



INVOICE

BILL TO:
AVENGER LOGISTICS LLC
1810 CHESTNUT STREET
CHATTANOOGA, TN 37408

INVOICE DATE: 04/25/2025
INVOICE #: R87847
TERMS: NET 30
DUE DATE: 05/25/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
04/24/2025		5650 Alliance Gateway Fwy, Fort Worth, TX 76177 - 3804 S Elwood Ave, Tulsa, OK 74107			
		Freight Income	1	\$850.00	\$850.00

TOTAL
\$850.00

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 RATE CONFIRMATION

Page 1 / 1

LOAD NUMBER 14713400 MUST APPEAR ON YOUR INVOICE!

BOOKED BY KATIE DAVIDSON THACKER

B/L# SO584629

PO# PO269177

14713400

CARRIER ZIGI FREIGHT INC DBA ROYAL3 INC**CARRIER CODE** 112754**OFFICE****DISPATCH NAME** Kelly**PHONE** (630) 485-7370**FAX** 630-485-6980**TOLL FREE**

112754

EQUIPMENT REQUIRED VAN OR REEFER 53ft**WEIGHT** 43000lbs**TRAILER #** W97974**REF #****DRIVER NAME** Jorelus**DRIVER PHONE** 7863821354**CHARGES**

\$850.00 FLAT RATE

\$850.00 TOTAL**PICKUP 04/24/2025 08:00 - 14:00**

Beauty MFG - Alliance

5650 Alliance Gateway Fwy

FORT WORTH, TX 76177

CONTACT**PHONE****EMAIL****PICKUP #SO584629****SHIP #****SHIPMENT DESCRIPTION**

1 TOTES Rinse Water

PICKUP NOTES

Driver must track on trucker tools. \$150 failure to track fee. Tanker Endorsement.

DELIVER 04/25/2025 08:00 - 08:00

Tulsa MPF

3804 S Elwood Ave

TULSA, OK 74107

CONTACT**PHONE****EMAIL****DELIVERY #****SHIPMENT DESCRIPTION**

1 PIECES ORDER#N/A

Please ensure you receive a nonhazardous waste certificate from the shipping party.

In addition to a signed BOL, a scale ticket from the receiver is required for proof of delivery

Carrier warrants that it is duly and legally qualified to provide the transportation services herein and holds at least \$1,000,000 in auto liability and cargo insurance of at least \$100,000. Accessorial charges must be stated above or agreed to in a subsequent signed rate confirmation between Broker and Carrier. Carrier must submit signed carrier confirmation(s) with Carrier's invoice, a legible copy or original proof of delivery. Unauthorized delayed service shall be charged to Carrier, not to exceed the actual charges assessed against Broker for which Carrier's actions are at fault. A minimum charge of \$100 shall apply to missed appointments. Carrier is prohibited from subcontracting this Load to any other Carrier or broker. Broker reserves the right to pay the delivering carrier directly and Carrier named below shall remain primarily liable as provided herein. Carrier shall defend, indemnify and hold harmless Broker, its shipper customer, and the bill of lading parties from any claims, actions or damages, arising out of Carrier's performance hereunder, including damages of any kind asserted against Broker for negligent hiring of Carrier, cargo loss and damage, theft, delay, damage to property, and personal injury or death. Carrier represents it has adequate coverage for towing and any towing invoice in excess of coverage shall be Carrier's sole responsibility. Broker shall be permitted to offset carrier payables for any loss, delay, shortage or damage. Carrier agrees that any loss or damage to customer's food grade cargo shall be considered a total loss. Carrier forfeits its right to be paid in the event Broker's freight is held hostage. Carrier payment terms are net 30 days from the date Broker receives Carrier's invoice, a legible copy or original proof of delivery, matching confirmation(s), and reimbursable receipts. If Fuel Surcharge is not separately stated, then Flat Rate is all inclusive. The Carrier, and any connecting Carrier, shall not receive for transport any freight that shall be excluded from coverage under its primary cargo policy. Delivery and pick-up dates and hours will not require the driver to violate hours of service regulations. Routing instructions are for informational purposes only. Carrier agrees that Broker's charges to its customers are confidential and need not be disclosed to Carrier. Carrier waives any rights it may have under 49 CFR §371.3 or any related or successor law or regulation. Food Safety: Carrier agrees to comply with the terms at: <https://carrterms.modetransportation.com/regulatory/>

Driver must accept Trucker Tools tracking on their mobile phone and keep it active until the load delivers. Failure to do this will result in a deduction of \$150 unless cell service issues are present.**Please access our Carrier Portal at <https://carriers.modeglobal.com> to request quick pay and make payment status inquiries.**digitally signed by **Kelly Ivanovic**Signature kelly@royal3inc.com Position _____ Date _____
from 178.148.198.22 on 2025-04-23 02:24 PM EST

Carrier Signature _____ Position _____ MC# 00944686 DOT# 2828543 Date _____

14785 PRESTON RD, SUITE 850, DALLAS, TX 75254 TEL 423-708-3711



BILL OF LADING BOL

Doc. #: WI WHS-8

Rev. 00

Effective: July 17th.

Page 1 of 1

Date: 4/24/2025		BOL # _____
Name: Beauty Manufacturing Solutions Corp (BMSC2)		Carrier: _____ Trailer # <u>W97033</u>
Address: 5650 Alliance Gateway fwy		
City: Fort Worth	State: TX	
SID # _____	Zip: 76177	
Ship To: <u>Reworld</u>		Seal #'s <u>n/a</u>
Name: MPF TULSA		SCAC: _____ Pro # _____
Address: 3804 S Elwood Ave		
City: Tulsa	State: OK	
CID # _____	Zip: 74107	
Third party Freight Charges Bill To:		<div style="border: 1px solid black; padding: 10px; text-align: center;"> <h2>Bar Code Space</h2> </div>
Name: Beauty Manufacturing Solutions Corp (BMSC2)		
Address: 5650 Alliance Gateway fwy		
City: Fort Worth	State: TX	
Zip: 76177		
Special Instructions:		Freight Charge Terms: (Freight charges are prepaid unless marked otherwise). <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> Other <input type="checkbox"/>
Weight is estimate. 43,000 LBS		(Check box) <input type="checkbox"/> Master BOL with attached underlying BOL

Customer Order Number		Pallet	weight lbs	Pallet/Slip (Y/N)		Additional Shipper information		
						5-Digit Dest #	Digit PO Type	5-Digit Dept
					N			
					N			
SO584629		21	43,000		N			
PICKING LIST								
IS INCORPORATED HERE IN								
AND MADE PART OF THIS								
Grand Total		21	43,000					

[illegible]

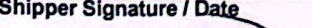
<p>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____</p>	<p>COD Amount \$ _____</p> <p>Fee Terms Collect Prepaid <input type="checkbox"/></p> <p style="text-align: right;">Customer Check Acceptable <input type="checkbox"/></p>
--	---

NOTE: Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. * 4706(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.

Shippers Signature:

Shipper Signature / Date This is to certify that the above named materials are properly classified, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the ICAI  X 4-24-25	Trailer Loaded: <input type="checkbox"/> Shipper <input type="checkbox"/> Driver	Freight Counted: <input type="checkbox"/> Shipper <input type="checkbox"/> Driver/ Pallets SIC <input type="checkbox"/> Driver/ Pieces	Carrier Signature / Pickup Date Receiving / Date Margaret Frazer
---	---	---	--

22 skids

50 H584629

DESTRUCTION REQUEST FORM

Doc. #: OPS-5

Rev. 01

Effective: Feb 21st, 2024

Page 1 of 2

Date: 4.10.2025	Reason:	<input checked="" type="checkbox"/> Quality	<input type="checkbox"/> Expired	<input type="checkbox"/> Obsolete	REQUESTED BY CUSTOMER <input type="checkbox"/> COD required <input type="checkbox"/> Pictures required
		<input type="checkbox"/> Customer Request	<input type="checkbox"/> Inventory Discrepancy		

For Bulk or RM only: Hazardous?

☐ Yes. Include SDS

☒ No

	Item#	Description	Lot #	Quantity	Cost	EHS
1	7055463	BM Baby Lotion 300z	B25079-1	940	\$1,399.16	Load 3
2	7055463	BM Baby Lotion 300z	B25080	14,708	\$21,892.42	Load #1
3	7055463	BM Baby Lotion 300z	B25083	5,368	\$7,990.11	Load 4
4	7002832	TH Scrub Watermelon	B24342	16,512	\$26,035.21	Load 3
5	R103130	Sucrose	250400062	68.04 kg	\$102	Load 4
6	C220106	Jar Scrub 180z	250301244	312	\$65.21	Load 4
7	7003332	TH Scrub Coco Colada	B25092	31,068	\$42,718.50	Load #2
8						
9						
10						

Destruction Justification (attach supporting materials):

7055463: OOS, low fill weight

C220106 - CRS will credit 312 units (damaged)

7002832: customer return

7003332 - foreign object

R103130: 3 bags opened/damaged

NOE Tracking #: NA

Payment Credit Memo/PO#: NA

Requested by: Chan Sherman

Date: 4/10/2025

Approved by: [Signature]

Date: 4/10/2025

[Signature]
Quality
[Signature]
Accounting

Date: 4/10/2025

[Signature]
CEO

Date: 4/17/25

Destroyed by: [Signature]
EHS

Date: 04/22/25

Issued out by: _____

Date: _____

Warehouse

DESTRUCTION REQUEST FORM

Doc. #: OPS-5

Rev. 01

Effective: Feb 21st, 2024

Page 1 of 2

Date: 4.14.25	Reason: <input checked="" type="checkbox"/> Quality	<input type="checkbox"/> Expired	<input type="checkbox"/> Obsolete	REQUESTED BY CUSTOMER <input type="checkbox"/> COD required <input type="checkbox"/> Pictures required
	<input type="checkbox"/> Customer Request	<input type="checkbox"/> Inventory Discrepancy		

For Bulk or RM only: Hazardous?

☐ Yes. Include SDS

☐ No

	Item#	Description	Lot #	Quantity	Cost	EHS
1	7002832	TH Scrub Watermelon 510g	B24330	5,040	\$7,946.79	Load
2	7002832	TH Scrub Watermelon 510g	B24331	5,040	\$7,946.79	Load
3	S600513	1 1/2 FDC Red #4 Glycerin	241030137	49.40	\$136.59	Load
4						
5						
6						
7						
8						
9						
10						

NA CS 4.14.25

Destruction Justification (attach supporting materials):

Remaining balance of defective units from last pickup on 3/27/25.

NOE Tracking #:	NA
Payment Credit Memo/PO#:	NA

Requested by: Chau Sherman

Date: 4.14.25

Approved by: [Signature]

Date: 4/14/2025

[Signature]
Quality
[Signature]
Accounting

Date: 4/14/2025

[Signature]
CEO

Date: 4/14/25

Destroyed by: _____

Date: _____

EHS

Issued out by: _____

Date: _____

Warehouse

ReworldTM

3804 S. Elwood Ave.

Tulsa, OK 74107

800.950.8749

reworldwaste.com

SO# 584629

SWAP - SPOT - STOP

LIVE LOAD - DUMP & RETURN

Driver

Kevin

Date

4-25-25

Customer

Beauty mfg

Address

COMMENTS:

No Seal

21- pallets

DROP EQUIPMENT #:

W97033

PICK UP EQUIPMENT #:

START TIME:

7:34

FINISH TIME:

10:19

GROSS WEIGHT:

70900

TARE WEIGHT:

33040

DELIVERED TO:

Reworld Tulsa MPF

Signature

Kevin