

INVOICE

BILL TO:
FORWARD AIR LOGISTICS SERVICES
6800 PORT ROAD
GROVEPORT, OH 43125

INVOICE DATE: 05/19/2025 INVOICE #: B91222 TERMS: NET 30 DUE DATE: 06/19/2025

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|------------------|---|----------|------------|------------|
| 05/16/2025 | | 4136 Martel Road, Caledonia, OH 43314 - 14330 Gillis Road, Farmers Branch, TX 75244 | | | |
| | | Freight Income | 1 | \$2,000.00 | \$2,000.00 |

| TOTAL | |
|------------|--|
| \$2,000.00 | |

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



Forward Air Logistics Services, LLC

Rate Confirmation Agreement for Forward Air Logistics Services, LLC dba Forward Air Logistics Services

- All Invoices must include a SIGNED DELIVERY RECEIPT, BOL, and RATE AGREEMENT.
- Invoicing, document collection, and payment will be done using Epay Manager, an ACH payment system. Please upload paperwork to Epay Manager (epaymanager.com). This is the preferred method of payment for timely payments. A secondary option is to email invoices and supporting documentation to brokerageap@forwardair.com. Omni Logistics, LLC dba LiVe Logistics will act as pay agent for Forward Air Logistics Services.
- The rate on this confirmation is the agreed-upon sum between Carrier and Forward Air Logistics Services.
- This load cannot be double brokered. Double brokering of this load will result in nonpayment to the carrier, in addition to any other penalties applicable by contract or law.
- Any additional charges must be approved and added to the rate confirmation prior to invoicing.
- By signing below, CARRIER agrees to provide a minimum of \$100,000 in Cargo insurance and \$1,000,000 in automotive liability insurance.
- The CARRIER acknowledges that the product listed is covered by their insurance policy and does not fall under any exclusions from their cargo policy.
- For any Team shipment, there will be a \$500 rate reduction for using a SoloDriver.
- Any Team load where a driver does not accept Macropoint or Project 44 Tracking will be subject to a \$500 rate reduction.
- If a shipment is co-loaded with other freight or put on the rail without Forward Air Logistics Services consent, the linehaul rate will be cut by 50%.
- In order for detention to be paid, the driver must accept Macropoint or Project 44. If the driver accepts tracking, then detention will be paid upon delivery and POD being received with notated BOLs. If the driver does not accept tracking, there will be a delay or no detention paid.
- POD required upon delivery. CARRIER is subject to a \$50 per day rate reduction if PODs are not submitted within 48 hours.

Forward Air Logistics Services 6800 Port Road Groveport OH, OH 43125 844-351-3780



Page

1

0293827

Load Confirmation

Carrier: Brz

Order

Burbank

Order:

Miles:

IL. 604592734 Contact:

Phone:

Fax:

Rocco

Date: 05/15/2025

0293827

1064.0

Commodity: Weight:

Date:

FLOUR 43700.0

Trailer: Temp: BOL:

Reference:

Van (DAT) JBBS 169249 / LB 049423-1

PU 1 Name: MENNELL BAKERY

05/16/2025 1500 05/16/2025 1500

Address: 4136 MARTEL ROAD **PU BY APPT **

SHIPPING/APPOINTMENTS Contact:

CALEDONIA OH 43314

Phone: 419-845-3326

Driver Load: No driver loading or unload

Reference number:

PO JBBS 169249 / LB 049423-1

Reference number:

PU

PO

PU# 88992617 AND 2095583074

SO 2 Name: LA BODEGA

Address:

14330 GILLIS ROAD

Date:

05/19/2025 0700

**BY APPOINTMENT **

05/19/2025 0700

Contact: **EDDIE**

FARMERS BRANCHTX 75244

Driver Load: No driver loading or unload

Phone: 972-926-6129

Reference number:

JBBS 169249 / LB 049423-1

Payment

() Decline

Carrier Freight Pay:

Total Carrier Pay:

\$2,000.00 \$2,000.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

MENNELL BAKERY - PU# 88992617 2095583074 FOR WED 5/14 2PM

FOOD GRADE TRAILER, MACRO POINT REQUIRED, SCALE BEFORE LEAVING

LA BODEGA - DEL APPT MON 5/19 7AM CONF# 27649841

*NOTE- REC ONLY TAKES FREIGHT FROM MIDNIGHT TO 7AM - DON'T BE LATE **

skinney@forwardair.com

Please Sign: Rocco Antonijevic

Driver Name: Fernando Vales (786) 260-5614 **Driver Cell:**

From: **Shawn Kinney** (X) Accept Phone: 224-424-0609

Email:

Driver Email: 834 Tractor #:

W94929 Trailer #:



| | | | | | | Bill of ladir | ng #26 | | | | | | | |
|--|--|---|---|---|--|--|--|--|----------------------------|--|----------------------------------|--------------------|--|--|
| | | | | | | | | | | | | Page | | |
| Name | Ship from | | | | | | | f lad | ing numbe | er 88992617 | | | | |
| Name Martel Bakery Mix Address 4136 Martel Rd City/State/Zip CALEDONIA, OH 43314-9634 Saleorder 3086679 SID 2095583074 | | | | | | | | | | | | | | |
| Ship to Name GM No COA Address 14315 GILLIS RD | | | | | | | | Carrier name Customer Pickup Trailer number 97041 Seal Number(s) 338790 | | | | | | |
| City/State/Zip FARMERS BRANCH, TX 75244 CID# CUS-000008 Third party freight charges bill to | | | | | | | | SCAC CPU Pro number Date: La Bodega Meat & Produce Pro 1 Pro number | | | | | | |
| Name | | mu pai | ty ireigin | Charge | POI 49423 | | | | | | | | | |
| Address | | | | | | | | Freight charge terms 450 Prepaid X College Third party | | | | | | |
| М | laster bill | of ladin | g with att | ached u | | ill of ladings | | | Plt o | ut: | $\Delta \Delta \dot{c}$ | The | | |
| | | | | _ | Custor | mer order info | ormati | 700 | | | | To the same | | |
| Cus | stomer or | der num | ber | Packages | | Weight | | Pallet/Slip Yes or No | | Additional shipper info | | | | |
| | 169429 0 | 49423-1 | | 8 50 | | 44625 | | | N | | | | | |
| | | | | | | | YN | | | | | | | |
| | | | - | | | | Y | | N | | | | | |
| | | | - | | | | Y | | N | | | | | |
| | GRAND TOTAL | | | | 44625 | | | | | | | | | |
| 9005090 | No. of Contract of | Bellevick (CORPO | nagarine and | MINISON | Militaria C | arrier informa | tion # | NAME OF THE PERSON OF THE PERS | Server Application | 并创建的时间的 | lasikhisi/Ase con | KOSPOSIO K | | |
| Handl | Handling unit Package | | | Weight | | H.M. | Commodity description Commodite require sector or additional over or admitted in handling or admitted that the market and packaged to what is after temporation with ordinary case. | | | | LTL only | | | |
| Qty | Туре | Qty | Туре | Weight | | (x) | ordinary care | | | | NMFC | Class | | |
| 850.00 | ww | 850.00 | ww | 446 | 525.00 | | Mixes, incl Cake, Bread, E | | | Brownie, Muffin | 73140 | 50 | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 850.00 | | 850.00 | | 116 | 325.00 | | | G | RAND TO | ΤΔΙ | Karacic acas | | | |
| Where the rate | | value, shippers a | | specifically in | vriting the agreed or de | eclared value of the proper | y as | Fee t | erms Colle | ect Prepaid C | | | | |
| | The agreed or declared value of the property is specifically stated by the shipper to be not exceeding | | | | | | | - | | | | | | |
| Liability | 1 | | | | | | | _ | The percentage th | Utilization p | ercentage Volume utiliz | zation percentages | | |
| Received, sub shipper, if app the shipper, or | oject to individually blicable, otherwise in request, and to a | determined rates to the rates, clas il applicable state | s or contracts that sifications and rule e and federal regula | have been agree s that have bee stions. | ed upon in writing between established by the ca | een the carrier and arrier and are available to | The carrier sha | d not make d | Selvery of this shipment w | thoul payment of freight and all o | ther build charges. | | | |
| Shippe This is to ce classified, d | r signatur ertify that the ab described, pack dition for transpi | e/date | aterials are pro- | neriv | Trailer loade | ed Freigh | t coun | ted | | Carrier sign Carrier acknowledg required placards. | ature/date es receipt of pack | ages and | | |

By driver/Pallets said to contain

By driver/Pieces

By driver