

### **INVOICE**

BILL TO:
BELLAVANCE LOGISTICS INC
5 SOUTH VINE ST.
BARRE, VT 05641

INVOICE DATE: 05/13/2025 INVOICE #: R90517 TERMS: NET 30 DUE DATE: 06/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/12/2025		79 Walnut St, St Albans, VT 05478 - 150 Allen Distribution Drive, Building 19, Mechanicsburg, PA 17055			
		Freight Income	1	\$1,700.00	\$1,700.00

TOTAL	
\$1,700.00	

#### 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



### BELLAVANCE LOGISTICS, INC.

"Brokerage Services" PO Box 398 Barre VT 05641 Phone: 802-661-5597 Toll Free: (800) 257-2828

Email: dispatch@bellavancelogistics.com

Load #: L395097

## Addendum B RATE CONFIRMATION

Trip #: 403897

Carrier ROYAL3 INC (ROYCHIL2)

Attention: Bill

Email bill@royal3inc.com

Phone 630-485-7370EXT.

**Fax** 132

Carrier agrees to notify Bellavance Logistics, Inc. immediately in the event of any delay related to the shipment's pick up and/or delivery. Carrier must provide a vehicle that has satellite, cell phone and/or other technology capable of frequent two way communication.

Van or Reefer <u>MUST</u> be clean, dry and odor free.

Please have Driver call for dispatch and load requirements prior to arriving at Shipper.

Stop Type Date

PICK 5/12/2025 12:00:00 to 15:00:00 APPT MADE.

**Shipper/Consignee Address** 

FB#: L395097

Pick up #: 12185780 Order #: 16488 Load #: 12185780 Release No.: 27240713 THE OLD MILL/NUTRABLEND 79 WALNUT ST

ST ALBANS, VT 05478

PALLETIZED FEED GRADE GRAIN; REQUESTED EQUIPMENT: VAN; PCS: 22; WGT: 43,990.0 LB

Stop Type Date

DROP 5/13/2025 12:00:00 APPT MADE.

FB#: L395097

Pick up #: 12185780 Order #: 16488 Load #: 12185780

Release No.: 27240713

Shipper/Consignee Address

ALLEN DISTRIBUTION
150 ALLEN DISTRIBUTION DRIVE

**BUILDING 19** 

MECHANICSBURG, PA 17055

PALLETIZED FEED GRADE GRAIN; REQUESTED EQUIPMENT: VAN; PCS: 22; WGT: 43,990.0 LB

Submit Freight Bills & POD's To:
Bellavance Logistics, Inc.
P.O. Box 398

Barre, VT 05641
Email: LoadDocs@bellavancelogistics.com

Rate	
RATE	0.00
BASE	\$1,700.00
TOTAL PAY	\$1,700.00

This addendum must be signed and emailed back to dispatch@bellavancelogistics.com  By signing this document, the Carrier agrees to the terms and conditions of the Broker-Carrier Agreement.						
by signing this document, the carrier agrees to the terms and conditions of the broker-carrier Agreement.						
Carrier: ROYAL3 INC			Broker: Bellavance Logistics, Inc.			
Signed by:	7.11.0	Date:	Signed by:		Date:	
	Bill Carson	5/9/2025		Togan Bellavare	5/9/2025	
Title:			Title: (Broker			
	Dispatcher		,			

#### Service & Rate Stipulation

This rate is contingent upon the successful and on-time completion of all load terms. Rates are subject to reduction if carrier fails to complete any shipment terms and conditions as provided in this Addendum and/or the Broker Carrier Agreement. Rates may be reduced if load picks up or delivers after originally scheduled time and date. Failure to maintain tracking throughout the duration of the shipment, as provided in the Broker Carrier Agreement, will result in a \$150 deduction. Carrier acknowledges that failure to complete any terms and conditions on this shipment may jeopardize or result in loss of future business opportunities with Bellavance Logistics, Inc.

### **Accessorial Charges and OS&D Conditions**

Accessorial charges (including but not limited to labor, detention, and/or layover charges) must be authorized and approved prior to or at time of occurrence. Bellavance Logistics, Inc. will not provide any reimbursement of any non, prior-approved accessorial charges. Carrier shall ensure the bill of lading is notated either when handling is required or when detention occurs, that a lumper receipt is provided when a lumper is hired, and/or that both are included as supporting documents with the carrier's invoice. All overage, shortage, and damage must be reported to Bellavance Logistics immediately, at the time of the occurrence, and noted on the bill of lading.



# TRANSFER BILL OF LADING

Nutra Blend 79 Walnut Street St Albans, VT 05478 (802) 524-0076 ORDER NUMBER
ORDER DATE
PAGE
SHIPPED DATE
LOAD PICKUP #
OTM SHIPMENT GID

16488 05/06/2025 1 of 1 05/12/2025

12185780

BOL #: SHIP TO: **3587099** MBRG

Mechanicsburg 1225 South Market St

Mechanicsburg, PA 17055

**CUSTOMER:** 

NOTES:

**FOODSTUFFS** 

Dear 29068280

**CUST ORDER #** 

**CARRIER INFO** 

11466 - BELLAVANCE TRUCKING

6 WINE ST

BARRE, VT 05468 (802) 893-4456 Received in good condition by: 5/3/25
Signature Required

distribution in the last school and	(002) 00	00 4400		Olgili	ature required
ITEM#	CUST ITEM #	DESCRIPTION	ORD QTY	MOU	SHIP QTY
C10159B0		PURINA 8701 BEEF MFG TM II LB (50LB)BG (2460681)	1,000.000	lb	1,000.000
C10264A0	*	Lot # 05062508 = 20 x 50 (Mfg Date(s) 05/06/2			
C10264A0		VITAMIN E 20,000 <b>Lot #</b> 05072503 = 81 x 50 (Mfg Date(s) 05/07/2	10,000.000	lb	10,050.000
		Lot # 05092502 = 120 x 50 (Mfg Date(s) 05/09			
C21706B0		K&K DAIRY PREMIX NBG	2,000.000	lb	2,000.000
C23065B2		<b>Lot #</b> 05082521 = 40 x 50 (Mfg Date(s) 05/08/3	2025) 12,000.000	lb	12 220 000
		<b>Lot #</b> 05062514 = 307 x 40 (Mfg Date(s) 05/07		ID	12,280.000
C23069A0		NB SELENIUM YEAST 600	10,000.000	lb	10,000.000
LIDMCCND		Lot # 05052516 = 200 x 50 (Mfg Date(s) 05/05	5/2025)		
HPMSSND		NUTRI-CORE SHELL N-DUR TM	4,000.000	lb	3,950.000
OMSEL06		Lot # 05092504 = 79 x 50 (Mfg Date(s) 05/08/ SELENIUM .06%			
		<b>Lot #</b> 05052515 = 80 x 50 (Mfg Date(s) 05/05/	4,000.000 2025)	lb	4,000.000

Total Pallets 22 Total Ordered Qty. 43,000.000 lb Total Shipped Qty. 43,280.000 lb

PREPAID FEED SUPPLEMENTS NMFC-67050-S3-CLASS 55 FREIGHT COLLECT THIRD PARTY BILLING

**DRIVER SIGNATURE** 

**DRIVER NAME (PLEASE PRINT)**