



INVOICE

BILL TO:

FUSION TRANSPORT LLC
4 WESTBROOK CORPORATE CTR SUITE 1020
WESTCHESTER, IL 60154

INVOICE DATE: 06/27/2025**INVOICE #:** R98116**TERMS:** NET 30**DUE DATE:** 07/27/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/25/2025		1881 N NORMANTOWN ROAD, ROMEOVILLE, IL 60446 - 15 11 ZOO PKWY, JACKSONVILLE, FL 32218-0000			
		Freight Income	1	\$2,400.00	\$2,400.00

TOTAL

\$2,400.00

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



Load ID: LD915700 Date: 06/25/2025

CARRIER INFORMATION		FUSION TRANSPORT CONTACT	
CARRIER NAME:	Royal3 Inc	CONTACT NAME:	Tom Roth
CONTACT NAME:	Nikola Stamenkovic	PHONE NUMBER:	
PHONE NUMBER:	6304857370	E-MAIL ADDRESS:	troth@fusiontransport.com
BILL TO (MAILING ADDRESS)		FREIGHT BILL SUMMARY	
BILL TO NAME:	FUSION TRANSPORT	NUMBER OF STOPS	3
CONTACT:	FUSION TRANSPORT	TOTAL MILEAGE:	1019.7
ADDRESS:	301 ROUTE 17 NORTH, 11TH FLOOR	BASE RATE:	\$2,400.00
CITY, STATE, ZIP:	RUTHERFORD, NJ 07070	ACCESSORIAL CHARGES:	\$0.00
E-MAIL ADDRESS:	pod@fusiontransport.com	FUEL SURCHARGE:	\$0.00
PAYMENT TERMS	Third Party	TOTAL	\$2,400.00 USD
SPECIAL INSTRUCTIONS: 0,Comments - APPT Matthew.Kautai@subzero.com / Ralph.Banaban@subzero.com / Matthew.Kautai@subzero.comGeorge.Perez@subzero.com (Cell - 281-389-9946) OR (407-506-7278)3 skids or under - FCFS 2nd number,TOTAL DISTANCE = 568 MI,NA			

1 - PICKUP APPT DATE/TIME: 06/25/2025 16:00 - 06/25/2025 16:00 APPT NUMBER:

NAME:	FUSION TRANSPORT MW WHSE	SHIPMENT ID(S):	SN497877, SN496587, SN496391, SN496088,
ADDRESS:	1881 NORMANTOWN ROAD		SN495602, SN499166,
ADDRESS:			SO497935, SO496645, SO496449, SO496146,
CITY, STATE, ZIP:	ROMEDEVILLE, IL 60446		SO495660, SO499224,
CONTACT:	Warehouse 800-599-2977		
PICKUP INSTRUCTIONS:	Dock Entrance Between Doors 7 & 8		
WEIGHT		10948	

1 - DELIVER APPT DATE/TIME: 06/27/2025 07:00 - 06/27/2025 07:00 APPT NUMBER:

NAME:	SUB ZERO - JACKSONVILLE	SHIPMENT ID(S):	SN499166,
ADDRESS:	1511 ZOO PARKWAY #100		SO499224,
ADDRESS:			
CITY, STATE, ZIP:	Jacksonville, FL 32218		
CONTACT:	407-506-7278		
DELIVERY INSTRUCTIONS:	Comments - APPT		
Matthew.Kautai@subzero.com / Ralph.Banaban@subzero.com /			
Matthew.Kautai@subzero.com			
George.Perez@subzero.com (Cell - 281-389-9946) OR (407-506-7278)			
3 skids or under - FCFS 2nd number			
WEIGHT		2838	

2 - DELIVER APPT DATE/TIME: 06/27/2025 10:30 - 06/27/2025 10:30 APPT NUMBER: 84170296

NAME:	Sam's Club DC 4964	SHIPMENT ID(S):	SN497877, SN496587, SN496391, SN496088,
ADDRESS:	1511 ZOO PKWY		SN495602,
ADDRESS:			SO497935, SO496645, SO496449, SO496146,
CITY, STATE, ZIP:	JACKSONVILLE, FL 32218-0000		SO495660,
CONTACT:			
DELIVERY INSTRUCTIONS:			
WEIGHT		8110	

WARNING: Any unauthorized opening of a Fusion sealed trailer will be treated as a breach of contract and attempted theft. Law enforcement will be notified and formal charges will be pursued, regardless of intent.

Motor Carrier Requirements: (any fraudulent or misleading information will be report to law enforcement)

- Valid United States Commercial Drivers License
- Truck Registration in the name of the carrier booking the load
- Insurance certificate in the name of the carrier booking the load
- Name and MC/DOT visible on truck must match carrier booking the load
- Load number required at pick up

MacroPoint Tracking: ALL drivers MUST download the MacroPoint application on their phone prior to picking up a Fusion loads. Noncompliance will result in driver not being loaded.

Proof of Delivery: All Proofs of Delivery (POD) documents are required **within 24 hours of delivery**. Walmart Trailer Control Report (TCR), Target Delivery Manifest and/or stamped receiving documents are required on EVERY LOAD.

PODS@FusionTransport.com

Walmart PULL & FAX Program:

- Drivers delivering to Walmart can request a Pull & Fax. Walmart will unload the trailer in less than 2 hours and release the driver with a trailer control record only. Walmart will then fax the proof of delivery documents to PODS@FusionTransport.com.

Load Tracking: Fusion requires carrier to provide TWO check calls each day by 9:30 AM EST and 3:00 PM EST until the load is delivered.
Call 201-251-7333 or email

TRACING@FusionTransport.com

Accessorials: No accessorial charges will be paid without prior approval from a Fusion employee in the form of an updated rate confirmation.

- **Detention:** Carrier must notify their Fusion representative at least thirty minutes prior to detention starting. Detention is paid after the first two hours from the Appointment time provided the driver arrived on time for appointment, at rate of \$40 per hour in 15-minute increments. If Carrier arrived more than 15 minutes past the noted appointment time, no Detention will be approved. Max daily detention (Layover) is \$250 per day.

Fines:

- Tracking: Failure to provide timely and accurate check calls may result in a fine up to **\$150 per day**.
- Appointment Failure: If you deliver early or late or change the delivery appointment without prior approval from Fusion, you will be subject to a **\$250 fine**.
- MacroPoint: Unauthorized disconnection of MacroPoint will result in a **\$250 fine**.

CARRIER MUST SIGN THIS LOAD AGREEMENT AND RETURN BY EMAIL

- Additionally, if you received the Load Confirmation by email from our TMS, you can click the "Accept" link on the email to e-sign this confirmation.

Authorized Carrier Signature: Samm Stanojevic Date: _____

Carrier named above represents it has read and approves the terms & conditions listed and that it is acting as a licensed Motor Carrier and not as a BROKER for this load. The driver will be required to present vehicle registration and insurance coverage at time of pickup to prove that the truck is registered to the carrier named above. Failure to provide proof of carrier status will result in immediate cancellation of this agreement. All terms and conditions outlined in the carrier onboarding agreement apply.

Trailer Control Record

DC#: 4964

TCR: ebaa3560-2d9d-4fc0-abad-499084dcf2e9

Trailer Number
5260129

Carrier
GEXW

Delivery Number
84170296

Appointment Time
06/27/2025 10:30

Arrival Date
06/27/2025 09:08:44

Arrival Information

Inbound Seal #: NS

Intact: Y

Load ID#: 0

Inbound Seal Condition:

AP Associate: trd001h

Comments: ns

Sealed at Gate: N

Current Seal #: NS

Delivery

Cases:

Total: 215

Receiving Dock

Door #: 137

Unloader:

Driver Arrival at Window: 06/27/2025 09:19

Assigned by:

Unload Start Time:

Closed by:

Unload End Time:

Paperwork Available at Window:

Receiving Office

Drop: N

Driver Unload:

Commodity: SAXD

Tractor #: 755

Return/Transfer

Trailer Empty: N

Return Contents:

Description:

Reason:

Seal Information

Seal Number: NS

Sealed By: trd001h

Receiving Office

Trailer Resealed By: trd001h

Outbound Information

AP Associate:

D/T:

Outbound Seal #:

Door Change Log

Timestamp

06/27/2025 09:40:24

Event

Location updated to door 4964 - 137

User

r000000

137

Driver
Copy



Equip ID: 5260129

Status: SA

Equip Arrival: 06/27/25 09:08

Temp1:

Carrier: GEXW

Temp2:

Seal: NS

Temp3:

Reseal:

Fuel Lvl:

Door/Zone: APPOINTMENT

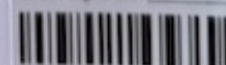
Dept: SAXD

Del Date: 06/27/25 10:30

Type: 53

I have read and understand the posted copy of Wal-Mart's
Appointment / Drop Rules and Regulations

Driver Signature:



Delivery: 84170296

DC: 4964

Date: 2025-06-20

BILL OF LADING

Page 1

SHIP FROM BROAN-NUTONE LLC 1307 WACKER DRIVE Hartford, WI 53027		Bill of Lading Number: 1036898577  (402) 1036898577	
SHIP TO SUB-ZERO GROUP SE (BEST) 1511 ZOO PARKWAY BLDG #100 JACKSONVILLE, FL 32235		Carrier Name: CLGP-COMLETE Transport Equipment 221904 Seal number(s): 8399402	
THIRD PARTY FREIGHT CHARGES BILL TO: By: <i>[Signature]</i> Fusion Transport		SCAC: CLGP Pro Number: 11513  (9012K) 11513	
SPECIAL INSTRUCTIONS: ** EMAIL 24 HRS BEFORE DEL TO FLWAREHOUSE@SUBZERO.COM		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)		ADDITIONAL SHIPPER INFO
P779161/BT58911 008	110	2838.00	Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	110	2838.0			

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT(LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
						Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360	NMFC #	CLASS
QTY	TYPE	QTY	TYPE					
12	Pallet(s)	110	Case(s)	2838.00		MISCELLANEOUS PARTS, HARDWARE, NO, IN BOXES/PKGS (8 BUT LESS THAN 10#/CFT)	95190-06	100
12		110		2838.0		GRAND TOTAL		

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 _____.

COD Amount: \$

Fee Terms:

Collect: ☐Prepaid: ☐Customer check acceptable: ☐

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:

☒ By Shipper☐ By Driver

Freight Counted:

☒ By Shipper☐ By Driver/pallets said to contain☐ 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.

FROM:

EASTERN LIGHTING MDC
1520 LAUDERDALE HWY
Charleston, TN 37310

06/18/25

Packing List

SHIP TO:

SAM'S CLUB DC 4964
1511 ZOO PARKWAY
JACKSONVILLE, FL 32218

PACKING LIST# : 00-52316606
PRO# :
CUSTOMER P/O # : 5282278246
CUSTOMER A/C # : 0080072133
CONFIRMATION # : 0001212551
CSR : None

VIA CARRIER : FTQR

Page 1 of 1

Cust Order Line	Product Ordering Code	Product Description	Volts	Units in less than Std Pkg	Number of Packages	Total Quantity Shipped
0010	93129357	LED9DR30EG-4/STP CPN=980120516 LIN=00001		0	10 CS ---- 12 EACH / CS	120
0020	93129134	LED15DA19/SWPW-S4/TP CPN=980297996 LIN=00002		0	1 CS ---- 24 EACH / CS	24
0030	93129774	LED9DR30EG5K-STP4 CPN=980303241 LIN=00003		0	15 CS ---- 12 EACH / CS	180
0040	93129175	LED10DA19/SWPW-S12/TP CPN=980314638 LIN=00004		0	15 CS ---- 16 EACH / CS	240
0050	93129176	LED10DA19/DLPW-S12/TP CPN=980314639 LIN=00005		0	24 CS ---- 16 EACH / CS	384

MABD: 062625-062725

SHIP: 061925

CANCEL: 062225

DEPT00063

TYPE0020

POS REPLEN

TOTALS THIS PAGE
TOTALS THIS ORDER

0-LESS THAN STD PKG
0-LESS THAN STD PKG

65-STD PKGS
65-STD PKGS

948-QTY SHIPPED
948-QTY SHIPPED

BILL OF LADING

Page: 1

Date: 6/19/25 10:06

SHIP FROM:

Name: KIND Snacks
Address: 1485 Couchville Pike

TN 37122

City/State/Zip: Mt Juliet

PO #: 000056110

FOB: ☐

SHIP TO:

Name: Sam's Club - Jacksonville, FL
Address: 1511 ZOO PKWY

City/State/Zip: JACKSONVILLE FL 32218

PO #

Phone

Attention:

THIRD PARTY FREIGHT CHARGES BILL TO:

Uber Freight C/O KIND
PO Box 425

City/State/Zip: Lowell AR 72745
Attention: Accounts Payable

Bill of Lading Number: 00000000907909762



**** Top Freight ****

CARRIER NAME: Fusion Transport

Trailer number: 55192

Seal number(s): UL-5441419

SCAC: FTQR

PRO NUMBER: 907909762



Freight Charge Terms:

Prepaid

☐ Master Bill of Lading: with attached underlying Bills of Lading.

REQUIRED Delivery Date: 06/27/2025

SPECIAL INSTRUCTIONS: SHIPPED ON 0 CHEP PALLETS NO EXCHANGE

Master Bill of Lading Number:

Additional Stop:

**** Carrier required to schedule delivery appointment ****

**** Drivers are not permitted to break trailer seals ****

DRY. NO Reefer Required

KIND Finished product may only ship with food items and is prohibited from shipping with hazardous materials, chemicals, breakables and odor transmitted materials.

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
4433403506	8	4837	Y N	000056110 1731497
GRAND TOTAL	8	4837		

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE		NMFC # CLASS
8	plts	8	ctns	4837	72045 65
8		8		4837	

Walmart

PULL & FAX REQUIRED

F: 201-331-0038

E: pods@fusiontransport.com

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 _____"

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐

Customer check acceptable: ☐

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.

of Pallets

of Cartons

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

Consignee Signature / Date

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:
☒ By Shipper
☐ By Driver

Freight Counted:

☒ By Shipper
☐ By Driver / pallets said to contain
☐ 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.

Amber Clayborn

6-19-25

Date: 06/17/2025

BILL OF LADING

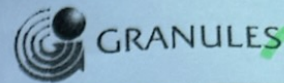
Page 1

Name: GRANULES CONSUMER HEALTH LLC
Address: 7413 CUSHING ROADContact: MANASSAS, VA 20109
SHIP FROM
SHIP Date: 06/17/2025
SAM'S MDC 4964
PO# _____ TR# _____
PLTS _____ FOB: ☐

Special Instructions:

Name: SAMS DC # 4964
Address: 1511 ZOO PARKWAY
JACKSONVILLE, FL 32218
SHIP TO
Due Date: 06/27/2025
DAMAGE KEPT REC'D BY _____ DATE _____
Special Instructions: APPT REQ'D FACILITY ON ALL POs on BOLs APPT REQ'D FACILITY ON ALL POs on BOLs
FOB: ☐

Bill of Lading Number: 3905614



CARRIER NAME: FUSION TRANSPORT LLC

Trailer number:

Seal number(s):

Pro: 1800560

SCAC: FTQR

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)
Prepaid ☒ Collect _____ 3rd Party _____ Prepaid+Add _____

Master Bill of Lading: with attached underlying Bills of Lading

Name: Granules Consumer Health, LLC c/o TranzAct Technologies
360 WEST BUTTERFIELD ROAD, SUITE 400
Elmhurst, IL 60126
FREIGHT CHARGES BILL TO:

Order #	# PKGS	WEIGHT	LOT NUMBER	PO NUMBER
60062209	0	0 lbs		5282278160
60062209	40	645 lbs	1770165A	5282278160
60062209	2	37 lbs	1770170A	5282278160
60062209	63	665 lbs	1831417A	5282278160
PALLETS	0	80 lbs		
GRAND TOTAL	105	1427 lbs		

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
0	PALLET-CON	63		665 lbs		SC_APAP CAPSTWN PK-650MG-2X200CT	58770	77.5
0	PALLET-CON	0		0 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X600CT	58770	77.5
0	PALLET-CON	40		645 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X600CT	58770	77.5
0	PALLET-CON	2		37 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X600CT	58770	77.5
1	PALLETS	0		40 lbs		PALLETS, 48 X 40 X 48	58770	77.5
1	PALLETS	0		40 lbs		PALLETS, 48 X 40 X 50	58770	77.5
2		105		1427 lbs		GRAND TOTAL		

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 _____.

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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.

Signature _____

Shipper

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 United States Department of Transportation.

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☐ 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 documentation in the vehicle.

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

http://www.vics.org

Powered By

TranzAct
Technologies Inc.
Logistics Management Solutions

Date: 6/18/2025

Non-negotiable BILL OF LADING

Page 1

SHIP FROM
EASTERN LIGHTING MDC
1520 LAUDERDALE HWY
Charleston, TN 37310

Bill of Lading

46381070487



FOB:

SHIP TO
SAM'S CLUB DC 4964
1511 ZOO PARKWAY
JACKSONVILLE, FL 32218

Location #:

FOB:

Carrier

FTQR

Transport

531950 - 0619FTQRE003

Seal number(s):

4947392

SCAC:

FTQR

Pro Number:

6/26/25 -TO- 6/27/25

This load must be scheduled and "dropped" within this window.
Fines will be assessed to Carrier for both early & late delivery. If
you're unable to comply for any reason have your Dispatch
contact 423-780-7921

SPECIAL INSTRUCTIONS: 000431680079220 Underlying Bill
of Lading Numbers: 46381070487, 46381070482,
46381070486, 46381070483.

Freight Charge

(freight charges are prepaid unless marked
otherwise)Prepaid ☒

Collect

3rd Party

☐
(check box)Master Bill of Lading: with attached underlying Bills of
Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT()	Pallet/Slip (Circle One)	TMS Load ID	ADDITIONAL SHIPPER INFO
5282278246	65	1160.27	Y N	518836119	
	0	0.00	Y N		5- 4ft Pallets
	0	0.00	Y N		
	0	0.00	Y N		
	0	0.00	Y N		
GRAND TOTAL	65	1160			
TOTAL WEIGHT INCL		1385			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT()	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(c) of NMFC Item 300		NMFC #	CLASS
40	Cases	40	Cases	872.52		LIGHTBULBS (LIGHT BULBS)		109850	110
25	Cases	25	Cases	287.75		LIGHTBULBS (LIGHT BULBS)		109850	250
0		0		0.00					
0		0		0.00					
0		0		0.00					
65		65		1160		GRAND TOTAL			
				1385		TOTAL WEIGHT INCL PLATFORM			

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 _____."

COD Amount:

Fee Terms:

Collect: ☐Prepaid: ☐Customer check acceptable: ☐

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.

Signature

Shipper

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:

☒ By Shipper☐ By Driver

Freight Counted:

☒ By Shipper☐ By Driver/pallets said to☐ 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.

Kimberly Gibson 6/18/2025 10:43:52 AM

EDWARD HUSTED 6/18/2025 10:53:37 AM

Trailer Control Record

DC#: 4964

TCR: ebaa3560-2d9d-4fc0-abad-499084dcf2e9

Trailer Number

5260129

Carrier

GEXW

Delivery Number

84170296

Appointment Time

06/27/2025 10:30

Arrival Date

06/27/2025 09:08:44

Arrival Information

Inbound Seal #: NS

Intact: Y

Load ID#: 0

Inbound Seal Condition:

AP Associate: trd001h

Comments: ns

Sealed at Gate: N

Current Seal #: NS

Delivery

Cases:

Total: 215

Receiving Dock

Door #: 137

Unloader:

Driver Arrival at Window: 06/27/2025 09:19

Assigned by:

Unload Start Time:

Closed by:

Unload End Time:

Paperwork Available at Window:

Receiving Office

Drop: N

Driver Unload:

Commodity: SAXD

Tractor #: 755

Return/Transfer

Trailer Empty: N

Return Contents:

Description:

Reason:

Seal Information

Seal Number: NS

Sealed By: trd001h

Receiving Office

Trailer Resealed By: trd001h

Outbound Information

AP Associate:

D/T:

Outbound Seal #:

Door Change Log

Timestamp

06/27/2025 09:40:24

Event

Location updated to door 4964 - 137

User

r3a0dms



Equip ID: 5260129

Equip Arrival: 06/27/25 09:08

Carrier: GEXW

Seal: NS

Reseal:

Door/Zone: APPOINTMENT

Del Date: 06/27/25 10:30

Status: SA

Temp1:

Temp2:

Temp3:

Fuel Lvl:

Depl: SAXD

Type: 53

I have read and understand the posted copy of Wal-Mart's
Appointment / Drop Rules and Regulations

Driver Signature: _____



Delivery: 84170296

DC: 4964

BILL OF LADING

Page 1 / 1

SHIP FROM

HARMAN C/O ARVATO SCS
3540 S PRESTON HIGHWAY
SHEPHERDSVILLE, KY, 40165

Bill of Lading Number: 3779452981



Fusion 3Day

SHIP TO

SAMS DISTRIBUTION CENTER
1511 ZOO PKWY
JACKSONVILLE, FL 32218
877-871-6755

CARRIER NAME: Fusion Transport
Trailer number: 7110
Seal number(s): 0084-5313
Load number: 7110

THIRD PARTY FREIGHT CHARGES BILL TO:

SCAC: GLBL Shipment no: 6000389517
Conv. #: PRO number: 1062018



SPECIAL INSTRUCTIONS:

Delivery Dates: 06/26/2025 - 06/27/2025

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect ☐ 3rd Party ☐
Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

PO NUMBER	# PKGS	WEIGHT	Pallet/Slip	ADDITIONAL SHIPPER INFO
5282278179	36	294 LBS	Y	DN #: 0815034038 - 3779452981 SAMS MDC 4964

DELIVERY # 84170296 TR# 526029

PO# MUIH PLTS

TOTAL RECEIVED 215

OVER 0 SHORT 0

DAMAGE KEPT 0 ROG DAMAGE 0

GRAND TOTAL 36 294 LBS

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT / HEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
1	PALLET	36	CARTON	294 LBS / 75 IN		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.	62420	125

1 36 294 LBS GRAND TOTAL

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 _____.

COD Amount: \$
Fee Terms: ☐ Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B). The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

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. Arvato Digital Services Inc. is not responsible for any charges above and beyond the rates based on weight or mileage as listed on the tariff agreement between the carrier and Arvato Digital Services Inc. Accessorial charges which may include but are not limited to appointment delivery, lift-gate service, beyond delivery, inside delivery fees, etc. must be PRE-AUTHORIZED by calling 1-800-677-6883 and obtaining an authorization number prior to billing.

Signature _____ Shipper

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 Department of Transportation.

Trailer Loaded Freight Counted
☒ By Shipper ☒ By Driver
☐ By Driver ☐ By Driver / pallets said to contain
☐ By Driver / Pieces

CARRIER SIGNATURE / PICKUP DATE
Carrier acknowledges receipt of packages and 06/18/25 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.

Harman Shipping Office
E-signed 2025-06-18 10:06AM EDT
Tech 003563 uc lvi 05 chinning hnl@arvato-scs.com



CARRIER NAME:
CONTACT NAME:
PHONE NUMBER:
FAX NUMBER:

CARRIER INFORMATION

Load ID:
LD915700

LOAD SUMMARY
NUMBER OF DROPS: 2
SHIP DATE: 06/24/2025 12:00 - 06/24/2025 12:00
TOTAL PALLET POSITIONS: 29
TRAILER: 10948 lb
TOTAL WEIGHT:

Load Manifest
NOT TO BE USED AS A BOL OR FOR A POD
Date: 06/23/2025

Owner: Rola 13
Date: 6-25-25
Trailer #: 10948
Driver: Kyleon Lewis

#	Drop Location	Appt Date/No	Special Instructions						
1	Sam's Club DC 4964 1511 ZOO PKWY JACKSONVILLE, FL 32218-0000	06/27/2025 10:30 84170296	40m2						
Customer		Shipment ID	Order No	PO No	BOL No	Shipping Order No	Pallet Pos	Quantity	Weight
KIND SNACKS		SN495602	907909762	4433403506		SO495660	8	8	4.837
MOUNT JULIET, TN (JACKSONVILLE, FL)						SO496146		1	10
AX BEAUTY BRANDS Somerset, NJ (JACKSONVILLE, FL)		SN496088	WS32072	8032326808				1	167
HARMAN SHEPHERDSVILLE, KY (Jacksonville, FL)		SN496391	3779452981	5282278179	0815034038 3779452981	SO496449		1	36
GRANULES CONSUMER HEALTH MANASSAS, VA (JACKSONVILLE, FL)		SN496587	3905614	5282278160		SO496645		2	105
SAVANT LIGHTING Charleston, TN (JACKSONVILLE, FL)		SN497877	518836119	5282278246		SO497935		5	65
									1,385
#	Drop Location	Appt Date/No		Special Instructions					
2	SUB ZERO - JACKSONVILLE 1511 ZOO PARKWAY #100 Jacksonville, FL 32218	06/27/2025 07:00		New 2nd					
Customer		Shipment ID	Order No	PO No	BOL No	Shipping Order No	Pallet Pos	Quantity	Weight
COMPLETE LOGISTICS HARTFORD, WI (Jacksonville, FL)		SN499166	11513	P779161	10368985777	SO499224	12	12	2,838

BILL OF LADING

Page 1

Date: 06/17/2025

SHIP FROM

Ship Date: 06/17/2025

Name: GRANULES CONSUMER HEALTH LLC
Address: 7413 CUSHING ROAD
MANASSAS, VA 20109

FOB: ☐

Contact: ..

SHIP TO

Due Date: 06/27/2025

Name: SAMS DC # 4964
Address: 1511 ZOO PARKWAY
JACKSONVILLE, FL 32218

FOB: ☐

Special Instructions: APPT REQ'D FACILITY ON ALL POs on BOLs APPT REQ'D FACILITY ON ALL POs on BOLs

Special Instructions:

FREIGHT CHARGES BILL TO:

Name: Granules Consumer Health, LLC c/o TranzAct Technologies
360 WEST BUTTERFIELD ROAD, SUITE 400
Elmhurst, IL 60126

Bill of Lading Number: 3905614



GRANULES

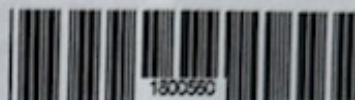
CARRIER NAME: FUSION TRANSPORT LLC

Trailer number:

Seal number(s):

SCAC: FTQR

Pro: 1800560



Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect ☐ 3rd Party ☐ Prepaid+Add ☐

☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

Order #	# PKGS	WEIGHT	LOT NUMBER	PO NUMBER
60062209	0	0 lbs		5282278160
60062209	40	645 lbs	1770165A	5282278160
60062209	2	37 lbs	1770170A	5282278160
60062209	63	665 lbs	1831417A	5282278160
PALLETS	0	80 lbs		
GRAND TOTAL	105	1427 lbs		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
0	PALLET-COR	63		665 lbs		SC_APAP CAPSTWN PK-650MG-2X200CT	58770	77.5
0	PALLET-COR	0		0 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X500CT	58770	77.5
0	PALLET-COR	40		645 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X500CT	58770	77.5
0	PALLET-COR	2		37 lbs		SC_APAP CAPLET TWIN PACK -500MG-2X500CT	58770	77.5
1	PALLETS	0		40 lbs		PALLETS, 48 X 40 X 48	58770	77.5
1	PALLETS	0		40 lbs		PALLETS, 48 X 40 X 50	58770	77.5
2		105		1427 lbs		GRAND TOTAL		

When 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

COD Amount: \$

Fee Terms: Collect: ☐ Prepaid: ☐

Customer check acceptable: ☐

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

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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

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

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 United States Department of Transportation.

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

Signature: [Signature]
http://www.vds.org

06/17/25

Powered By


TranzAct Technologies Inc.

Logistics Management Solutions

BILL OF LADING

KL

priority 

Reference				PRO				
BOL: 60110885367 Pickup Date: 6/19/2025 12:00 PM - 3:00 PM Delivery Window: 8:00 AM - 5:00 PM PO: 8032326808 Sales Order: WS32072 Carrier: Fusion Transport, FTQR <div style="text-align: center;"></div>				AFFIX PRO STICKER HERE				
				Origin Terminal				
				Phone:				
				Destination Terminal				
Phone:								
Shipper				Consignee				
AX BEAUTY % 60 JIFFY RD Somerset, NJ 08873 P: +1 (310) 523-2888				Sam's 4964 1511 Zoo Pkwy Jacksonville, FL 32218 Receiving P: +1 (904) 696-8842 Alt:				
3rd Party Bill To				Freight Terms				
AX Beauty c/o Priority1 P.O. Box 398 North Little Rock, AR 72115 P: +1 (501) 487-6420				<input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party				
Special Instructions: Pick up instructions: FUSION. Delivery instructions: *****6/27/25 MABD*****				Accessories:				
Units	Type	Pieces	Weight	Dimensions	HM	Item Description	NMFC	Class
1	Pallet	10	167 lbs	40" x 48" x 14" (in)		NTW Coconut Cream 16 oz Replen (1 trays, 120 units)	59420-3	70
1		10	167 lbs				Grand Totals	
<small>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 _____."</small>								
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. Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).						Trailer Loaded Shipper <input type="checkbox"/> Driver <input type="checkbox"/>		Freight Counted Shipper <input type="checkbox"/> Driver <input type="checkbox"/>
The Carrier shall not make delivery of this shipment without payment of and all other lawful charges. Shipper: _____								
Shipper Signature / Date						Carrier Signature / Pickup Date		
Shipper: <div style="text-align: center; font-size: 1.2em;">ALB 6/19/25</div>						Carrier: _____		
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 Department of Transportation.						Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.		

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 Department of Transportation.

Jason Clayton



SHIP FROM:
KIND Snacks
1485 Couchville Pike
Mt Juliet, TN 37122

Pack List *KL*
Order # 1731497

SHIP TO:

Sam's Club - Jacksonville, FL
1511 ZOO PKWY
JACKSONVILLE, FL 32218

Order Info

ERP Order 1731497	Order Date 06/16/25	Ship Date	Freight Terms Prepaid		
Customer PO 4433403506	Wave # 202506160036	Carrier Fusion Transport	Carrier Service Less than Truck Load		
SKU	CUST SKU	SKU Description	Ordered Qty	Ship Qty	Weight(LBS)
67053	990390292	MIN DCNSS PBDC CASS 32ct PL	5		
Lot: 524AA4CCL5		Expire Date: 06/25/2026		1	0
524BA4CCL5		06/25/2026		4	0
67108	990396746	KBF DCC PBBDC 18ct Pallet	3		
Lot: 514EA4CCL90		Expire Date: 02/27/2026		3	0
TOTALS:		SKUs: 2	Pallets: 8	Cartons: 8	Weight: 4837 (LBS)

Notes

Tracking Numbers

Date: 2025-06-20

BILL OF LADING

Page 1

SHIP FROM
BROAN-NUTONE LLC
1307 WACKER DRIVE
Hartford, WI 53027

SHIP TO
SUB-ZERO GROUP SE (BEST)
1511 ZOO PARKWAY BLDG #100
JACKSONVILLE, FL 32218

RECEIVED

THIRD PARTY FREIGHT CHARGES BILL TO:

JUN 20 2025

By: *[Signature]*
Fusion Transport

SPECIAL INSTRUCTIONS: ** EMAIL 24 HRS BEFORE DEL TO
FLWAREHOUSE@SUBZERO.COM

Bill of Lading Number: 1036898577



(402) 1036898577

Carrier Name: CLGP-COMLETE

Transport Equipment 221904

Seal number(s): 8399402

SCAC: CLGP

Pro Number: 11513



(9012K) 11513

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒

Collect ☐

3rd Party ☐

☐
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LB)	Pallet/Slip (Circle One)		ADDITIONAL SHIPPER INFO
P779161/BT58911 008	110	2838.00	Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	110	2838.0			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional 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
12	Pallet(s)	110	Case(s)	2838.00		MISCELLANEOUS PARTS, HARDWARE, NOI, IN BOXES/PKGS (8 BUT LESS THAN 10#/CFT)	95190-06	100
						<i>Antonio Walker</i>		
						<i>Antonio Walker 6-27-25</i>		
12		110		2838.0		GRAND TOTAL		

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 _____."

COD Amount: \$

Fee Terms:

Collect: ☐

Prepaid: ☐

Customer check acceptable: ☐

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:

☒ By Shipper

☐ By Driver

Freight Counted:

☒ By Shipper

☐ By Driver/pallets said to contain

☐ 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.

KL **BILL OF LADING**

Page 1 / 1

Date: 06/18/2025

SHIP FROM

Name: HARMAN C/O ARVATO SCS
Address: 3540 S PRESTON HIGHWAY
City/State/Zip: SHEPHERDSVILLE, KY, 40165

FOB: ☐

Bill of Lading Number: 3779452981



Fusion 3Day

SHIP TO

Name: SAMS DISTRIBUTION CENTER 877-871-8755
Address: 1511 ZOO PKWY
City/State/Zip: JACKSONVILLE, FL 32218

FOB: ☐

CARRIER NAME: Fusion Transport

Trailer number: 7110

Seal number(s): 0084-5313

Load number: 7110

SCAC: GLBL Shipment no: 6000389517

Conv. #:

PRO number: 1062018



THIRD PARTY FREIGHT CHARGES BILL TO:

Name:

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Delivery Dates: 06/26/2025 - 06/27/2025

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect ☐ 3rd Party ☐

☐ Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

PO NUMBER	# PKGS	WEIGHT	Pallet/Slip	ADDITIONAL SHIPPER INFO
5282278179	36	294 LBS	Y	DN #: 0815034038 - 3779452981 159 PC

GRAND TOTAL 36 294 LBS

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT / HEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
1	PALLET	36	CARTON	294 LBS / 75 IN		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.	62420	125

1 36 294 LBS GRAND TOTAL

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 _____.

COD Amount: \$

Fee Terms: ☐ Collect: ☐ Prepaid: ☐

Customer check acceptable: ☐

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, Arvato digital services Inc is not responsible for any charges above and beyond the rates based on weight or mileage as listed on the tariff agreement between the carrier and Arvato digital services Inc. Accessorial charges which may include but are not limited to appointment delivery, lift-gate service, beyond delivery, inside delivery fees, etc. must be PRE-AUTHORIZED by calling 1-800-677-6883 and obtaining an authorization number prior to billing.

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

Signature _____ Shipper

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 Department of Transportation.

Trailer Loaded

☒ By Shipper
☐ By Driver

Freight Counted

☒ By Shipper
☐ By Driver / pallets said to contain
☐ By Driver / Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and 06/18/25 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:

Harman Shipping Office

E-signed 2025-06-18 10:06AM EDT

tech 003563 us lui 05 chinning hnl@arvato-scs.com

Non-negotiable BILL OF LADING

Page 1

Date: 6/18/2025

SHIP FROM

EASTERN LIGHTING MDC
1520 LAUDERDALE HWY
Charleston, TN 37310

FOB:

SHIP TO

SAM'S CLUB DC 4964
1511 ZOO PARKWAY
JACKSONVILLE, FL 32218

Location #:

FOB:

Bill of Lading

46381070487



Carrier

FTQR

Transport

531950 - 0619FTQRE003

Seal number(s):

4947392

SCAC:

FTQR

Pro Number:

6/26/25 -TO- 6/27/25

This load must be scheduled and "dropped" within this window.
Fines will be assessed to Carrier for both early & late delivery. If
you're unable to comply for any reason have your Dispatch
contact 423-780-7921

SPECIAL INSTRUCTIONS: 000431680079220 Underlying Bill
of Lading Numbers: 46381070487, 46381070482,
46381070486, 46381070483,

Freight Charge

(freight charges are prepaid unless marked
otherwise)

Prepaid ☒

Collect ☐

3rd Party ☐

☐
(check box)

Master Bill of Lading: with attached underlying Bills of
Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT()	Pallet/Slip (Circle One)	TMS Load ID	ADDITIONAL SHIPPER INFO
5282278246	65	1160.27	Y N	518836119	
	0	0.00	Y N		5- 4ft Pallets
	0	0.00	Y N		
	0	0.00	Y N		
	0	0.00	Y N		
GRAND TOTAL	65	1160			
TOTAL WEIGHT INCL		1385			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT ()	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional 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	NMFC #	CLASS
40	Cases	40	Cases	872.52		LIGHTBULBS (LIGHT BULBS)	109850	110
25	Cases	25	Cases	287.75		LIGHTBULBS (LIGHT BULBS)	109850	250
0		0		0.00				
0		0		0.00				
0		0		0.00				
65		65		1160		GRAND TOTAL		
				1385		TOTAL WEIGHT INCL PLATFORM		

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 _____"

COD Amount:

Fee Terms:

Collect: ☐

Prepaid: ☐

Customer check acceptable: ☐

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

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.

Edward Husted

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:

☒ By Shipper

☐ By Driver

Freight Counted:

☒ By Shipper

☐ By Driver/pallets said to

☐ By Driver/Pieces

Kimberly Gibson 6/18/2025 10:43:52 AM

EDWARD HUSTED 6/18/2025 10:53:37 AM

KL

Pack List

Order # 1731497

KIND

SHIP FROM:
KIND Snacks
1485 Couchville Pike

Mt Juliet, TN 37122

SHIP TO:
Sam's Club - Jacksonville, FL
1511 ZOO PKWY

JACKSONVILLE, FL 32218

Order Info

ERP Order 1731497	Order Date 06/16/25	Ship Date	Freight Terms Prepaid		
Customer PO 4433403506	Wave # 202506160036	Carrier Fusion Transport	Carrier Service Less than Truck Load		
SKU	CUST SKU	SKU Description	Ordered Qty	Ship Qty	Weight(LBS)
67053	990390292	MIN DCNSS PBDC CASS 32ct PL	5		
Lot: 524AA4CCL5 Expire Date: 06/25/2026				1	0
524BA4CCL5 06/25/2026				4	0
67108	990396746	KBF DCC PBBDC 18ct Pallet	3		
Lot: 514EA4CCL90 Expire Date: 02/27/2026				3	0
TOTALS:		SKUs: 2	Pallets: 8	Cartons: 8	Weight: 4837 (LBS)


Notes

Tracking Numbers

BILL OF LADING

KL

priority 

Reference		PRO						
ROL: 60110885367 Pickup Date: 6/19/2025 12:00 PM - 3:00 PM Delivery Window: 8:00 AM - 5:00 PM PO: 8032326808 Sales Order: WS32072 Carrier: Fusion Transport, FTQR		AFFIX PRO STICKER HERE						
		Origin Terminal						
		Phone:						
		Destination Terminal						
Shipper		Consignee						
AX BEAUTY % 60 JIFFY RD Somerset, NJ 08873 P: +1 (310) 523-2888		Sam's 4964 1511 Zoo Pkwy Jacksonville, FL 32218 Receiving P: +1 (904) 696-8842 Alt:						
3rd Party Bill To		Freight Terms						
AX Beauty c/o Priority1 P.O. Box 398 North Little Rock, AR 72115 P: +1 (501) 487-6420		<input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party						
Special Instructions: Pick up instructions: FUSION. Delivery instructions: *****6/27/25 MABD*****.		Accessorials:						
Units	Type	Pieces	Weight	Dimensions	HM	Item Description	NMFC	Class
1	Pallet	10	167 lbs	40" x 48" x 14" (in)		NTW Coconut Cream 16 oz Replen (1 trays, 120 units)	59420-3	70
1		10	167 lbs				Grand Totals	
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 ____."								
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. Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B).						Trailer Loaded Shipper <input type="checkbox"/> Driver <input type="checkbox"/>	Freight Counted Shipper <input type="checkbox"/> Driver <input type="checkbox"/>	The Carrier shall not make delivery of this shipment without payment of and all other lawful charges. Shipper: _____
Shipper Signature / Date						Carrier Signature / Pickup Date		
Shipper: <u>ALB 327.4 6-19-25</u>						Carrier: _____		
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 Department of Transportation.						Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.		

BILL OF LADING

Page: 1

Date: 6/19/25 10:06

SHIP FROM:

Name: KIND Snacks
Address: 1485 Couchville Pike
City/State/Zip: Mt Juliet TN 37122
SID #: 000056110

FOB: ☐

Bill of Lading Number: 00000000907909762



** Top Freight **

CARRIER NAME: Fusion Transport
Trailer number: 55192
Seal number(s): UL-5441419

SCAC: FTQR
PRO NUMBER: 907909762



SHIP TO:
Name: Sam's Club - Jacksonville, FL
Address: 1511 ZOO PKWY
City/State/Zip: JACKSONVILLE FL 32218
CID #:
Phone #:
Attention #:

Freight Charge Terms:

Prepaid

☐ Master Bill of Lading: with attached underlying
(check box) Bills of Lading.

REQUIRED Delivery Date: 06/27/2025

THIRD PARTY FREIGHT CHARGES BILL TO:

Name: Uber Freight C/O KIND
Address: PO Box 425
City/State/Zip: Lowell AR 72745
Attention: Accounts Payable

SPECIAL INSTRUCTIONS: SHIPPED ON 0 CHEP PALLETS NO EXCHANGE

Master Bill of Lading Number:
Additional Stop:

KIND Finished product may only ship with food items
and is prohibited from shipping with hazardous
materials, chemicals, breakables and odor transmitted
materials.

** Carrier required to schedule delivery appointment **
- ** Drivers are not permitted to break trailer seals **

DRY. NO Reefer Required

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
4433403506	8	4837	Y N	000056110 1731497
GRAND TOTAL	8	4837		

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 380</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
8	plts	8	plts	4837		Walmart	72045	65
8						GRAND TOTAL		

DELIVERY # _____
PO# _____
TOTAL RECEIVED _____
OVER _____ SHORT _____
DAMAGE KEPT _____ ROC DAMAGE _____

Walmart
PULL & FAX REQUIRED
F: 201-331-0038
E: pods@fusiontransport.com

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 _____.

COD Amount: \$ _____

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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.

of Pallets _____

of Cartons _____

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

Consignee Signature / Date

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:

☒ By Shipper
☐ By Driver

Freight Counted:

☒ By Shipper
☐ By Driver / pallets said to contain
☐ 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.

Amber Clayborn

6-19-25

112

Packing List

06/18/25

FROM: EASTERN LIGHTING MDC
1520 LAUDERDALE HWY
Charleston, TN 37310

SHIP TO: SAM'S CLUB DC 4964
1511 ZOO PARKWAY
JACKSONVILLE, FL 32218

PACKING LIST#: 00-52316606
PRO#: 5282278246
CUSTOMER P/O #: 0080072133
CUSTOMER A/C #: 0001212551
CONFIRMATION #: None
CSR: FTQR
VIA CARRIER: FTQR

Page 1 of 1

Inst Order Line	Product Ordering Code	Product Description	Volts	Units in less than Std Pkg	Number of Packages	Total Quantity Shipped
0010	93129357	LED9DR30EG-4/STP CPN=980120516 LIN=00001		0	10 CS ---- 12 EACH / CS	120
0020	93129134	LED15DA19/SWPW-S4/TP CPN=980297996 LIN=00002		0	1 CS ---- 24 EACH / CS	24
0030	93129774	LED9DR30EG5K-STP4 CPN=980303241 LIN=00003		0	15 CS ---- 12 EACH / CS	180
0040	93129175	LED10DA19/SWPW-S12/TP CPN=980314638 LIN=00004		0	15 CS ---- 16 EACH / CS	240
0050	93129176	LED10DA19/DLPW-S12/TP CPN=980314639 LIN=00005		0	24 CS ---- 16 EACH / CS	384

MABD: 062625-062725

SHIP: 061925

CANCEL: 062225

DEPT00063

TYPE0020

POS REPLEN

TOTALS THIS PAGE
TOTALS THIS ORDER

0-LESS THAN STD PKG
0-LESS THAN STD PKG

65-STD PKGS
65-STD PKGS

948-QTY SHIPPED
948-QTY SHIPPED