

BILL OF LADING

Date: **4/29/2021**
 Shippers No: **201230-0840-2141**

RECEIVED, subject to the classification and tariffs in the effect on the date of this bill of lading.


at: **Baltimore, MD** on: **4/29/2021** from: **TDL International, Inc.**
 the property described below, in apparent good order, except as noted (content and condition of the packages unknown), marked
 consigned and destined as shown below which said the company (the word being understood throughout this contract as meaning any
 person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if
 on its on railroad, waterline, highway route, or routes or within the territory of its highway operation otherwise to deliver to another carrier
 on the route to said destination. It is mutually agreed as to each carrier of all or any of said properties over all or any portion of said route
 to destination, and to each party at anytime interested in all or any property, that every service to be performed hereunder shall be subject

| | | | | |
|------------------|---------------------------------------|--------|-----------|-------------------|
| Consigned to : | TDL International | | | |
| Destination: | TDL International | | | |
| Delivery Address | 13202 NW 107th Avenue, Suite 7 | | | |
| City: | Hialeah Gardens | State: | FL | Zip: 33018 |

Purchase Order: **T3418**

| ITEM# | PRODUCT | QUANTITY |
|---------------------|---------|--------------|
| 10979-00118 | GROCERY | 896 |
| 10979-00325 | GROCERY | 280 |
| TOTAL CASES: | | 1,176 |

TOTAL WEIGHT: **2400 LBS**
 SEAL # **Uline 30032773**
 TOTAL PALLETS OUT: **6**

DRIVERS NAME:
 CASES COUNTED BY
 RECEIVER: 

DRIVER SIGNATURE: 

 04/29/21

DATE 4/23/2021

BOL NO:

406517

Page #: 1

CARRIER: CUSTOMER PICK UP
MOS: LESS THAN TRUCK LOAD

PRO NO:

HILL HAULING
OWN TRUCK

SEAL NO:

CONTACT PERSON:

Uline 30032773

PHONE NO:

3053567683

SEC 7 TRAILER:

SHIP TO: TDL INTERNATIONAL - PANAMA
10821 NW 122ND STREET
ATTN: JONATHAN RAMON
MEDLEY, FL 33178 UNITED STATES
USA

SHIP FROM:

Grand Brands, Inc. "Makers of True Citrus"
11501 Pocomoke Court
Suite D
MIDDLE RIVER, MD 21220
410-238-6000
USA

BILL TO:

BILL OF LADING

Orders: 307047

Total Shipment Weight: 2,400.00 LBS.

PO Numbers: 201230-0840-2141

Total Pallets: 6

| QUANTITY | UOM | H | DESCRIPTION | WEIGHT | CLASS |
|------------------------|-----|---|--|----------|-------|
| 280.00 | CS | | 00-3257 LIME 12/32 CT "Sweetening Compound (in boxes)" and NMFC 75100-02 | 560.00 | 70 |
| 896.00 | CS | | 00-1185 LEMONADE 12/10 CT 3GM "Sweetening Compound (in boxes)" and NMFC 75100-02 | 1,469.44 | 70 |
| 1,176.00 Cases Shipped | | | | | |

GENERAL COMMENTS:

wood pallets ok and extra dunnage
No more than 20 palletsREMIT C.O.D.
TO

ADDRESS

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.
The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding.

\$ per

COD AMT: \$

Subject to Section 7 of conditions, if this 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.

(Signature Of Consignor)

PREPAID

COLLECT

TOTAL
CHARGES \$FREIGHT CHARGES ARE PREPAID
UNLESS MARKED COLLECT

CHECK BOX IF COLLECT

RECEIVED, subject to the classifications and tariffs on the date of the issue of this Bill Of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property, ever all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in governing classification on the date of shipment.
Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

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

SHIPPER GRAND BRANDS, INC

CARRIER

PER

PER

DATE

Mark with "X" or "H" if appropriate to designate Hazardous Substances as defined in the department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional procedure for identifying hazardous materials on Bills of Lading per Section 172.201 (a)(1) of Title 49, Code of Federal Regulations. Also, when shipping hazardous materials, the shipper's certification statement prescribed in Section 172.2.04 (a) of the Federal Regulations must be indicated on the bill of lading, unless a specific exception from this requirement is provided in the Regulations for a particular material.



Grand Brands, Inc.
11501 Pocomoke Court
Suite D
MIDDLE RIVER, MD 21220



* 5 1 2 0 2 3 *

PICKING SLIP

PICK NO: 512023
ORDER NO: 307047 - 001
DATE: 04/23/2021
CSR: khare
PAGE: Page 1 of 1

SHIP TO: TDL INTERNATIONAL - PANAMA
10821 NW 122ND STREET
ATTN: JONATHAN RAMON
MEDLEY, FL 33178
USA

ORDER FROM: GROVARA LLC
1151 WALTON ROAD
BLUE BELL, PA 19422

BILL TO: GROVARA LLC
1151 WALTON ROAD
BLUE BELL, PA 19422

| Bill to No. | Customer No. | P.O. Number | Order Date | Delivery Date | Department | Sale Type | Attn: |
|--------------------------------------|----------------------------------|----------------|----------------------|------------------|------------|------------------------|---------------|
| GROV100 | 3495 | 201230-0840- | 03/15/2021 | 04/30/2021 | | INTERNATIONAL NATIONAL | |
| Pick Number | Ship Date | Freight Terms | MOS | Carrier | Load No. | Whse. | |
| 512023 | 04/30/2021 | COLLECT | LESS THAN TRUCK LOAD | CUSTOMER PICK UP | 406517 | 11501 | |
| LINE | PRODUCT CODE / DESCRIPTION | ALTERNATE CODE | LOT NUMBER | LOCATION | UOM | ORDERED | TO BE SHIPPED |
| 1 | 00-3257 LIME 12/32 CT | 810979003250 | 0406231363 PL | 02253 | CS | 160.00 | 160.00 |
| 2 | 00-3257 LIME 12/32 CT | 810979003250 | P5 0406231363 | 03272 | CS | 120.00 | 120.00 |
| 3 | 00-1185 LEMONADE 12/10 CT 3GM | 10810979001185 | W1085 | 11 | CS | 896.00 | 896.00 |
| P1-252 P2-252 P3-252 P4-140 | | | | | | | |

P1-252
P2-252
P3-252
P4-140

Shipping Inst.

wood pallets ok and extra dunnage
No more than 20 pallets


Loaded By: _____

WEIGHT 2,029.44

PICKED BY _____

PACKED BY _____

Line Count: 3

| | | | |
|--|--|--|---|
|  11501 Pocomoke Ct., Middle River MD 21220 | INCOMING & OUTGOING CARRIER TRAILER INSPECTION REPORT | | Original Issue Date: 8/19/19 Revised Date: 10/10/2019 Revision Number: 1 Tier 2 Document |
| | CURRENT DOCUMENT NUMBER: 005-001-1 | | |
| | Author and Date: QA Director 10/10/19 | Approved by -- Date: EVP, Operations 10/10/19 | Page 1 of 1 |

Date: 04/29/21 Time: 1:25pm
 Carrier: Hill Hauling Trailer #: 253

IF ANY OF THE CRITERIA BELOW ARE NOT COMPLIANT, THE TRAILER MAY BE REJECTED

| | YES | NO |
|---|-------------------------------------|-------------------------------------|
| Any Damage to freight (Including leaks, holes, bugs, etc.): | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| Any Odors in trailer: | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| Any Hazmats or Allergens in trailer: | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| Any holes, leaks or damage in floors, walls or ceiling of trailer: | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| 5 or more rivets or bolts missing/damaged on trailer: | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| 2 or more missing/damaged rivets or bolts from any ONE cross beam: | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Comments: _____ | | |
| Valid FMCSA Inspection Sticker (Inspected within previous 12 months): | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Comments: _____ | | |
| Safety Seal Intact (If applicable): | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Seal Number: <u>Uline 30032773</u> | | |
| Lock Present: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Comments: _____ | | |

ACCEPTED ☒ COMMENTS: _____

NOT ACCEPTED ☐ _____

INSPECTED AND VERIFIED BY:  _____

ATTACH THIS TO THE BILL OF LADING