) 385-8779 / DIRECT: (260) 573-4560**
abunt@jatfw.com**AGREED RATES**

Our Reference	Rate Type	Amount
10397263	BASE	\$600.00

TOTAL (USD)	\$600.00
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A \$150 fee will be deducted from rate if you fail to identify as "JAT of Fort Wayne" as carrier on pick-up and / or delivery documentation.

SPECIAL BILLING NOTES

- * **Payment Terms:** Net 45 from receipt of invoice.
- * **Submit paperwork to invoices@jatfw.com or mail to the address above.**
- * Load number must be referenced on your invoice.
- * A legible copy of the original bills, proof of delivery, lumper receipts, etc. must be submitted with invoice.
- * Rate includes all add-ons and surcharges.
- * Freight claims will be deducted from agreed rates.
- * All extra fees and surcharges must be reported to broker within 24 hours. Failure to submit receipts may result in a fee of up to \$75.
- * Lumper receipts must be received within 48 hours of delivery for reimbursement.
- * See Terms & Conditions for additional requirements.

Please sign and remit via email or fax.

Joey Cimbaleric
(SIGNATURE)

(PRINTED NAME)

(DATE)


TERMS & CONDITIONS

Your signature above certifies your understanding and agreement to the following terms and conditions:

The term "broker" herein refers to JAT of Fort Wayne, Inc. and the term "carrier" refers to the organization labeled above as "Carrier Name".

1) This signed rate confirmation supersedes all previously signed versions and its contents. **2)** Broker will remit payment to carrier for freight charges shown above within 45 days of receipt of invoice and required documents (original signed proof of delivery, signed rate confirmation and arrival and departure times signed by shipper and consignee, lumper receipts). **3)** Carrier must verify count on shipment and contact broker with any discrepancies prior to departing shipper. **4)** Broker is not liable for any shortages, loss, or damage to cargo or any damage to carrier's equipment for any reason. **5)** Carrier shall look only to broker for payment of freight charges and broker shall be entitled to deduct any loss, damage, or late fees from carrier's invoice. **6)** No cargo liability limitations shall apply with respect to this shipment unless otherwise noted. **7)** Carrier must immediately report any delays in pickup, transit, or delivery to Broker. Outside of business hours please contact Ryan O'Dea at 260-740-2140. **8)** No additional charges will be accepted without prior approval by broker and revised rate confirmation. Failure to provide lumper receipt within 48 hours of delivery may result in the costs deducted from payment or denial of lumper reimbursement. **9)** Carrier warrants that it is duly and legally qualified to provide transportation services and that it holds liability insurance of at least one million dollars (\$1,000,000) and cargo insurance of at least one hundred thousand dollars (\$100,000). Carrier agrees to notify broker of any material changes in its safety record. **10)** On-hand notices of any kind will not apply in this agreement. If at any time carrier refuses to deliver a load referencing an on-hand notice, the carrier assumes any and all liability for any additional operating costs, claims and or damages to freight. Carrier accepts full responsibility for all liability for the freight being transported. **11)** Performance of any work by carrier for broker shall constitute acceptance by carrier of these Terms and Conditions without modification. Broker does not authorize any FMCSA violations such as hours of service violations, etc. Should a load need rescheduled to maintain compliance, please contact broker. **12)** Mode of transport must be over-the-road. Any load that is late to arrival and traveled via rail, will not be paid. **13)** Fourkites tracking is required from start to finish. A \$250 fee will apply for loads not accepted and tracked. **14)** Carrier is required to provide ACH information for payment. Failure to provide ACH information will incur a \$20 fee for each check issued by broker. To request an ACH form please contact ach@jatfw.com. **15)** ACH information is removed from our system after 1-year of inactivity. **16)** Carrier must obtain revised rate confirmation from broker to receive reimbursement for lumper expenses. Failure to obtain a revised rate confirmation for accessorial charges will result in that charge not being reimbursed to carrier. **15)** A fee of up to \$150 will be deducted from agreed upon rate if carrier fails to identify as "JAT" or "JAT of Fort Wayne" on pick-up and/or delivery documentation.



Date: 03/02/2025		MASTER BILL OF LADING		Page: 1	
SHIP FROM		Bill of Lading Number: 7001611075			
Name: Colgate					
Address: 35 Rix Mills Road		CP Delivery#MULTI			
City/State/Zip: New Concord, OH 43762		CARRIER NAME: Jat of Fort Wayne			
SID#:		Trailer number: PTLZ244804			
FOB: <input type="checkbox"/>		Seal_Nbr: 05254617			
SHIP TO		PO#: 20KF69			
Name: Dollar General Distribution Center Location #:		CP DELIVERY#: MULTI			
Address: 950 Wenstrup Lane		SHIPMENT#: 7001611075			
City/State/Zip: Walton, KY 41094-0000		SCAC: JATV			
CID#:		Pro number:			
THIRD PARTY FREIGHT CHARGES BILL TO		Freight Charge Terms:			
Name: Colgate c/o Transplace		(freight charges are prepaid unless marked otherwise)			
Address: P.O. Box 425		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>			
City/State/Zip: Lowell, AR 72745					
SPECIAL INSTRUCTIONS					
		<input checked="" type="checkbox"/> Master Bill of Lading, with attached underlying Bills of Lading (check box)			

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO	
20KF69	140	2453.08 lbs	Y N	2267455241 Stop# 1	
22VX56	3449	37968.578 lbs	Y N	2267455257 Stop# 1	
GRAND TOTAL	3589	40441.658			

CARRIER INFORMATION					
SHIPPED		PACKAGE		COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	WEIGHT	VOLUME
34	PAL	3589	CAS	42651.658 lbs	1637.793
34		3589		42651.658	1637.793

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:

"The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."

NOTE: Liability Limitation 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 rate, classification 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.

SHIPPER SIGNATURE/DATE

Trailer Loaded: ☒ By Shipper ☐ By Driver

Freight Counted: ☒ By Shipper ☐ By Driver/pallets said to contain ☐ By Driver/Pieces

CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle.

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

Carrier ROYAL

Driver Name ALAN AUSA RADWONSK

Driver Signature ALAN AUSA RADWONSK

Date 03/02/25

RECEIVED: STC

PORT: AMACU

CHECKER: h. m. m. m.

DATE: 3/3/25

START LP: 149

END LP:

Date 03/02/2025

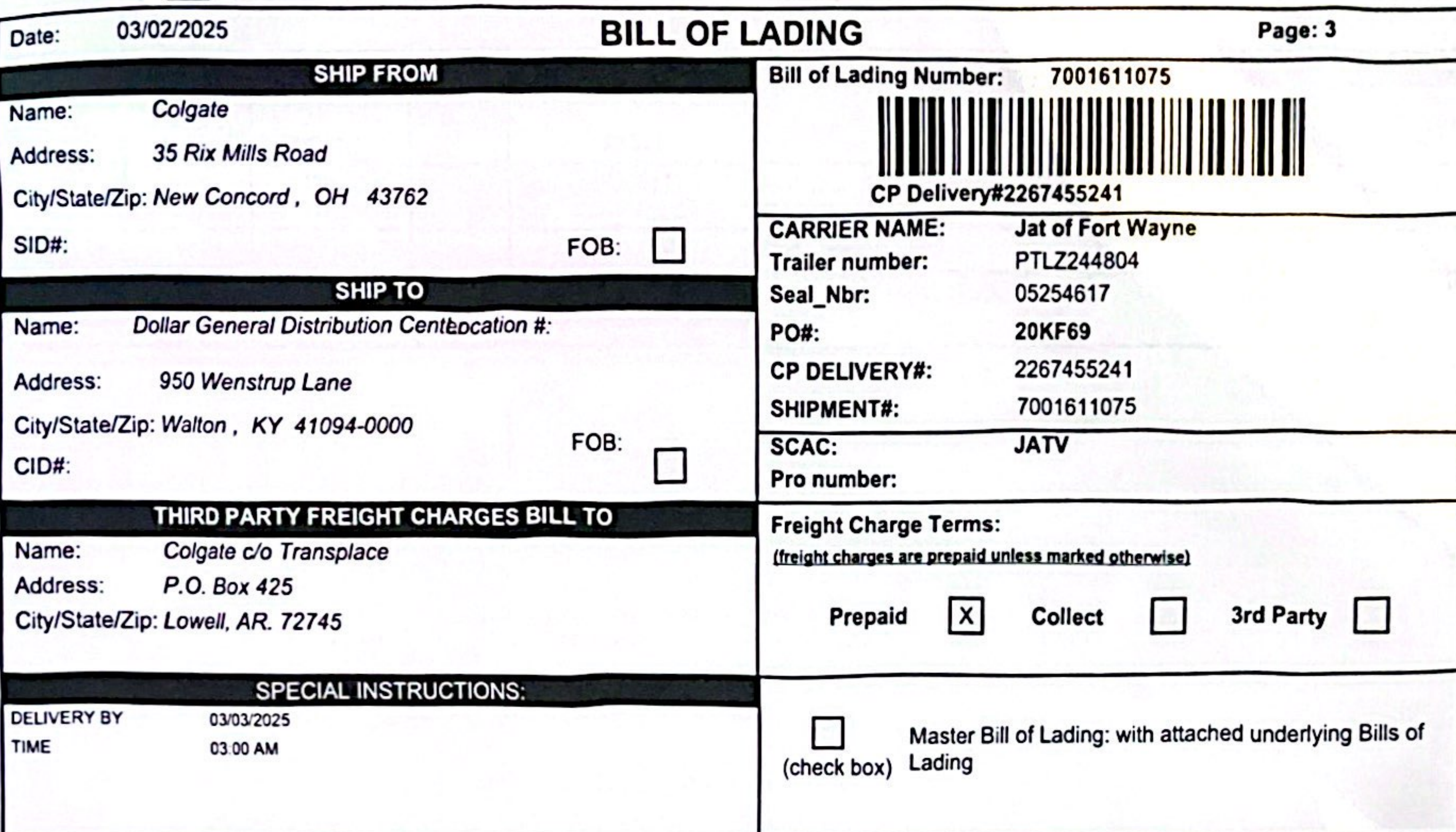
SUPPLEMENT TO THE BILL OF LADING

Page: 2

CP Delivery#:

CP PO#:

Bill of Lading Number.



CARRIER INFORMATION									
SHIPPED		PACKAGE		WEIGHT	VOLUME	H.M. (X)	COMMODITY DESCRIPTION <small>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. See Section 2(a) of NMFC.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE					NMFC #	CLASS
2	PAL	140	CAS	2583.08 lbs	87		Toilet Preparations	59420-2	85
2		140		2583.08 lbs	87		GRAND TOTAL		

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

Date: 03/02/2025

SUPPLEMENT TO THE BILL OF LADING

Page: 4

CP Delivery#: 2267455241

CP PO#: 20KF69

Bill of Lading Number:

7001611075

CARRIER INFORMATION


SHIPPED		WEIGHT	H.M. (X)	SKU#	ITEM DESCRIPTION	GTIN CODE
QTY	TYPE					
140	CS	2453.08 lbs		61049179	POL DSH EC 40F CS SP BERRY SPLASH	10827854022692
2	PL	130 lbs		P099700	CHEP Pallet	
142		2583.08 lbs			ORDER TOTALS	142



Date: 03/02/2025

BILL OF LADING

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SHIP FROM		Bill of Lading Number: 7001611075	
Name: Colgate			
Address: 35 Rix Mills Road		CP Delivery#2267455257	
City/State/Zip: New Concord, OH 43762		CARRIER NAME: Jat of Fort Wayne	
SID#:	FOB: <input type="checkbox"/>	Trailer number: PTLZ244804	
SHIP TO		Seal_Nbr: 05254617	
Name: Dollar General Distribution Center location #:		PO#: 22VX56	
Address: 950 Wenstrup Lane		CP DELIVERY#: 2267455257	
City/State/Zip: Walton, KY 41094-0000		SHIPMENT#: 7001611075	
CID#:	FOB: <input type="checkbox"/>	SCAC: JATV	
THIRD PARTY FREIGHT CHARGES BILL TO		Pro number:	
Name: Colgate c/o Transplace		Freight Charge Terms:	
Address: P.O. Box 425		(freight charges are prepaid unless marked otherwise)	
City/State/Zip: Lowell, AR. 72745		Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
SPECIAL INSTRUCTIONS:			
DELIVERY BY 03/03/2025		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of	
TIME 03:00 AM		(check box) Lading	

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP		ADDITIONAL SHIPPER INFO			
22VX56		3449	37988.578 lbs	Y	N	2267455257 Stop# 1			
GRAND TOTAL		3449	37988.578						
CARRIER INFORMATION									
SHIPPED		PACKAGE		WEIGHT	VOLUME	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				<small>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. See Section 21(e) of NMFC.</small>	NMFC #	CLASS
32	PAL	3449	CAS	40068.578 lbs	1550.793		Toilet Preparations	59420-2	85
32		3449		40068.578	1550.793		GRAND TOTAL		
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: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						COD Amount: \$ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
NOTE Liability Limitation 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. Shipper Signature			
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 DOT.				Trailer Loaded: Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE/PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good Order, except as noted.			