



## INVOICE

**BILL TO:**

FORWARD AIR LOGISTICS SERVICES  
6800 PORT ROAD  
GROVEPORT, OH 43125

**INVOICE DATE:** 05/22/2025**INVOICE #:** B92230**TERMS:** NET 30**DUE DATE:** 06/22/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/21/2025		350 Logistics Ave, Jeffersonville, IN 47130 - KROGER DSD #851, 5771 Nolensville Rd, Nashville, TN 37211			
		Freight Income	1	\$1,000.00	\$1,000.00

**TOTAL**

\$1,000.00

**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**



**Rate Confirmation**  
**Order: 0296439****From:** Raymond Kruse**Phone:****Email:** raykruse@forwardair.com

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<b>Carrier:</b>	Brz	<b>Contact:</b>	John
	Burbank	<b>Phone:</b>	
<b>Date:</b>	05/21/2025	<b>Fax:</b>	
	IL 604592734		

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<b>SO 4</b>	<b>Name:</b>	KROGER DSD,026851,NASHVILLE,TN,	<b>Date:</b>	05/21/2025 1800
	<b>Address:</b>	KROGER DSD#851 5771 NOLENSVILLE RD		05/21/2025 2200
		(615) 834-8666	<b>Contact:</b>	
		NASHVILLE TN 37211	<b>Drv Ld/Unld:</b>	No driver loading or unload
	<b>Phone:</b>			
	<b>Reference Number:</b>	DO 38313001		
	<b>Reference Number:</b>	DO 38313001		
	<b>Reference Number:</b>	PO NASH052025851		
	<b>Reference Number:</b>	PO NASH052025851		

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<b>Payment</b>	<b>Carrier Freight Pay:</b>	\$1,000.00
	<b>Total Carrier Pay:</b>	\$1,000.00

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**Instructions**

Niagara Bottling LOU - NB52275061

Niagara Bottling LOU - NASH052025537

Niagara Bottling LOU - Pre-Check in process - please use the following link for pre-check in before arriving at shipper or while waiting in line to speed up the check-in process - Louisville:

<https://precheckin.niagarawater.com/?org=LOU>

Niagara Bottling LOU - NIAGDICA: MACROPOINT REQUIRED WITHOUT FAIL. DRIVER MUST SEAL TRAILER AND SEAL MUST BE NOTED ON BOL. MUST PU WITH FULL TANK AND PLENTY OF HOURS. DRIVER CANNOT STOP WITHIN 200 MILES OF SHIPPER. NO UNSCHEDULED STOPS. SEAL TO BE BROKEN BY CONSIGNEE ONLY.

Niagara Bottling LOU - NIAGDICA: POD &amp; LUMPER RECEIPTS MUST BE SUBMITTED WITHIN 48 HOURS IN ORDER TO BE REIMBURSED. POD MUST INCLUDE SIGNATURE AND IN/OUT TIMES FROM THE RECEIVER FOR ACCESSORIAL CHARGES TO BE APPROVED. DRIVER MUST CONTACT LIVE LOGISTICS IF BEING DETAINED AT THE 1 HOUR AND 45 MINUTE MARK AFTER THE APPOINTMENT TIME TO HAVE DETENTION APPROVED.

Niagara Bottling LOU - NIAGDICA: LOAD MUST BE SEALED IN TRANSIT. SEAL CAN ONLY BE REMOVED BY CONSIGNEE. FAILURE TO DO SO MAY RESULT IN CLAIM FOR PRODUCT, FREIGHT, AND ASSOCIATED DAMAGES.

Niagara Bottling LOU - NIAGDICA: FOOD GRADE TRAILER REQUIRED. CLEAN, DRY, NO HOLES.

KROGER DSD,026542,NASHVILLE,TN,USA - NASH052025542

KROGER DSD,026537,NASHVILLE,TN,USA - NASH052025537

KROGER DSD,026851,NASHVILLE,TN,USA - NASH052025851

**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 (epay.manager.com). This is the preferred method of payment. A secondary option is to email invoices and supporting documentation to [brokerageap@forwardair.com](mailto:brokerageap@forwardair.com). Omni Logistics, LLC dba LiVe Logistics will act as pay agent for Forward Air Logistics Services. The rate 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.

STRAIGHT BILL OF LADING - SHORT FORM - Not negotiable

Niagara Bottling, LLC

Date: 05/21/25 06:38 PM EST		<b>BILL OF LADING</b>		Page 2 of 3				
<b>SHIP FROM</b>			<b>SHIP TO</b>					
Name: LOU Address: 350 Logistics Ave City/State/Zip: Jeffersonville, IN 47130 SID#: 58997696      FOB: <input type="checkbox"/>			Bill of Lading Number: 20954491 Master Bill of Lading Number: 58997696 Customer PO#: NASH052025537 Reference #: NO DRIVER ASSIST Delivery #: 38313058 Shipment #: 58997696					
<b>SHIP TO</b>			<b>CARRIER DETAILS</b>					
Name: KROGER DSD Location #: Address: KROGER DSD#537 5713 EDMONDSON PK City/State/Zip: NASHVILLE, TN 37211 CID#:      FOB: <input type="checkbox"/> Customer Phone:			Carrier Name: LIVE LOGISTICS CORP Address: 200 N FAIRWAY DR UNIT 192, VERNON HILLS, IL 60061 City/State/Zip: VERNON HILLS IL 60061 SCAC: LVLP      Pro number: Trailer number: 94934 Seal Number: 16888120					
Freight Charge Terms: (freight charges are prepaid unless marked otherwise)      Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> Customer Pick Up <input type="checkbox"/>								
POD INSTRUCTIONS: Carrier FAX (909) 494-4456      Or Email To : Orders@niagarawater.com								
<b>Customer Order Information</b>								
Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
96	3840	96	2	KRG05L40PDRCH N		05L.DR.KROGER.40P.N.48. CH	001111009855	4512 lbs
168	4032	168	2	KRG05L24PDRN		05L.DR.KROGER.24P.N.84. CH	001111049213	4754 lbs
<b>Totals</b>								
264	7872	264	4					
				THE KROGER COMPANY GROCERY 5713 EDMONSON PIKE NASHVILLE, TN 37211				
All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456				Receiving Stamp: 020-537				
<b>CARRIER SIGNATURE/PICKUP DATE</b>				<b>CARRIER</b>		<b>DATE</b>		
dexter harris Print Name: dexter harris 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.				If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Consignor Signature: <u>YMB</u> Date: _____		<b>FACILITY CHECKOUT</b> Appt Time: 05/21/25 04:00 PM EST Check In Time: 05/21/25 04:52 PM EST Check Out: 05/21/25 06:38 PM EST Delivery Time: 05/21/25 07:00 PM EST Driver Name: dexter harris Driver Initials: <u>dexter harris</u> NBL Initials: _____		
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S DOT emergency response guidebook or equivalent documentation in the vehicle.				COD Amount: \$ _____ LTL ONLY NMFC # 0      CLASS				
<b>CARRIER INSTRUCTIONS</b>								
Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4486 for assistance.								



Invoice ID: 8410

# Invoice D:38313058

Store # 26-537

Supplier: NIAGARA BTLG LLC  
Invoice #: 38313058  
D/R: Delivery  
Status: Final

Method: NEX  
Invoice Date: May 21, 2025  
Delivery: May 21, 2025 12:00 AM  
Finalized: May 22, 2025 6:02 AM

Line	UPC #	Description	Qty	Pack	Cost	Allow	Ext cost	Retail	Deposit	Debit	Exceptions
1	11110-49213	KRO PURIFIED WATER 24PK, 24/16.9 F	168 E	1	\$2.15	\$0.00	\$361.20	\$3.99		1	Cost discrepancy Store cost=\$2.31
2	11110-09855	KRO PURIFIED DR WTR 40PK, 40/16.9	96 E	1	\$3.41	\$0.00	\$327.36	\$5.99		1	Cost discrepancy Store cost=\$3.67

Delivered by

Received by

MB

Store: 26-537, Invoice ID: 8410, User: BURNS SR, MICHAEL A  
Supplier: 401305-NIAGARA BTLG LLC, Invoice #: D:38313058

	Supplier	Store
Total qty:	264	264
Total retail:		\$1,245.36
Amount due:	\$688.56	\$688.56

\*\*\* END OF REPORT \*\*\*

2 of 2

THE KROGER COMPANY GROCERY  
026537 THE EDMONSON PIKE  
NASHVILLE, TN 37211

Signature DATE

Date: 05/21/25 06:38 PM EST

## BILL OF LADING

Page 3 of 3

SHIP FROM		BILL OF LADING NUMBER: 20954279	
Name:	LOU	Master Bill of Lading Number:	58997696
Address:	350 Logistics Ave	Customer PO#:	NASH052025851
City/State/Zip:	Jeffersonville, IN 47130	Reference #:	NO DRIVER ASSIST
SID#:	58997696	Delivery #:	38313001
	FOB: <input type="checkbox"/>	Shipment #:	58997696

SHIP TO		CARRIER DETAILS	
Name:	KROGER DSD	Carrier Name:	LIVE LOGISTICS CORP
Location #:		Address:	200 N FAIRWAY DR UNIT 192, VERNON HILLS, IL 60061
Address:	KROGER DSD#851 5771 NOLENSVILLE RD	City/State/Zip:	VERNON HILLS IL 60061
City/State/Zip:	NASHVILLE, TN 37211	SCAC:	LVL
CID#:		Trailer number:	94934
Customer Phone:		Seal Number	16888120
Freight Charge	(freight charges are prepaid unless marked otherwise)	Prepaid <input type="checkbox"/>	Collect <input type="checkbox"/>
Terms:		3rd Party <input type="checkbox"/>	Customer Pick Up <input type="checkbox"/>

POD INSTRUCTIONS: Carrier FAX (909) 494-4456

Or Email To : Orders@niagarawater.com

Customer Order Information					
Qty	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID
84	2016	84	1	KRG05L24PDRN	05L DR. KROGER, 24P, N. 84, CH
144	5760	144	3	KRG05L40PDRCH N	05L DR. KROGER, 40P, N. 48, CH
Totals					
228	7776	228	4		9145 lbs

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

## CARRIER

CARRIER SIGNATURE/PICKUP DATE

*dexter harris*

Property described above is received in good Order, except as noted.

Print

Name: *dexter harris*

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.

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

## CARRIER INSTRUCTIONS

Driver: Should you encounter any delays preventing the on time delivery of this shipment, please dial 909-230-4486 for assistance.

FACILITY CHECKOUT

Appt Time: 05/21/25 04:00 PM EST  
 Check In Time: 05/21/25 04:52 PM EST  
 Check Out: 05/21/25 06:38 PM EST  
 Delivery Time: 05/21/25 07:00 PM EST

Driver Name: *dexter harris*

Driver Initials: *dexter harris*  
 NBL Initials: \_\_\_\_\_

COD Amount: \$

LTL ONLY

NMFC # CLASS

0

NBL Initials: \_\_\_\_\_



## BILL OF LADING

Date: 05/21/25 06:38 PM EST

## SHIP FROM

Name: LOU  
 Address: 350 Logistics Ave  
 City/State/Zip: Jeffersonville, IN 47130  
 SID#: 58997696

FOB: ☐

Bill of Lading Number: 20954495  
 Master Bill of Lading Number: 58997696  
 Customer PO#: NASH052025542  
 Reference #: NO DRIVER ASSIST  
 Delivery #: 38313060  
 Shipment #: 58997696

## SHIP TO

## CARRIER DETAILS

Name: KROGER DSD  
 Location #:   
 Address: KROGER DSD # 542 61 EAST THOMPSON LANE

City/State/Zip: NASHVILLE, TN 37211

CID#:

FOB: ☐

Customer Phone:

Carrier Name: LIVE LOGISTICS CORP  
 Address: 200 N FAIRWAY DR UNIT 192, VERNON HILLS, IL 60061  
 City/State/Zip: VERNON HILLS IL 60061  
 SCAC: LVL Pro number:  
 Trailer number: 94934  
 Seal Number: 16888120

## Freight Charge

(freight charges are prepaid unless marked otherwise)

Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To: Orders@niagarawater.com

## Customer Order Information

Qty Order	Bottles Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
252	6048	252	3	KRG05L24PDRN		05L.DR.KROGER.24P.N.84. CH	001111049213	7132 lbs
384	15360	384	8	KRG05L40PDRCH N		05L.DR.KROGER.40P.N.48. CH	001111009855	18048 lbs
<b>Totals</b>								
636	21408	636	11					25180 lbs

All overages, under and damage issues/refusals must be populated on this document and communicated via FAX confirmation of POD to (909) 494-4456

Receiving Stamp:

## CARRIER

## CARRIER SIGNATURE/PICKUP DATE

dexter harris

Property described above is received in good Order, except as noted.

Print

Name: dexter harris

If the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Consignor Signature

Date

## FACILITY CHECKOUT

Appt Time: 05/21/25 04:00 PM EST

Check In Time: 05/21/25 04:52 PM EST

Check Out: 05/21/25 06:38 PM EST

Delivery Time: 05/21/25 07:00 PM EST

Driver Name: dexter harris

Driver Initials: dexter harris

NBL Initials:

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.

COD Amount: \$

LTL ONLY

NMFC # CLASS

0

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S.DOT emergency response guidebook or equivalent documentation in the vehicle.

## CARRIER INSTRUCTIONS

Driver: Should you encounter any delays preventing the on time delivery of this shipment. Please dial 909-230-4456 for assistance.