



INVOICE

BILL TO:
RXO Inc

INVOICE DATE: 05/21/2025
INVOICE #: B91933
TERMS: NET 30
DUE DATE: 06/21/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/20/2025		8701 S 126th ST, Omaha, NE 68138 - 4412 W 300 N, Greenfield, IN 46140			
		Freight Income	1	\$1,300.00	\$1,300.00

TOTAL
\$1,300.00

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



LZ18018257

Load Confirmation
18018257

AT1300.00

CARRIER INFORMATION

Carrier	Contact
BRZ Burbank, IL 60459	SHAWN POPOVIC 7088525536 shawn@rtbrz.com

CONTACT INFORMATION

RXO, Inc.	After Hours
Tyler Stauffer 470-703-6946 tyler.stauffer@rxo.com	678-971-0614 gai3@rxo.com

PAYMENT**Carrier Pay Breakdown**

LNH | Line Haul | Flat \$1300.00

Total Carrier Pay **\$1300.00****Bill To Address****RXO**
PO Box 49069
Charlotte, NC 28277

Please refer to section **Paperwork Submission** for options on where to send your Invoice, POD and accessorial receipts (if applicable) for payments

AGREEMENT

Please sign and complete this form to submit as your invoice.

Driver Name	Driver Phone #	Tractor #	Trailer #	Carrier Invoice #
Anis	+19197982779	601	W99430	

Signature

Carrier will perform the transportation described in this load confirmation subject to and in accordance with the Motor Carrier Transportation Agreement between Carrier and RXO Capacity Solutions, LLC or RXO Capacity Solutions, Inc. and/or the Carrier Agreement between Carrier and Coyote Logistics, LLC (in each case, the "Agreement"), which is incorporated herein by reference. Carrier acknowledges that RXO Capacity Solutions, LLC's, RXO Capacity Solutions, Inc.'s and/or Coyote Logistics, LLC's customers or shippers may have special requirements for this shipment. By accepting the shipment described in this load confirmation, Carrier agrees to the rates and charges stated in this load confirmation and to special requirements communicated to Carrier by, as applicable, RXO Capacity Solutions, LLC, RXO Capacity Solutions, Inc., Coyote Logistics, LLC or their customer, or the shipper.

Book loads with RXO Connect

Get real-time access to thousands of available loads.

Sign up



LZ18018257

Load Confirmation
18018257

AT1300.00

ORDER INFORMATION

Order #	Total Weight (lbs.)	Equipment	Temp	Reference #	
18018257	14539.00	Van - 53 Feet	N/A - N/A	BM	111Z87WTB
				ZZ	LOW
				TD	05/16/2025

STOP DETAIL

Type	Date/Time	Name and Address	Commodity	Weight (lbs)/Cases/Dims	Reference #
PU	05/20/25 06:00 - 15:30	Sergeants - Pet Specialty Division 8701 S 126th ST Omaha, NE 68138	CONSUMER GOODS	14539 (18) Dim: N/A x N/A x N/A	BM 1061738, 1061686 BX 36164334441 BX 36164578261 PO 3CWXPDTQ, 1PR1E9ZG
SO	05/21/25 11:00	MQJ1 4412 W 300 N Greenfield, IN 46140	CONSUMER GOODS	14539 (18) Dim: N/A x N/A x N/A	BX 36164334441 BX 36164578261 AO 438995004970

NOTES

Order Notes

No Reefers Allowed - No Exceptions

Drivers must depart the shipper with both a SEAL and PADLOCK, provided either by the facility or by the driver. If the facility does not provide a seal, the driver must apply one and send the seal number with photo to RXO. Deliveries will be refused if the driver arrives without a seal. RXO will not be responsible for any additional mileage or time required to return to the shipper for resealing.

The seal number MUST be written on the BOL.

A photo of the BOL with the seal number clearly written on it must be submitted to RXO prior to departure. Additionally, a wide-angle photo of the rear of the trailer showing the seal in place and the trailer number must also be submitted along with the BOL photo.

Book loads with RXO Connect

Get real-time access to thousands of available loads.

Sign up



LZ18018257

Load Confirmation
18018257

AT1300.00

Drivers must roll a minimum distance after loading before shutting down. Minimum Distance Req. - If the trip is 400 miles or less, drivers must travel at least 50% of the total trip distance before stopping. If the trip is over 400 miles, drivers must travel at least 300 miles before stopping. This policy applies to all trip lengths, including short hauls. For example, if the trip is 60 miles, the driver must travel at least 30 miles before stopping.

Detention begins 4 hours after the appointment time.

Layover begins 24 hours after the appointment time.

Detention is paid at \$35/hour, up to a maximum of \$250.

Layover is paid at \$250.

The MAXIMUM combined detention and layover compensation is \$500.

First Come, First Serve shippers do not pay detention.

Deliveries are appointment-based.

Being late forfeits detention and layover eligibility if RXO is not updated prior to the delay.

Detention will not be paid for late pick-ups without prior RXO approval. Detention will not be paid for late deliveries without communication to RXO. Detention will not be paid for missed appointments.

Carriers must notify RXO immediately if detention occurs. Detention requests submitted more than 24 hours after delivery will not be honored.

Auto-tracking must be accepted prior to pickup and remain active through to delivery. The driver who picks up the shipment must be the same driver who delivers it. Pickup address and reference number will only be provided after the first auto-tracking update is received.

If your driver incurs a toll violation while pulling an RXO trailer and RXO is fined, the total cost will be passed back to the carrier, along with a \$45 administrative fee per occurrence.

To be eligible for payment, carriers must submit Proof of Delivery (POD) along with their invoice within 48hrs of delivery.

Failure to apply a seal and/or failure to provide seal number and photo to RXO will result in a \$150 fine.

Driver and dispatcher are to follow policies and procedures outlined on the high value HVHR addendum

Pickup Street address and pickup Reference number will be provided only after auto-tracking update.

Location Notes

Sergeants - Pet Specialty Division:

TE 402-758-2071

TE 402-758-2074

FX 402-758-2071

INSTRUCTIONS

RXO Requirements

Carriers must provide RXO with timely updates of arrival/departure at all stops and while in transit by utilizing a method of auto tracking or by calling 833-TRAK RXO (1-833-872-5796).

Any discrepancies or incident affecting transportation such as overages, shortages, damages, trailer seal discrepancies, failure of any temperature control equipment or other conditions that may render (or may have rendered) food unsafe during transportation, or detention must be reported immediately. All accessorial charges must be reported within 24 hours of delivery to be reimbursed.

Paperwork Submission

Book loads with RXO Connect

Get real-time access to thousands of available loads.

Sign up



LZ18018257

Load Confirmation
18018257

AT1300.00

Use one of the options below to submit your invoice, POD and all applicable receipts

- Join TriumphPayment Network at <https://secure.triumphpay.com/> and claim RXO as your broker to upload your paperwork
- RXO Connect for desktop or RXO Drive for our mobile app
- Velocity (on desktop or mobile app). Use code XPOL
- Email carrierpaperwork@rxo.com

Accessorial Approval Requests

Alert your broker immediately for approval and to receive payment for accessorial charges incurred after the initial rate confirmation.

Payment Status Questions

For users with 30-day payment terms:

- APinvoices@rxo.com
- 1-855-976-5623 and select option 4, then option 1, and option 1

For users with quick pay payment terms:

- QuickPay@rxo.com
- 1-855-976-5623 and select option 4, then option 1, and option 2

Quick Pay

Sign up for QuickPay on TriumphPay Network to get same-day quick pay for only 2.5%. Plus, with TriumphPay, manage payments, check invoices and see remittance details for seamless payments. For more information, email quickpaysetup@rxo.com.

RXO offers exclusive discounts through the RXO Extra program. Click here to check out savings on fuel, maintenance and tires, factoring and more.

Notice of Assignments, Letters of Release and change of address request are to be submitted to carrierpayupdate@rxo.com to be updated. Failure to do so may result in delayed payment.

Remittance Changes and Payment Requests

Start by creating a profile on the Triumph Payment Network at <https://secure.triumphpay.com/>. Then claim RXO as your broker. In the platform, manage payments, check invoices and see remittance details for seamless payments.

Book loads with RXO Connect

Get real-time access to thousands of available loads.

Sign up



Proof of Delivery

Appointment ID	438995004970
Carrier	ROCO FREIGHT SERVICES
Amazon Warehouse	MQJ1
Appointment Type	LIVE
Current Location	DD205
Expected Arrival Date	2025/05/21 11:00 EDT
Actual Arrival date	2025/05/21 10:41 EDT

This document serves only as a confirmation that the shipment described above from the carrier is now in the possession of Amazon. Amazon has not yet inspected the contents of the shipment and therefore makes no representations at this time about the quality, quantity, or condition of the units contained in the shipment.

X	<div>Andrea Givens MAY 21 2025 <i>Andrea Givens</i></div>
---	---

Amazon Signature

205
1 stop

Page - 1

Bill Of Lading

Date: <u>5/20/25</u>		Bill Of Lading Number: <u>1061738</u>							
SHIP FROM Q44RT - pallet ordering Pet IQ Omaha DC, +1 402-758-2074 8701 S 126th ST, Omaha, NE 68138, US SID#: _____ FOB: <input type="checkbox"/>		BAR CODE SPACE							
SHIP TO Amazon MQJ1 4412 W 300 N, GREENFIELD, IN 46140-7099, US CID#: _____ FOB: <input type="checkbox"/>		CARRIER NAME: <u>ROCO FREIGHT SERVICES</u> Trailer number: _____							
THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____		Seal number(s): <u>60100673827</u> SCAC: <u>ROCO</u> Pro number: _____ BAR CODE SPACE							
SPECIAL INSTRUCTIONS: _____		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3 rd Party _____ <input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading							
CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS	#EACHES	WEIGHT	PALLET/SLIP			
1PR1E9ZG	36164578261	17	1542	6776	14360.0 pounds	Y. N			
GRAND TOTAL				ADDITIONAL SHIPPER INFO					
CARRIER INFORMATION									
HANDLING UNIT		PACKAGE		WEIGHT	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(e) of NMFC Item 360</small>	LTL ONLY		
QTY	TYPE	QTY	TYPE				NMFC#	CLASS	
GRAND TOTAL									
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or 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. <u>Al. Shurz</u> <u>5/20/25</u>				Trailer Loaded <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP DATE: <u>5/20/25</u> 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	

Bill Of Lading

Date: 5/20/25 SHIP FROM Sergeants - Pet Specialty Division Pet IQ Omaha DC, +1 402-758-2074 8701 S 126th ST, Omaha, NE 68138, US SID#: _____ FOB: <input type="checkbox"/>				Bill Of Lading Number: 1061686 BAR CODE SPACE CARRIER NAME: ROCO FREIGHT SERVICES Trailer number: _____ Seal number(s): 60100673827 SCAC: ROCO Pro number: _____ BAR CODE SPACE																			
SHIP TO Amazon MQJ1 4412 W 300 N, GREENFIELD, IN 46140-7099, US CID#: _____ FOB: <input type="checkbox"/>				Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid _____ Collect YES 3 rd Party _____ <input type="checkbox"/> Master Bill of Lading with attached <input type="checkbox"/> underlying Bills of Lading																			
THIRD PARTY FREIGHT CHARGES BILL TO: Name: _____ Address: _____ City/State/Zip: _____ SPECIAL INSTRUCTIONS: _____				CUSTOMER ORDER INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>CUSTOMER ORDER NUMBER</th> <th>SHIPMENT ID</th> <th>#PALLETES</th> <th>#CARTONS</th> <th>#EACHES</th> <th>WEIGHT</th> <th colspan="2">PALLET/SKIP</th> </tr> <tr> <td>3CWXPDTQ</td> <td>36164334441</td> <td>1</td> <td>77</td> <td>624</td> <td>179.0 pounds</td> <td>Y</td> <td>N</td> </tr> </table>				CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETES	#CARTONS	#EACHES	WEIGHT	PALLET/SKIP		3CWXPDTQ	36164334441	1	77	624	179.0 pounds	Y	N
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETES	#CARTONS	#EACHES	WEIGHT	PALLET/SKIP																	
3CWXPDTQ	36164334441	1	77	624	179.0 pounds	Y	N																
GRAND TOTAL				ADDITIONAL SHIPPER INFO																			
CARRIER INFORMATION																							
HANDLING UNIT		PACKAGE		WEIGHT	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(e) of NMFC Item 350</small>		LTL ONLY															
QTY	TYPE	QTY	TYPE					NMFC#	CLASS														
GRAND TOTAL																							
<small>Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____"</small>						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. Cody Thurston 5/20/25				Trailer Loaded <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP DATE <i>A. [Signature]</i> 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															

Bill Of Lading

Date: 5/20/25		SHIP FROM		Bill Of Lading Number: 1061686
Sergeants - Pet Specialty Division Pet IQ Omaha DC, +1 402-758-2074 8701 S 126th ST, Omaha, NE 68138, US				BAR CODE SPACE
SID#:	FOB: <input type="checkbox"/>	CARRIER NAME: ROCO FREIGHT SERVICES		
SHIP TO		Trailer number:		
Amazon MQJ1 4412 W 300 N, GREENFIELD, IN 46140-7099, US	FOB: <input type="checkbox"/>	Seal number(s): 60100673827		
CID#:		SCAC: ROCO		
THIRD PARTY FREIGHT CHARGES BILL TO:		Pro number: BAR CODE SPACE		
Name:		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)		
Address:		Prepaid _____ Collect YES 3 rd Party _____		
City/State/Zip:		<input type="checkbox"/> Master Bill of Lading with attached		
SPECIAL INSTRUCTIONS:		<input type="checkbox"/> underlying Bills of Lading		
CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	SHIPMENT ID	#PALLETS	#CARTONS	#EACHES
3CWXPDTQ	36164334441	1	77	624
GRAND TOTAL		WEIGHT 179.0 pounds		
		PALLET/SLIP Y N		
ADDITIONAL SHIPPER INFO				
HANDLING UNIT	PACKAGE	WEIGHT	H.M.	COMMODITY DESCRIPTION
QTY TYPE	QTY TYPE		(X)	LTL ONLY
				NMFC# CLASS
GRAND TOTAL				
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or 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 <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted <input checked="" type="checkbox"/> By Shipper <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