



INVOICE

BILL TO:
KOOLA LOGISTICS LLC
630 W CARMEL DR SUITE 255
CARMEL, IN 46032

INVOICE DATE: 03/31/2025
INVOICE #: B83809
TERMS: NET 30
DUE DATE: 05/01/2025

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|------------------|---|----------|------------|------------|
| 03/28/2025 | | 22689 US-30, Hansen, ID 83334, USA - 1124 Russell Cave Rd, Lexington, KY 40505, USA | | | |
| | | Freight Income | 1 | \$3,000.00 | \$3,000.00 |

| TOTAL |
|------------|
| \$3,000.00 |

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

**Koola Logistics**

P.O. BOX 3189
Carmel, IN 46082
317-689-8880

Contact Shawn Montgomery
(317)689-8880 150
shawnm@koolalogistics.com

Carrier RIKI TRANSPORTATION INC
Attn Andy
Phone (708)303-5150
Driver ROBERT PH 347-885-7165

| Van | PO # 15194 | PU# 18013 | TEMP/CONTINUOUS DRY | |
|-------------------|----------------------|-------------------|---------------------|--------------------------------|
| Pick up | STANDLEE | | Earliest | 03/28/25 14:00 |
| | 22689 Highway 30 | | Latest | 03/28/25 14:00 |
| | HANSEN, ID 83334 | | Contact | |
| | | | Phone | |
| | PU # 18013 | | | |
| | <u>Pieces</u> | <u>Piece Type</u> | <u>Weight</u> | <u>Description</u> |
| | | PALLETS | 43,000 | PALLETIZED/WRAPPED ANIMAL FEED |
| Directions | | | | |
| Delivery | STANDLEE - LEXINGTON | | Earliest | 03/31/25 09:00 |
| | 1124 RUSSEL CAVE RD | | Latest | 03/31/25 09:00 |
| | LEXINGTON, KY 40505 | | Contact | |
| | | | Phone | 859-421-6708 |

Special Instructions

DRIVER MUST ACCEPT AND TRACK ON MACROPOINT

Refer to the Load Number on your invoice: **76333**

All invoices must include a signed delivery receipt and be sent to: Accounting@KoolaLogistics.com

All refer loads require an AIR CHUTE- If trailer does not have air chute do not load product.

Reefer units must be set on CONTINUOUS.

Driver must contact Koola Logistics prior to dispatch.

Under no circumstances is carrier permitted to double/co-broker this load.

Delivery and Pick-up Dates and Times will not require the carrier to violate hours of service regulation.

Koola logistics must receive a copy of POD with-in 48 hours of delivery.

Send Invoice and Pod to CarrierInvoices@koolalogistics.com.

The undersigned hereby acknowledges and agrees to transport the above referenced shipment and confirms that carrier maintains insurance coverage with a minimum of \$1,000,000 general liability, \$1,000,000 auto liability and \$100,000 Cargo Liability.

This confirmation is an agreement between Koola Logistics and carrier to haul the indicated load, at indicated rate, and is not a dispatch. If load is changed or canceled by Koola Logistics, 'No Truck Order not used'd will be paid unless carrier has been dispatched.

The safe, legal and proper operation of carrier and its driver supersedes any request, demand, or instruction by broker or its customers. If any employee or Customer of Koola logistics requests, demands, or instructs carrier to take action that violated any law, whether intentional or inadvertent, carrier shall refuse to transport that load.

Please sign and return to the e-mail above.

| | |
|-----------------------|---------------|
| For internal use only | Order# 110851 |
|-----------------------|---------------|



Koola Logistics
P.O. BOX 3189
Carmel, IN 46082
317-689-8880

Order Number **110851**

Contact Shawn Montgomery
(317)689-8880 150
shawnm@koolalogistics.com

Carrier RIKI TRANSPORTATION INC
Attn Andy
Phone (708)303-5150
Driver ROBERT PH 347-885-7165

Carrier Signature: _____ Date: _____

**Koola Logistics**

P.O. BOX 3189
Carmel, IN 46082
317-689-8880

Order Number **110851**

Contact Shawn Montgomery
(317)689-8880 150
shawnm@koolalogistics.com

Carrier RIKI TRANSPORTATION INC
Attn Andy
Phone (708)303-5150
Driver ROBERT PH 347-887-7165

| | | | |
|-----------------|---------------------|-----------------|----------------|
| Van | | | |
| Pick up | HANSEN, ID 83334 | Earliest | 03/28/25 14:00 |
| | | Latest | 03/28/25 14:00 |
| Delivery | LEXINGTON, KY 40505 | Earliest | 03/31/25 09:00 |
| | | Latest | 03/31/25 09:00 |

Special Instructions

DRIVER MUST ACCEPT AND TRACK ON MACROPOINT

| | | | |
|--------------------|---------------|-------------------|-------------------------|
| Rate Detail | Quoted Amount | 3,000.00 | Carrier Initials: _____ |
| | Total: | \$3,000.00 | |

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Please sign and return to the e-mail above.

Carrier Signature: _____ Date: _____

Standlee Hay Company
22349 Kimberly Rd Ste E
Kimberly ID 83341
United States



Order number TO-SPP-18013
Transaction Date 3/25/2025
PO Number 1
PO Number 2



Packing List

Bill To

Ship To
Trucks to Lexington
United States

| Item ID | Cust No | Item Short Desc | UOM | Qty | Pallets | Units Shipped |
|--|---------|--|-----|-------------------------|---------------------|-------------------------|
| 1575-30101-0-0 SPWF Alf/Tim Pellets, 40 lb Bag | | 1575-30101-0-0 - SPWF Alf/Tim Pellets, 40 lb Bag | Ea | 1050 1050 | 21 21 | 1050 1050 |

IT IS UNDERSTOOD THAT ALL FLATBEDS WILL BE COMPLETELY TARPED OR, IF A DRY VAN, THAT THE CONTENTS WILL BE COMPLETELY PROTECTED AGAINST MOISTURE TO PREVENT DAMAGE. IT IS UNDERSTOOD BY SIGNING THIS DOCUMENT YOU ARE VERIFYING THAT LOAD WAS DAMAGE FREE AT TIME OF LOADING.

Carrier has received and reviewed Shipper's sanitary specifications and concludes that the transportation equipment complies with those food-specific sanitary instructions to prevent the food from becoming unsafe. Carrier has taken necessary steps to ensure that any cargo previously shipped by the transportation equipment will not cause contamination to the food or otherwise cause it to be unsafe. No temperature control is required for the food. Carrier is able to provide Shipper with information regarding the previous cargo transported by this transportation equipment, along with a description of the transportation equipment's most recent cleaning. Carrier is otherwise compliant with sanitary transportation requirements.

LOAD WAS RECEIVED: () DAMAGE FREE () DAMAGED

IF LOAD IS DAMAGED PLEASE COMPLETE DAMAGE SHEET COMPLETELY.

CARRIER NAME: DRIVER SIGNATURE: XR Shup

DRIVER WILL SIGN AND IS RESPONSIBLE FOR PRODUCT QUANTITY.

CUSTOMER NAME: Standlee CUSTOMER SIGNATURE: Jason Dunn

331-25

BRZ
Seal 97630