



## INVOICE

**BILL TO:**  
AFN LLC  
2700 COMMERCE ST STE 1500  
DALLAS, TX 75226

**INVOICE DATE:** 07/05/2025  
**INVOICE #:** B99286  
**TERMS:** NET 30  
**DUE DATE:** 08/05/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
07/03/2025		3070 AR-10, Booneville, AR 72927, USA - 100 Veterans Dr, Tobyhanna, PA 18466, USA			
		Freight Income	1	\$2,900.00	\$2,900.00

TOTAL
\$2,900.00

**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**

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 5014779**  
**Manifest Number:**  
**Movement Number: 7026158**  
**Contact: Aly Frandle**  
**Email: aly.frandle@wwex.com**  
**Phone:**

**Page 1**

**THIS RATE CONFIRMATION HAS BEEN TENDERED TO, REVIEWED BY AND RATE APPROVED BY:**

BRZ  
BURBANK IL 60459  
MC#: 086875  
**Phone:** 7083035150  
**Fax:**

**REMIT TO INFO:**

Please have Driver call:

Worldwide Express Globaltranz  
Email Invoice/POD: TLcarrierDOCS@globaltranz.com

<b>Trailer Type:</b>	Van (DAT)	<b>Weight:</b>	42002.0	<b>Temp:</b>
<b>Door Type:</b>		<b>Pieces:</b>	2428	<b>Length:</b>
<b>Commodity:</b>	Baby wipes	<b>BOL:</b>	39858536	

**Stop Information**

<b>PU 1</b>	<b>Name:</b>	*Rockline Industries AEC	<b>Date:</b>	07/03/2025 1100
	<b>Address:</b>	3070 E State Hwy 10		07/03/2025 1100
		BOONEVILLE AR 72927	<b>Pieces</b>	1267
	<b>Phone:</b>	479-675-1302		
	<b>Contact:</b>	shipping		
	<b>Reference number:</b>	ACB 0		
	<b>Reference number:</b>	P8 28525404		
	<b>Reference number:</b>	PO 2879747991-79		
	<b>Reference number:</b>	PO 4133500858-2		
	<b>Reference number:</b>	PO 5236816769-13		
	<b>Reference number:</b>	PO 6632853836-13		
	<b>Reference number:</b>	PO 9933133652-79		
	<b>Reference number:</b>	SCA GTZSLC		

**Stop Information**

<b>SO 2</b>	<b>Name:</b>	DC 6080	<b>Date:</b>	07/05/2025 0600
	<b>Address:</b>	100 Veterans Dr		07/05/2025 0600
		TOBYHANNA PA 18466	<b>Pieces</b>	2428
	<b>Phone:</b>		<b>Weight</b>	42002.0
	<b>Contact:</b>			
	<b>Reference number:</b>	PO 2879747991-79		
	<b>Reference number:</b>	PO 4133500858-2		
	<b>Reference number:</b>	PO 5236816769-13		
	<b>Reference number:</b>	PO 6632853836-13		

**WORLDWIDE EXPRESS**  
**GLOBALTRANZ**  
**AFN, LLC**  
**MC 446639**

**Load Number: 5014779**  
**Manifest Number:**  
**Movement Number: 7026158**  
**Contact: Aly Frandle**  
**Email: aly.frandle@wwex.com**  
**Phone:**

**Page 2**

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**Reference number:** PO 9933133652-79

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**LOAD MONEY**

**Base Rate:** \$2,900.00  
**Total Pay:**

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**Instructions**

\*Rockline Industries AEC - Mutually Defined

\*Rockline Industries AEC - WALMNAIL: DTU requests need TCR form (trailer control report). The in time: DRIVER ARRIVAL AT WINDOW!!!, end time: Paperwork Available at Window  
Driver must request from the receiver. Send BOLs/POD and TCR) to walmartteam@globaltranz.com within 48 hours of delivery.

\*Rockline Industries AEC - WALMNAIL: Must NOT deliver more than 1 HR PRIOR to confirmed appt time.  
Must NOT deliver more than 1 HR AFTER confirmed apt time.  
If you will be late for delivery, DO NOT RESCHEDULE and reach out to us. Appointment reschedules must be done by our OPS team.

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**To be eligible for Accessorials / Incidentals, driver must:**

Be checked in to shipper OR receiver by the appointment time.

Submit all proof of detention, accessorial incidentals within 24-48 hours of delivery.

***Carrier must accept location tracking via an approved visibility technology (confirm with broker)***

**Detention:**

Carrier must be on time for pickup/delivery.

Detention accrual begins 2 hours after appointment time at shipper/receiver.

Carrier must notify Broker after 60 minutes of waiting.

Provide time stamped BOL within 48 hours of delivery.

Detention Rate - \$40/hr after 2 hours. Max \$200 detention per stop

**Layover, Truck Order Not Used (TONU):**

Carrier must contact Broker to request.

Delays or cancelations must be confirmed by Broker.

Layovers \$200 Dry Van or \$250 Running Reefers.

TONU \$200.

**Submitting Payments:**

Email invoice, Rate Confirmations, Proof of Delivery and Receipts to TLcarrierDOCS@globaltranz.com.

2.5% Quick Pay available upon request.

For Payments question contact TLcarrierREQUEST@globaltranz.com or by calling 224-515-7250.

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Carrier Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce provision of this agreement, rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement and this Carrier Rate Confirmation, the Agreement shall govern and then any terms set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match this Carrier Rate Confirmation. Broker does not authorize handwritten or verbal changes to this Carrier Rate Confirmation. If this Carrier Rate Confirmation does not accurately reflect the load terms, Carrier must obtain a revised Carrier Rate Confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in line haul deductions.



# Trailer Control Record

DC#: 6080

TCR: 805a1a9f-bb30-479e-9e5d-a32184011954

Trailer Number	Carrier	Delivery Number	Appointment Time	Arrival Date
97037	GELJ	34301576	07/05/2025 06:00	07/05/2025 05:46:36

Arrival Information		
Inbound Seal #: 28856159	Inbound Seal Condition:	Sealed at Gate: N
Intact: Y	AP Associate: klk0067	Current Seal #: 28856159
Load ID#: 39858536	Comments:	

Delivery	
Cases: SSTK 1911 ASM 10	Total: 1921



Receiving Dock		
Door #: 316	Assigned by: s0m01ml	Closed by: amj000v
Unloader: s0m01ml	Unload Start Time: 07/05/2025 07:03:02	Unload End Time: 07/05/2025 10:47:16
Driver Arrival at Window: 07/05/2025 06:25	Paperwork Available at Window: 07/05/2025 11:01	

Receiving Office		Return/Transfer	
Drop: N	Driver Unload:	Trailer Empty: N	
Commodity: SSTK		Return Contents:	Reason:
Tractor #: 824		Description:	


Seal Information		Receiving Office
Seal Number: 28856159	Sealed By: amj000v	Trailer Resealed By: amj000v

Outbound Information		
AP Associate:	D/T:	Outbound Seal #:

In at 5:45am  
Out at 11:15am

			
Equip ID	97037	Status	AP
Equip Arrival	07/05/25 05:46	Temp1	
Carrier	GELJ	Temp2	
Seal	28856159	Temp3	
Reseal		Fuel Lvl	
DoorZone	Subcenter1 316	Dept	SSTK
Del Date	07/05/25 06:00	Type	53
I have read and understand the posted copy of WalMart's Appointment Drop Rules and Regulations			
Driver Signature _____			
			
Delivery#	34301576	DC	6080



<b>SHIP FROM</b>				<b>SHIP TO</b>			
Name: BN - ROCKLINE BOONEVILLE Address: 3070 East Highway 10  City/State/Zip: Booneville AR 72927 SID#: 39858536 LD#97513 ME#: F.O.B <input type="checkbox"/>				Bill of Lading Number: 00712870804323968  			
Name: WALMART DC 6080R-REGULAR Address & 500 VETERANS DRIVE City/State/Zip: TOBYHANNA PA 18466  CID#: 28525404 F.O.B <input type="checkbox"/>				Carrier Name: Customer Pick Up Carrier  Trailer Number: 97037 Seal number: 28556159,			
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> Name: Address & City/State/Zip:				SCAC: CPU Pro number:		Seal Intact <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
				Customer Signature		Driver Signature	
See Special Instructions Attachment				Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  Prepaid _____ Collect <u>X</u> 3rd Party _____		Master Bill of Lading: with attached underlying Bills of Lading	
<b>CUSTOMER ORDER INFORMATION</b>							
CUSTOMER ORDER NUMBER / ADDL. PO#		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		B/L# ADDITIONAL SHIPPER INFO TYPE DEPT CANCEL DATE	
6632853836		8	15	Y N		00712870013401549 0033 00013 07/02/25	
2879747991		1320	24880	Y N		00712870013401556 0020 00079 07/02/25	
4133500858		504	8022	Y N		00712870013401556 0020 00002 07/02/25	
9933133652		2	7	Y N		00712870013401549 0033 00079 07/02/25	
GRAND TOTAL		1834	32924	Y N		Total Pallet: 47 Weight: 157	
<b>CARRIER INFORMATION</b>							
HANDLING UNIT		PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		LTL ONLY
QTY TYPE	QTY TYPE				Commodities requiring special or additional care of 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
	8 CA	15 LB			69100S6/179400S2/153900-AS6/49290S2/13378		100
	322 CA	5390 LB			49290-AS02		0775
	1504 CA	27518 LB			49290 - Wet Wipes		
	1834	32923 LB					
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 _____"							
<b>NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).</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.							
<b>SHIPPER SIGNATURE / DATE</b> This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.				<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver  Loaded By: <u>Alex</u> Appointment Time: _____ Time In: _____ Time Out: _____		<b>Freight Counted:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces	
<b>SHIPPER SIGNATURE / DATE</b> <u>[Signature]</u> <u>7/3/15</u>				<b>CARRIER SIGNATURE / PICKUP DATE</b> 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.  <u>Rockline Industries</u> Shipper Signature		Property described above is received in good order, except as noted.	



Date: 07/03/25

## SPECIAL INSTRUCTIONS

Ship to Customer Name: WALMART DC 6080R-REGULAR

MUST SHIP ON SLIP SHEETS  
IF PRODUCT DOES NOT FIT ON TRAILER, TAKE  
A PICTURE OF THE BACK OF THE TRAILER AND  
PRODUCT REMAINING ON THE DOCK

Total Cubic Feet 1779 FC

Printed By:

<u>Customer PO</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Total Weight of Pallets</u>
9933133652	Chep	1			65
2879747991	Slips	33			66
4133500858	Slips	12			24
6632853836	Slips	1			2
Printed By: RGWILT	Total	47			157



Name: BN - ROCKLINE  
Address: 3070 East Highway 10

City/State/Zip: Booneville AR 72927  
SID#: 39858536 LD#97513  
ME#: F.O.B ☐



SHIP TO

Name: WALMART DC 6080R-REGULAR Location # 6080  
Address & 500 VETERANS DRIVE  
City/State/Zip: TOBYHANNA PA 18466

CID#: 28525404 F.O.B ☐

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:  
Address &  
City/State/Zip:

See Special Instructions Attachment

Carrier Name: Customer Pick Up Carrier

Trailer Number: 97037  
Seal number: 28556159

SCAC: CPU  
Pro number:

Seal Intact

Customer  
Signature

Customer  
Refused to Sign

Customer Name  
Refusing to Sign

Yes

No

Driver Signature

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

Prepaid Collect X 3rd Party

☒  
(check box)

Master Bill of Lading: with attached underlying  
Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER / ADDL. PO#	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	B/L#	ADDITIONAL SHIPPER INFO TYPE DEPT CANCEL DATE
6632853836	8	15	Y N	00712870013401549	0033 00013 07/02/25
2879747991	1320	24880	Y N	00712870013401556	0020 00079 07/02/25
4133500858	504	8022	Y N	00712870013401556	0020 00002 07/02/25
9933133652	2 ✓	7	Y N	00712870013401549	0033 00079 07/02/25
GRAND TOTAL	1834	32924	Y N	Total Pallet: 47 Weight: 157	

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY TYPE	QTY TYPE			Commodities requiring special or additional care of 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
	8 CA	15 LB		69100S6/179400S2/153900-AS6/49290S2/13378	100
	322 CA	5390 LB		49290-AS02	0775
	1504 CA	27518 LB		49290 - Wet Wipes	
	1834	32923 LB			

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.

Rockline Industries Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, 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

Loaded By:

Appointment Time:  
Time In:

Freight Counted:

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

Time Out:

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.



Highway 10

City/State/Zip: Booneville AR 72927  
 SID#: 39858536 LD#97513  
 ME#: F.O.B ☐

SHIP TO

Name: WALMART DC 6080R-REGULAR Location # 6080  
 Address & 500 VETERANS DRIVE  
 City/State/Zip: TOBYHANNA PA 18466

CID#: 28525404 F.O.B ☐

THIRD PARTY FREIGHT CHARGES BILL TO:

Name:  
 Address &  
 City/State/Zip:

See Special Instructions Attachment

Carrier Name: Customer Pick Up Carrier

Trailer Number: 97037  
 Seal number: 28556159

SCAC: CPU  
 Pro number:

	Yes	No
Seal Intact		
Customer Signature		
Customer Refused to Sign		Driver Signature
Customer Name Refusing to Sign		

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 / ADDL. PO#	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO			
			B/L#	TYPE	DEPT	CANCEL DATE		
6632853836	8	15	Y	N	00712870013401549	0033	00013	07/02/25
2879747991	1320	24880	Y	N	00712870013401556	0020	00079	07/02/25
4133500858	504	8022	Y	N	00712870013401556	0020	00002	07/02/25
9933133652	2	7	Y	N	00712870013401549	0033	00079	07/02/25
			Y	N				
GRAND TOTAL	1834	32924	Total Pallet: 47 Weight: 157					

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY TYPE	QTY TYPE			Commodities requiring special or additional care of 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
8 CA	15 LB			69100S6/179400S2/153900-AS6/49290S2/13378	100
322 CA	5390 LB			49290-AS02	0775
1504 CA	27518 LB			49290 - Wet Wipes	
1834	32923 LB				

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

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.

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

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

Rockline Industries Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, 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

Loaded By:

Appointment Time:  
 Time In:

Freight Counted:

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

Time Out:

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.



BILL OF LADING

Bill of Lading Number: 00712870804323968



City/State/Zip: Booneville AR 72927  
 SID#: 39858536 LD#97513  
 ME#:

F.O.B. ☐

SHIP TO

Name: WALMART DC 6080R-REGULAR Location #  
 Address & 500 VETERANS DRIVE 6080  
 City/State/Zip: TOBYHANNA PA 18466

Carrier Name: Customer Pick Up Carrier

Trailer Number: 97037  
 Seal number: 28556159

SCAC: CPU  
Pro number:Seal Intact Yes ☐ No ☐Customer  
SignatureCustomer  
Refused to Sign

Driver Signature

Customer Name  
Refusing to Sign

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

See Special Instructions Attachment

CUSTOMER ORDER NUMBER / ADDL. PO#		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		B/L#	ADDITIONAL SHIPPER INFO		
				Y	N		TYPE	DEPT	CANCEL DATE
6632853836		8	15	Y	N	00712870013401549	0033	00013	07/02/25
2879747991		1320	24880	Y	N	00712870013401556	0020	00079	07/02/25
4133500858		504	8022	Y	N	00712870013401556	0020	00002	07/02/25
9933133652		2	7	Y	N	00712870013401549	0033	00079	07/02/25
GRAND TOTAL		1834	32924	Y	N				

Total Pallet: 47 Weight: 157

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY TYPE	QTY TYPE			Commodities requiring special or additional care of 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
8	CA	15 LB		69100S6/179400S2/153900-AS6/49290S2/13378	100
322	CA	5390 LB		49290-AS02	0775
1504	CA	27518 LB		49290 - Wet Wipes	
1834		32923 LB			

DC 6080

PO#

TRLR#

FREIGHT BILL RECEIVED IN FULL

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 \_\_\_\_\_

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(e)(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.

Rockline Industries Shipper Signature

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, 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

Loaded By:

Appointment Time:  
 Time In:

## Freight Counted:

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

Time Out:

## 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.

1111











SPECIAL INSTRUCTIONS SUPPLEMENT TO  
BILL OF LADING

Bill of Lading Number: 00712870804323968

## SPECIAL INSTRUCTIONS INFORMATION

Ship to Customer Name: WALMART DC 6080R-REGULAR

MUST SHIP ON SLIP SHEETS  
IF PRODUCT DOES NOT FIT ON TRAILER, TAKE  
A PICTURE OF THE BACK OF THE TRAILER AND  
PRODUCT REMAINING ON THE DOCK

Total Cubic Feet 1779 FC

Printed By:

Customer PO	Description	Number of Pallets per Order	Description	Number of Pallets per Order	Total Weight of Pallets
9933133652	Chep	1			65
2879747991	Slips	33			66
4133500858	Slips	12			24
6632853836	Slips	1			2
Printed By: RGWILT	Total	47			157



# BILL OF LADING

Page 1 of 2

## SHIP FROM

Name: BN - ROCKLINE BOONEVILLE  
Address: 3070 East Highway 10

City/State/Zip: Booneville AR 72927  
SID#: 39858536 LD#97513  
ME#: F.O.B ☐

## SHIP TO

Name: WALMART DC 6080R-REGULAR Location # 6080  
Address & 500 VETERANS DRIVE  
City/State/Zip: TOBYHANNA PA 18466

CID#: 285254791 F.O.B ☐

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name:  
Address &  
City/State/Zip:

See Special Instructions Attachment

Bill of Lading Number: 00712870013401556



Requested Delivery Date: 07/06/25

\*\*\* DO NOT BREAK DOWN PALLETS \*\*\*

Carrier Name: Customer Pick Up Carrier

Trailer Number: 97037

Seal number: 28556159,

Yes

No

SCAC: CPU  
Pro number:

Seal Intact

Customer  
Signature

Customer  
Refused to Sign

Driver Signature

Customer Name  
Refusing to Sign

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 / ADD. PO#	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
2879747991	1320	24880 LB	Y N	
4133500858	504	8022 LB	Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL	1824	32902 LB		Total Pallet: 45 Weight: 90

## CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE	Commodities requiring special or additional care of 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
		1504	CA	27518 LB	49290 - Wet Wipes 070
		320	CA	5384 LB	49290-AS02 0775
		1824		32902 LB	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.

Rockline Industries Shipper Signature

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, 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

Loaded By:

Appointment Time:

Time In:

## Freight Counted:

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

Time Out:

## 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.



SPECIAL INSTRUCTIONS SUPPLEMENT TO  
BILL OF LADING

Page 2 of 2

Bill of Lading Number: 00712870013401556

SPECIAL INSTRUCTIONS INFORMATION

Ship to Customer Name: WALMART DC 6080R-REGULAR

Call for Delivery Appointment: 570-894-6000

MUST SHIP ON SLIP SHEETS  
IF PRODUCT DOES NOT FIT ON TRAILER, TAKE  
A PICTURE OF THE BACK OF THE TRAILER AND  
PRODUCT REMAINING ON THE DOCK  
PROOF OF DELIVERY MUST CONTAIN THIS  
CUSTOMERS STORE STAMP OR CARRIER WILL  
BE LIABLE FOR ANY FREIGHT CLAIMS

Total Cubic Feet 1776 FC

<u>Customer PO</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Total Weight of Pallets</u>
2879747991	Slips	33			66
4133500858	Slips	12			24
Printed By: RGWILT	Total	45			90



## BILL OF LADING

Page 1 of 2

SHIP FROM  
BN - ROCKLINE BOONEVILLE  
Address: 3070 East Highway 10  
City/State/Zip: Booneville AR 72927  
SID#: 39858536 LD#97513  
ME#: F.O.B ☐

Bill of Lading Number: 00712870013401549



Requested Delivery Date: 07/06/25

\*\*\* DO NOT BREAK DOWN PALLETS \*\*\*

Carrier Name: Customer Pick Up Carrier

Trailer Number: 97037

Seal number: 28556159,

SCAC: CPU  
Pro number:

Seal Intact

Yes

No

Customer  
SignatureCustomer  
Refused to Sign

Driver Signature

Customer Name  
Refusing to Sign

SHIP TO  
Name: WALMART DC 6080A-ASM DIS Location # 6080  
Address & 300 VETERANS DRIVE  
City/State/Zip: TOBYHANNA PA 18466

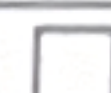
CID#: 285254791

F.O.B ☐

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name:  
Address &  
City/State/Zip:

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

See Special Instructions Attachment

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER / ADD. PO#	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
6632853836	8	15 LB	Y	N	
9933133652	2	7 LB	Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	10	22 LB	Total Pallet: 2 Weight: 67		

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care of 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
		2	CA	7 LB		49290-AS02		0775
		8	CA	15 LB		69100S6/179400S2/153900-AS6/49290S2/13378		100
		10		22 LB		GRAND TOTAL		

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"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.

Rockline Industries Shipper Signature

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

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- ☐ By Shipper  
☐ By Driver

## Freight Counted:

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

Loaded By:

Appointment Time:

Time In:

Time Out:

## 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.

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**SPECIAL INSTRUCTIONS SUPPLEMENT TO  
BILL OF LADING**

Page 2 of 2

Bill of Lading Number: 00712870013401549

**SPECIAL INSTRUCTIONS INFORMATION**

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BE LIABLE FOR ANY FREIGHT CLAIMS

Total Cubic Feet      3 FC

<u>Customer PO</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Description</u>	<u>Number of Pallets per Order</u>	<u>Total Weight of Pallets</u>
9933133652	Chep	1			65
6632853836	Chep	1			2
		<hr/>		<hr/>	<hr/>
Printed By: RGWILT	Total	2			67