

Report ID: DRC0075B

DELIVERY RECEIPT

Date: 9/26/2025 8:21 AM
Page: 1 of 2

DC: 560 Target Stores
Address: 423 MT. VERNON ROAD
STUARTS DRAFT, VA 24477

| | | | |
|--------------------|------|---------------|-----------|
| Scac: | RBRL | Appt: | 244155 |
| Cons Scac: | 7274 | Num Exp Ctns: | 2530 |
| Trailer: | | Avail Date: | 9/25/2025 |
| Manifest: | | Load Type: | DROP |
| ART Ranking Score: | | Sched Date: | |
| Appt Comment: | | Trailerless: | N |
| | | Sched Time: | |
| | | HV: | N |
| | | Door: | |

| PRO | Src / PO | Vendor Name | EDI | Seq | Sched | Recv | External | | Re- | | comments |
|-----------|--------------|---------------------------|-----|-----|-------|------|----------|-------|-----------|-------|----------|
| | | | | | | | Dam'g | Rcv'd | turned to | Prob. | |
| 528622269 | 1000/1492210 | DBTE LLC | Y | 1 | 387 | 375 | — | — | — | — | |
| 528622269 | 1000/1522088 | IVC | Y | 2 | 172 | 172 | — | — | — | — | |
| 528622269 | 1000/1520996 | SKINNY MIXES LLC | Y | 3 | 144 | 144 | — | — | — | — | |
| 528622269 | 1000/1522093 | HOOVER CO | Y | 4 | 170 | 122 | — | — | — | — | |
| 528622269 | 1000/1520509 | COMBE INC | Y | 5 | 105 | 104 | — | — | — | — | |
| 528622269 | 1000/1513475 | LOGITECH | Y | 6 | 181 | 181 | — | — | — | — | |
| 528622269 | 0052/7893289 | DASHING DIVA FRANCHISE CO | Y | 7 | 22 | 22 | — | — | — | — | |
| 528622269 | 1000/1512848 | LOGITECH | Y | 8 | 12 | 12 | — | — | — | — | |
| 528622269 | 1000/1520289 | COMBE INC | Y | 9 | 104 | 104 | — | — | — | — | |
| 528622269 | 1000/1513637 | LOGITECH | Y | 10 | 35 | 35 | — | — | — | — | |
| 528622269 | 1000/1472642 | LOGITECH | Y | 11 | 13 | 13 | — | — | — | — | |
| 528622269 | 1000/1509270 | HASBRO INC | Y | 12 | 1096 | 1107 | — | — | — | — | |
| 528622269 | 1000/1513536 | LOGITECH | Y | 13 | 20 | 20 | — | — | — | — | |
| 528622269 | 1000/1472644 | LOGITECH | Y | 14 | 32 | 32 | — | — | — | — | |
| 528622269 | 1000/1472639 | LOGITECH | Y | 15 | 37 | 37 | — | — | — | — | |

Q.30
mailbot
84-1

Report ID: DRC0075B

DELIVERY RECEIPT

Date: 9/26/2025 8:21 AM
Page: 2 of 2

DC: 560 Target Stores
Address: 423 MT. VERNON ROAD
STUARTS DRAFT, VA 24477

Scac: RBRL
Cons Scac: 7274
Trailer:
Manifest:
ART Ranking Score:
Appt Comment:

Appt: 244155
Avail Date: 9/25/2025
Sched Date:
Sched Time:
Door:

Num Exp Ctns: 2530
Load Type: DROP
Trailerless: N
HV: N
Done:

| PRO | Src / PO | Vendor Name | EDI | Seq | Sched | Recv | External | Re- | Prob. | comments |
|-----|----------|-------------|-----|-----|-------|------|----------|-----------|-------|----------|
| | | | | | | | Dam'g | turned to | | |

SEP 26 2025

Totals: 2530 2480 — — —

Date Mailed to Consolidator/Carrier: _____

Target Signature: Juno S

Date Unloaded: SEP 26 2025

Driver Signature: L.L. Badgett

K-2

CHR COPY

T056012620454
244155

| | | | | | | | | | |
|--|-------------|----------------------------------|-----------|----------------------------------|---------------------|---|--|-----------------|-------|
| Ready By: | 09/23/2025 | Load Summary VICS Bill of Lading | | | | | | | |
| SHIP FROM Name: CHR Consol Center - Memphis - Patterson Address: 5570 Airways Blvd Address 2: BLDG E City/ST/Zip: Memphis, TN 38116 | | | | Load Number: | 528622269 | | | | |
| SHIP TO Name: Target DC #0560 Address: 423 Mount Vernon Rd City/ST/Zip: Stuarts Draft, VA 24477 Contact: Traffic (540) 932-3700 | | | | CARRIER NAME: <i>F104SS02</i> | | | | | |
| | | | | SCAC: | RBCL | | | | |
| | | | | Pro Number: | 7274 | | | | |
| Freight Charge Terms: (Freight charges are prepaid unless marked otherwise) | | | | | | | | | |
| <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party | | | | | | | | | |
| WHSE#: | | | | | | | | | |
| Date: | | | | | | | | | |
| FREIGHT BILL RECEIVED IN FULL <input type="checkbox"/> Please mark an 'X' in box if applies | | | | | | | | | |
| PO# _____ TRL# _____ TOT CS REC'D _____ TOT Pallets / _____ | | | | | | | | | |
| REASON _____ TOTAL CASES REJECTED _____ | | | | | | | | | |
| REC# _____ REC'D BY _____ Did Driver Help Unload: <input type="checkbox"/> Y <input type="checkbox"/> N | | | | | | | | | |
| CUSTOMER ORDER INFORMATION | | | | | | | | | |
| PO NUMBER | # PKGS | WEIGHT | PALLETS | ADDITIONAL SHIPPER INFORMATION | | | | | |
| 10001509270-0560 | 311 | 3,407 | 6 | 527921681 | | | | | |
| 10001509270-0560 | 216 | 2,136 | 3 | 527921725 | | | | | |
| 10001509270-0560 | 516 | 4,426 | 6 | 527921729 | | | | | |
| 10001509270-0560 | 53 | 263 | 1 | 527921720 | | | | | |
| 10001513637-0560 | 4 | 133.75 | 0.25 | 3781922935 | | | | | |
| 10001512848-0560 | 10 | 133.75 | 0.25 | 3781922935 | | | | | |
| 10001472644-0560 | 32 | 133.75 | 0.25 | 3781922935 | | | | | |
| 10001513475-0560 | 100 | 133.75 | 0.25 | 3781922935 | | | | | |
| 10001513475-0560 | 81 | 200 | 3 | 3781922971 | | | | | |
| 10001513536-0560 | 20 | 200 | | 3781922971 | | | | | |
| 10001513637-0560 | 31 | 200 | | 3781922971 | | | | | |
| 10001512848-0560 | 2 | 200 | | 3781922971 | | | | | |
| 10001472642-0560 | 13 | 200 | | 3781922971 | | | | | |
| 10001472639-0560 | 37 | 200 | | 3781922971 | | | | | |
| 10001492210-0560 | 387 | 1,825 | 5 | 10001492210-0560 | | | | | |
| 10001622088-0560 | 172 | 983,976 | 1 | 10001622088-0560 | | | | | |
| 10001520509-0560 | 105 | 1,045 | | 2011705-20250919 | | | | | |
| | | 50 | 1 | 2011705-20250919 | | | | | |
| 10001520289-0560 | 104 | 286 | | 2011681-20250919 | | | | | |
| | | 50 | 1 | 2011681-20250919 | | | | | |
| 10001522093-0560 | 122 | 3,337 | 8 | 24264083 | | | | | |
| 0052-7893289-0560 | 22 | 160 | 1 | 0052-7893289-0560 | | | | | |
| 10001520996-0560 | 144 | 871 | 1 | 10001520996-0560 | | | | | |
| GRAND TOTAL | 2482 | 20564.976 | 38 | | | | | | |
| CARRIER INFORMATION | | | | | | | | | |
| HANDLING UNIT | | PACKAGE | | WEIGHT | H.M. (X) | COMMODITY DESCRIPTION | | LTL ONLY | |
| QTY | TYPE | QTY | TYPE | | | 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 | | NMFC# | CLASS |
| 6 | Cartons | 2 | Cartons | 7 | | COOTIE RF | | 125 | |
| | Cartons | 292 | Cartons | 3,365 | | MONOPOLY CLASSIC REFRESH | | 70 | |
| | Cartons | 17 | Cartons | 44 | | TRA GEN PRIME LDR AST | | 175 | |
| 2 | Cartons | 23 | Cartons | 254 | | NER N SERIES PINPOINT | | 125 | |

330 612 4918

Date: 09/17/2025

Bill Of Lading

Page: 1 o

SHIP FROM

Name: Hasbro c/o Cartamundi
 Address: 443 shaker rd
 City/State/Zip: East Longmeadow MA 01028
 SID#: 527921729

FOB: **Bill of Lading Number: 0769300001142725****SHIP TO**

Name: TARGET DIST CTR 560
Location #: 0560

Address: 423 MT VERNON ROAD
 City/State/Zip: STUARTS DRAFT, VA 24477
CID#:

FOB:

Carrier Name: CH ROBINSON LTL MEMPHIS

Trailer number: 833381

Seal number(s): 246914

SCAC: RCMT

Pro Number: 527921729

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

Prepaid: Collect: 3rd Party:

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

SPECIAL INSTRUCTIONS: Shipment number 0002862916 - 0001 **DELIVER NO EARLIER THAN: 09/24/2025**

DELIVER NO LATER THAN: 09/26/2025**MUST SCHEDULE ALL PURCHASE ORDERS WHEN REQUESTING DELIVERY APPOINTMENT.**

PALLET COUNT: 6

CUSTOMER ORDER NUMBER**CUSTOMER ORDER INFORMATION**

| # | WEIGHT (LB) | CUBE (CF) | PALLET/SLIP | ADDITIONAL SHIPPER INFO |
|------------------|-------------|-----------|-------------|--------------------------|
| PKGS | 4,426.929 | 426.030 | N | Destination PO Type Dept |
| 10001509270-0560 | 516 | | | 560 87 |

GRAND TOTAL

516

4,426.929 426.030

CARRIER INFORMATION
COMMODITY DESCRIPTION**HANDLING UNIT****PACKAGE****H.M.**

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

| QTY | TYPE | QTY | TYPE | WEIGHT | (X) | LTL ONLY | NMFC # | CLASS |
|-----|------|-----|------|-----------|------------------------------|----------|--------|-------|
| 10 | UN | | | 109.340 | GAMES OR TOYS, 84260 S9 | 84260 S9 | 70 | |
| 202 | UN | | | 2,498.561 | GAMES OR TOYS, 84260 S8 | 84260 S8 | 85 | |
| 14 | UN | | | 67.186 | GAMES OR TOYS, NOI, 84260 S6 | 84260 S6 | 100 | |
| 284 | UN | | | 1,739.488 | GAMES OR TOYS, 84260 S5 | 84260 S5 | 125 | |
| 6 | UN | | | 12.354 | GAMES OR TOYS, 84260 S4 | 84260 S4 | 175 | |

516

4,426.929

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."

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).**

This shipment is governed by the written contract in effect between shipper and carrier and such contract shall supersede any inconsistent terms and conditions included in this bill of lading. In the absence of a written contract, this shipment shall be subject to the terms of this bill of lading, the rates, rules, and classifications established by carrier, and to applicable federal and state laws and regulations.

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

Hasbro c/o Cartamundi **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.


*09/16/2025***Trailer Loaded****Freight Counted**

- | | |
|--|--|
| <input checked="" type="checkbox"/> By Shipper | <input checked="" type="checkbox"/> By Shipper |
| <input type="checkbox"/> By Driver | <input type="checkbox"/> By Driver/pallets said to contain |
| | <input type="checkbox"/> By Driver/Pieces |

CARRIER SIGNATURE / PICKUP DATE

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

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



SHIP FROM

Name: LOGITECH INC C/O ARVATO
 Address: 2053 E JAY ST
 City/State/Zip: ONTARIO, CA, 91764
 SID#: SSO# FOB:

Bill of Lading Number: 3781922935



CHR MEMPHIS

SHIP TO

Name: TARGET NORTHERN OPS
 Address: 423 MT VERNON ROAD
 City/State/ZIP: STUARTS DRAFT, VA 24477
 CID# FOB:

CARRIER NAME: C.H. ROBINSON
 WORLDWIDE INC

Trailer number: MM376
 Seal number(s): 00824959
 Load number: MM376

SCAC: RBTW Shipment no: 6000437493

Conv. #:

PRO number: 528352278



THIRD PARTY PAYMENT CHARGE BILL TO

Name: LOGITECH C/O CHRLTL
 Address: 14701 CHARLSON RD STE 2100
 City/State/Zip: EDEN PRAIRIE, MN 55347

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

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

SPECIAL INSTRUCTIONS:

Appointment Required

Load ID #

CUSTOMER ORDER INFORMATION

See additional page

GRAND TOTAL

146

535 LBS

CARRIER INFORMATION

See Attached Supplement Page(s)

1

146

535 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 llc 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 llc. 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.

Shipper

Signature

SIGNATURE / DATE 9/15/13
 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 Shipper
 said
 By Driver / pallets
 to contain

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.




Date: 09/16/2025

SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 3781922935

| BILL OF LADING INFORMATION | | | | | |
|----------------------------|--|--------|---------|-------------|--|
| CUSTOMER ORDER NUMBER | | # PKGS | WEIGHT | Pallet/Slip | ADDITIONAL SHIPPER INFO |
| 10001513475-0560 | | 100 | 366 LBS | Y | DN #: 56584032 - 3781922935 09/26/2025 400 PC |
| 10001472644-0560 | | 32 | 117 LBS | Y | DN #: 56584197 - 3781922935 128 PC |
| 10001513637-0560 | | 4 | 15 LBS | Y | DN #: 56584118 - 3781922935 09/26/2025 16 PC |
| 10001512848-0560 | | 10 | 37 LBS | Y | DN #: 56584133 - 3781922935 09/26/2025 40 PC |
| GRAND TOTAL | | 146 | 535 | | |

| PACKAGING INFORMATION | | | | | | LTL ONLY | |
|-----------------------|--------|---------|--------|-----------------------|--|----------|-------|
| HANDLING UNIT | | PACKAGE | | COMMODITY DESCRIPTION | | LTL ONLY | |
| QTY | TYPE | QTY | TYPE | WEIGHT | H.M. (X) | NMFC# | CLASS |
| | | 5 | CARTON | 18 LBS | UN3481, Lithium ion batteries contained in equipment Lithium Ion Batteries packed in compliance with Section II PI 967. Must be handled with care. Flammability hazard exists if package is damaged. For Emergency Response, contact Chemtrec 1-800-424-9300, International 1-703-527-3887. Not Regulated by the USDOT per 173.185 (c). | 116030S7 | 92.5 |
| 1 | PALLET | 123 | CARTON | 451 LBS | Technology, Computer Hardware | 116030S7 | 92.5 |
| | | 18 | CARTON | 66 LBS | Technology, Computer Hardware | 116030S7 | 92.5 |
| 1 | | 146 | | 535 LBS | PAGE SUBTOTAL | | |



STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

This form contains only the information necessary for the motor carrier to deliver, rate, and invoice the shipment described below.

Shipper: Ship Date 9/18/2025

Uniwell Laboratories
4201 Diplomacy Rd
Fort Worth, TX 76155
Jose Bernardi (972) 929-0720
Reference Number: 10001492210-0560

| | |
|-------------|---------------------|
| Carrier: | Ethio Transport Inc |
| Pro#: | |
| CHR Order#: | |
| Ship ID#: | 10001492210-0560 |

Consignee: Due Date 9/19/2025

Target DC #0560
423 Mount Vernon Rd
Stuarts Draft, VA 24477
Traffic (540) 932-3700
Reference Number: 10001492210-0560

All Freight charges PPD/3rd party bill to:
C.H. Robinson Worldwide, Inc
Billing
P.O. Box 3470
Chicago, IL 60654


| Type/ Reference # | SKU/ UPC | Description | QTY/ UOM | Pallets | Weight | Category/ Temp | NMFC/ Class |
|-----------------------------|-------------|--|-------------|---------|--------|-------------------|----------------|
| PO: 10001492210- 0560 | SKU: R487 | Protein Smoothie Single-Serve Strawberry Shortcake | 77 Case | 5.00 | 1821 | Dry | |
| PO: 10001492210- 0560 | SKU: R495 | Protein Smoothie-Single-Serve Butter Coffee | 77 Case | | 1 | Dry | |
| PO: 10001492210- 0560 | SKU: R496 | Protein Smoothie-Single-Serve Chocolate | 77 Case | | 1 | Dry | |
| PO: 10001492210- 0560 | SKU: R497 | Protein Smoothie-Single-Serve Vanilla Cream | 79 Case | | 1 | Dry | |
| PO: 10001492210- 0560 | SKU: R499 | Protein Smoothie-Single-Serve Chocolate Peanut Butter | 77 Case | | 1 | Dry | |
| | | | 387 | 5 | 1825 | | |

Shipper Special Instructions:**Consignee Special Instructions:****Comments:**

The Shipper certifies that the above named materials are properly classified, described, marked, labeled and packaged, and are in proper condition for transportation, according to the applicable regulations of the Department Of Transportation.

Shipper Signature X CA.18908.75Date: 18/08/25Trailer# 29KConsignee Signature X Date: Seal# 6026966Driver Signature X Date: 9/18/25Seal#


Permanent post-office address of shipper.



Ready By: 09/18/2025

VICS Bill of Lading

| | | | | | | | | | | |
|--|------|---------|--------|---|---|---|---|--|----------|-------|
| SHIP FROM | | | | | Order Number: 1702121931 | | | | | |
| Name: Geodis Address: 5540 E Holmes Rd City/ST/Zip: Memphis, TN 38118 | | | | | | | | | | |
| SHIP TO | | | | | CARRIER NAME: Intermodal Cartage Co LLC | | | | | |
| Name: Target DC #0560 Address: 423 Mount Vernon Rd City/ST/Zip: Stuarts Draft, VA 24477 Contact: Traffic (540) 932-3700 | | | | | Trailer Number: Seal Number(s): SCAC: CHRO Pro Number: | | | | | |
| SEND FREIGHT BILL TO: | | | | | Freight Charge Terms: (Freight charges are prepaid unless marked otherwise) Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> | | | | | |
| Name: CHRLTL Address: 14701 Charlson Road Address 2: Suite 2100 City/ST/Zip: Eden Prairie, MN 55347 | | | | | WHSE#: Date: FREIGHT BILL RECEIVED IN FULL <input type="checkbox"/> Please mark an 'X' in box if applies PO# (see below) | | | | | |
| Order #: 1702121931 Bill To Ref #: 2011705-20250919 Load #: 528486492 SPECIAL INSTRUCTIONS: | | | | | TRL# _____ TOT CS REC'D _____ TOT Pallets _____ REASON _____ TOTAL CASES REJECTED _____ REC# _____ REC'D BY _____ Did Driver Help Unload: <input type="checkbox"/> Y <input type="checkbox"/> N | | | | | |
| Must Arrive By 09/26/2025 | | | | | | | | | | |
| CUSTOMER ORDER INFORMATION | | | | | | | | | | |
| PO NUMBER | | # PKGS | WEIGHT | PALLETS | ADDITIONAL SHIPPER INFORMATION | | | | | |
| 10001520509-0560 | | 105 | 1,045 | | 2011705-20250919 | | | | | |
| | | | 50 | 1 | 2011705-20250919 | | | | | |
| GRAND TOTAL | | 105 | 1095 | 1 | | | | | | |
| CARRIER INFORMATION | | | | | | | | | | |
| HANDLING UNIT | | PACKAGE | | WEIGHT | H.M. (X) | COMMODITY DESCRIPTION | | | LTL ONLY | |
| QTY | TYPE | QTY | TYPE | | | 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 | | | NMFC# | CLASS |
| 0.1913 | Case | 22 | Case | 239.2632 | | VAG WASH ODOR BLOCK 12oz 1dz (3's) (PROBIOTIC) 4/24 0602220 | | | 59420-03 | 70 |
| 0.146 | Case | | Case | 1 | | Pallet | | | | 70 |
| 0.3373 | | 22 | | 240.2632 | | 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 <input type="checkbox"/> Prepaid <input type="checkbox"/> Customer check acceptable <input type="checkbox"/> | | | |
| NOTE: Liability limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. B 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 the shipment without payment of freight and all other lawful charges. | | | |
| PackList Included: Y <input type="checkbox"/> N <input type="checkbox"/> Drivers initials _____ | | | | | | | Agent for 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: <input type="checkbox"/> BY Shipper <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver / pallets said to contain <input type="checkbox"/> By Driver / Pieces | | | CARRIER SIGNATURE / PICKUP DATE Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. | | | |
| (Signature) _____ (Date) _____ | | | | | | | Number of Pieces _____ Counted _____ (Signature) _____ (Date) _____ | | | |



Ready By: 09/18/2025

VICS Bill of Lading

SHIP FROM

Name: Geodis
 Address: 5540 E Holmes Rd
 City/ST/Zip: Memphis, TN 38118

SHIP TO

Name: Target DC #0560
 Address: 423 Mount Vernon Rd
 City/ST/Zip: Stuarts Draft, VA 24477
 Contact: Traffic
 (540) 932-3700

SEND FREIGHT BILL TO:

Name: CHRLTL
 Address: 14701 Charlson Road
 Address 2: Suite 2100
 City/ST/Zip: Eden Prairie, MN 55347

Order #: 1702122082
 Bill To Ref #: 2011681-20250919
 Load #: 528486492

SPECIAL INSTRUCTIONS:

Must Arrive By 09/26/2025

Order Number: 1702122082



CARRIER NAME: Intermodal Cartage Co LLC

Trailer Number:

Seal Number(s):

SCAC: CHRO

Pro Number:

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

Prepaid Collect 3rd Party

WHSE#: Date:

FREIGHT BILL RECEIVED IN FULL Please mark an 'X' in box if applies

PO# (see below)

TRL#

TOT CS REC'D

TOT Pallets

/

O _____

S _____

D _____

REASON _____ TOTAL CASES REJECTED _____

REC# _____

REC'D BY _____

Did Driver Help Unload: Y N

CUSTOMER ORDER INFORMATION

| PO NUMBER | # PKGS | WEIGHT | PALLETS | ADDITIONAL SHIPPER INFORMATION |
|------------------|--------|--------|---------|--------------------------------|
| 10001520289-0560 | 104 | 286 | | 2011681-20250919 |
| | | 50 | 1 | 2011681-20250919 |
| GRAND TOTAL | 104 | 336 | 1 | |

CARRIER INFORMATION

| HANDLING UNIT | PACKAGE | | WEIGHT | H.M. (X) | COMMODITY DESCRIPTION | LTL ONLY | |
|---------------|---------|------|--------|-------------|---|----------|-------|
| | QTY | TYPE | | | | NMFC# | CLASS |
| 0.0119 | Case | 2 | Case | 3.912 | JFM ECIC MEDIUM BROWN 1dz (PPD to PTD) 6/24 0431107 | 59420-03 | 70 |
| 0.3335 | Case | | Case | 1 | Pallet | | 70 |
| 0.3454 | | 2 | | 4.912 | 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. B 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 the shipment without payment of freight and all other lawful charges.

PackList Included: Y _____ N _____ Drivers initials _____

Agent for Shipper _____

| SHIPPER SIGNATURE/DATE | | Trailer Loaded: | Freight Counted: | CARRIER SIGNATURE / PICKUP 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. | | <input type="checkbox"/> BY Shipper | <input type="checkbox"/> By Shipper | Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. | |
| (Signature) _____ | (Date) _____ | <input type="checkbox"/> By Driver | <input type="checkbox"/> By Driver / pallets said to contain | Number of Pieces _____ | Counted _____ |
| | | | <input type="checkbox"/> By Driver / Pieces | (Signature) _____ | (Date) _____ |



| | | | | |
|---|-----------|--|------------------------------------|---|
| SHIP FROM | | Bill of Lading Number: 07693000011427455 | | |
| Name: Hasbro, Inc. Address: 1020 SH Morgan Parkway City/State/Zip: Pooler, GA 31322 | | | | |
| SID#: | 527921725 | FOB: | | |
| SHIP TO | | | | |
| Name: TARGET DIST CTR 560 Location#: 0560 Address: 423 MT VERNON ROAD City/State/Zip: STUARTS DRAFT, VA 24477 | | Carrier Name: CH Robinson LTL Memphis Trailer Number: 379618C Seal Number: 49295673 | | |
| CID#: | FOB: | SCAC: | Pro Number: |  |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | RCMT | 527921725 | |
| Freight Charge Terms: (freight charges are prepaid unless marked otherwise) | | | | |
| <input checked="" type="checkbox"/> Prepaid | | <input type="checkbox"/> Collect | <input type="checkbox"/> 3rd Party | |
| <input type="checkbox"/> (check box) | | Master Bill of Lading: with attached underlying Bills of Lading | | |

SPECIAL INSTRUCTIONS: SHIPMENT NUMBER 2862936 - 001

DELIVER NO EARLIER THAN: 09/24/2025

DELIVER NO LATER THAN: 09/26/2025

MUST SCHEDULE ALL PURCHASE ORDERS WHEN REQUESTING DELIVERY APPOINTMENT

CUSTOMER ORDER INFORMATION

| CUSTOMER ORDER NUMBER | # | WEIGHT | CUBE | Pallet / Slip | ADDITIONAL SHIPPER INFO | | |
|-----------------------|------|---------|--------|---------------|-------------------------|---------|------|
| | PKGS | (LB) | (FT3) | | Destination | PO Type | Dept |
| 10001509270-0560 | 216 | 2135.96 | 192.05 | N | 0560 | | 087 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| GRAND TOTAL | 216 | 2135.96 | 192.05 | | | | |

CARRIER INFORMATION

BILL OF LADING

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).**

This shipment is governed by the written contract in effect between shipper and carrier and such contract shall supersede any inconsistent terms and conditions included in this bill of lading. In the absence of a written contract, this shipment shall be subject to the terms of this bill of lading, the rates, rules, and classifications established by carrier, and to applicable federal and state laws and regulations.

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

HASBRO, INC.**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

BILL OF LADING





Order Date: 09/15/2025

BILL OF LADING

Ship Date: 09/15/2025

SHIP FROM

Name: SKINNY MIXES, LLC Care Of FST Logistics, Inc.
 Address: 3357 SOUTHPARK PLACE

GROVE CITY, OH 43123

FOB Origin: **SHIP TO**

Name: TARGET DC 0560
 Address: 423 MOUNT VERNON RD 0560 0560
 STUARTS DRAFT , VA 24477

CID#: JSMTARGE

FOB: **THIRD PARTY FREIGHT CHARGES BILL TO:**

Name:
 Address:

SPECIAL INSTRUCTIONS: DO NOT DOUBLE STACK PALLETS!!** ONLY SHIP WITH FOOD GRADE MATERIALS AND NON-ODOROUS FOOD GRADE MATERIALS! LTL CLASS: 60 NMFC CODE:72510
 DRIVER MUST VERIFY CASE/PIECE COUNT! DRIVER MUST INITIAL CASE/PIECE QUANTITY ON BOL!! DRIVER IS RESPONSIBLE FOR CASE/PIECE COUNT!! DRIVER CAN NOT SIGN BOL "SLC" "STC".
 15SEP25 Approved ...

CUSTOMER ORDER INFORMATION

| CUSTOMER PO NUMBER | | PALLETS | WEIGHT | PALLET/SKID (CIRCLE ONE) | ADDITIONAL SHIPPER INFO | |
|--------------------|--|---------|--------|-----------------------------|-------------------------|--|
| 10001520996-0560 | | 1 | 870.80 | Y N | | |
| GRAND TOTAL | | 1 | 870.80 | | | |

CARRIER INFORMATION

| HANDLING UNIT | | PACKAGE | | WEIGHT | LOT | COMMODITY DESCRIPTION | LTL ONLY | |
|-----------------|------|---------|------|--------|-------|--|----------|----|
| QTY | TYPE | QTY | TYPE | | | 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 | | |
| 48 | CS | 288 | EA | 273.60 | 25161 | 2252406 - NATURALLY SWEETENED VANILLA BEAN | 72510-65 | |
| 48 | CS | 288 | EA | 273.60 | 25160 | 2252408 - NATURALLY SWEETENED CHOC MOCHA | 72510-0 | 65 |
| 48 | CS | 288 | EA | 273.60 | 25217 | 2252409 - NATURALLY SWEETENED CINNAMON DOLCE | 72510-0 | 65 |
| CC TOTAL | | | | | | | | |
| 144 | CS | 864 | | 870.80 | | GRAND TOTAL | | |

Where the rate is dependent on value, shippers are required to state especially 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: \$ _____

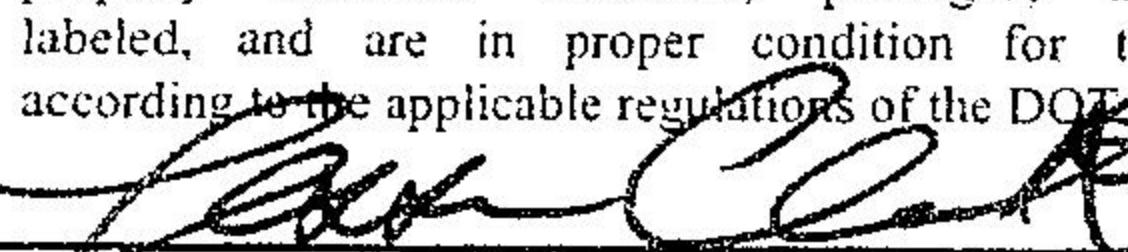
Fee Terms: Collect: Prepaid:
Customer check acceptable: _____

NOTE Liability Limitation for lost 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/pallets said
 to contain
 By Driver/Pieces


CARRIER SIGNATURE/PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency responses information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Properly described above is received in good order, except as noted.

Carrier Signature: _____

Date: _____

Page 1 of 1



STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIALBLE

This form contains only the information necessary for the motor carrier to deliver, rate, and invoice the shipment described below.

Shipper: Ship Date

International Vitamin Corp,4941 Liberty Hwy,SC 29621
Anderson

| | |
|---------------|---------|
| Carrier: | |
| Pro#: | |
| Ship ID#: | 4531194 |
| CHR Order#: | |
| Sales Order#: | 1067163 |

Consignee: Due Date

Target DC 0560,345 MT. Vernon Road,Fedex Code
538,Stuarts Draft, VA, 24477, US

ALL Freight charges PPD/3rd party bill to:

| Type/ Reference # | SKU/ UPC | Description | QTY/ UOM | Pallets | Weight | Category/ Temp | NMFC/ Class |
|----------------------|-------------|---------------------|-------------|---------|---------|-------------------|----------------|
| 10001522088-0 560 | | Nutritional Product | 172cs | 1 | 903.847 | | |

Shipper Special instructions

Consignee Special instructions

Comments

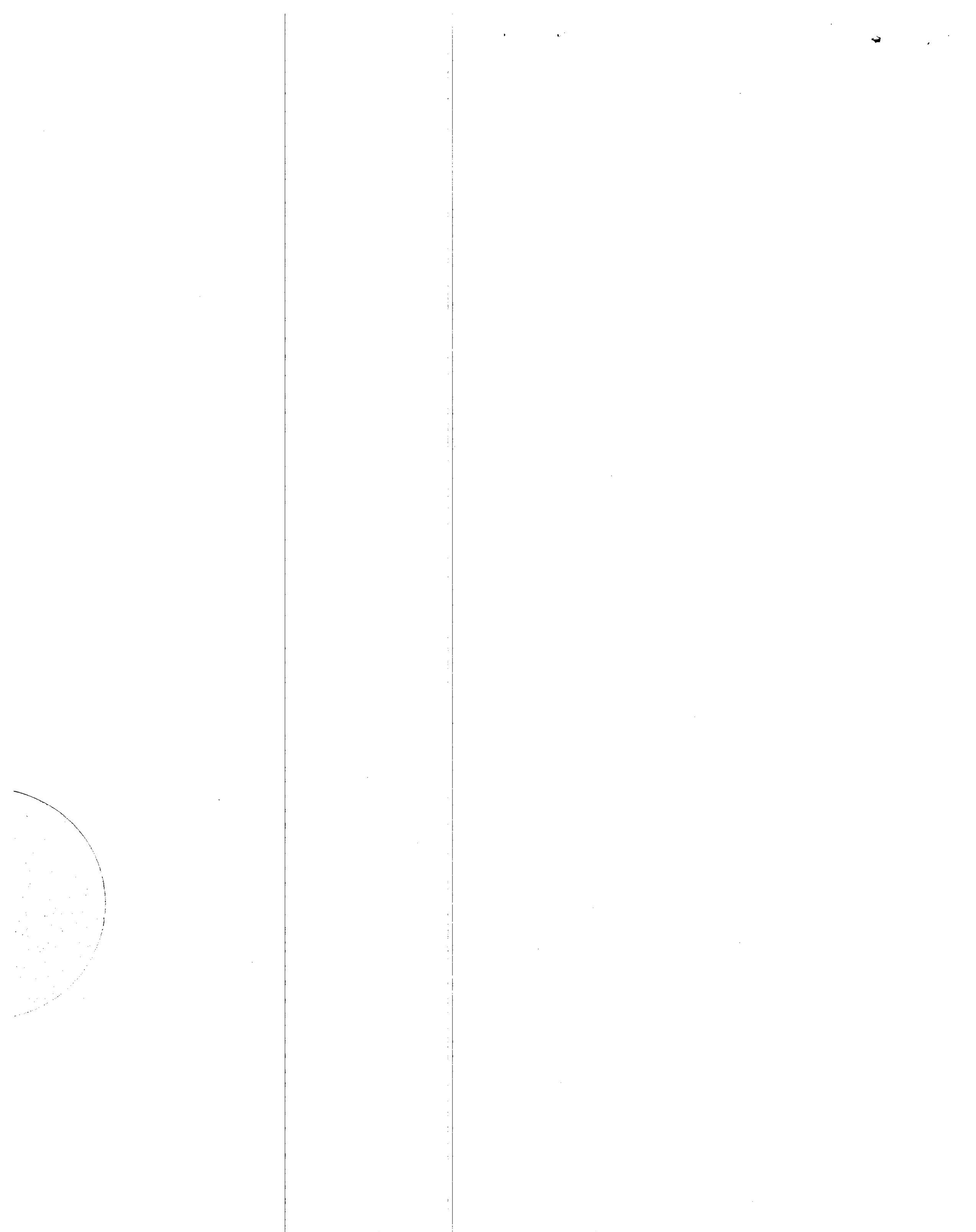
The shipper certifies that the above named materials are properly classified, described, marked, labeled and packaged, and are in proper condition for transportation, according to the applicable regulations of the Department Of Transportation.

Shipper Signature X _____ Date: _____ Trailer# _____

Consignee Signature X _____ Date: _____ Seal# _____

Driver Signature X _____ Date: _____ Seal# _____

Permanent post-office address of shipper.



BILL OF LADING

SHIP FROM

Royal Appliance Mfg. Co.
880 Robinson Road
Greer SC 29651

SID #: 13841111 Load Number: RTP.528517023

CUSTOMER LOAD#:

SHIP TO

TARGET'S NORTHERN OPR CTR
TARGET DIST CENTER #0560
345 MOUNT VERNON
STUARTS DRAFT, VA,24477

LOC# 0560

FOR PREPAID SHIPMENTS ONLY

CONTACT

TTI Floor Care c/o CHRLTL
14701 Charlson Rd SU 2100
Eden Prairie MN, 55347-5076

BILL OF LADING #: 00416830108372801

Carrier Name: CH ROBINSON

Trailer number: _____

Seal number(s): _____

SCAC: RBTW

Pro number: _____

Freight Charge Terms

(Freight charges are prepaid unless marked otherwise)

PREPAY & ADD _____

PREPAID X

COLLECT _____

3rd PARTY _____

Master Bill of Lading: with attached underlying
Bill of Lading

Special Instructions

Delivery Window: 25-SEP-25 - 27-SEP-25

DELIVERY STAMP MUST INCLUDE DATE AND TIME

Reach out to Target with any delivery errors/issues: targetscheduling@ryder.com and inbound.scheduling@target.com
Must deliver within provided window

DELIVERY APPOINTMENT REQUIRED FOR LTL AND TL - Must schedule using RYDER ONLINE DC SCHEDULER
LTL CARRIERS MUST SCHEDULE OWN APPOINTMENT

Confirmed by CHR - Any issues reach out to Bryan.Reinhart@chrobinson.com

TARGET DISP _____
REQUIRED ON FOR LTL LOADS

CUSTOMER ORDER INFORMATION

| CUSTOMER ORDER NUMBER | # PKGS | WEIGHT | PALLET | DELIVER BY | DEST | PO TYPE | DEPT | ROYAL # |
|-----------------------|------------|-------------|--------|------------|------|---------|------|---------|
| 10001522093-0560 | 122 | 3337 | Y | 27-SEP-25 | 0560 | | 329 | 2648169 |
| Grand Total | 122 | 3337 | | | | | | |

Where the rate is dependent on value shippers are required to date 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 the 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.

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

Royal Appliance Mfg. Co. Shipper Signature

| | | | |
|--|---|---|---|
| 16-Sep-25 Royal Appliance Mfg. Co. 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: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver | Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain <input type="checkbox"/> By Driver/Pieces | CARRIER SIGNATURE / PICK UP 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. <i>Property described above is received in good order, except as noted.</i> |
|--|---|---|---|



BILL OF LADING

SHIP FROM

Royal Appliance Mfg. Co.
880 Robinson Road
Greer SC 29651

SID #: 13841111 Load Number: RTP.528517023

CUSTOMER LOAD#:

SHIP TO

TARGET'S NORTHERN OPR CTR
TARGET DIST CENTER #0560
345 MOUNT VERNON
STUARTS DRAFT, VA,24477

LOC# 0560

FOR PREPAID SHIPMENTS ONLY

CONTACT

TTI Floor Care c/o CHRLTL
14701 Charlson Rd SU 2100
Eden Prairie MN, 55347-5076

BILL OF LADING #: 00416830108372801

Carrier Name: CH ROBINSON

Trailer number: _____

Seal number(s): _____

SCAC: RBTW

Pro number: _____

Freight Charge Terms

(Freight charges are prepaid unless marked otherwise)

PREPAY & ADD _____

PREPAID X _____

COLLECT _____

3rd PARTY _____

Master Bill of Lading: with attached underlying
Bill of Lading

CARRIER INFORMATION

| HANDLING UNIT | | PACKAGE | | WEIGHT | HM | COMMODITY DESCRIPTION | LTL ONLY | |
|---------------|------|---------|------|--------|-----|--|----------|-------|
| QTY | TYPE | QTY | QTY | | (x) | 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 items 360. | NMFC# | CLASS |
| 8 | PLT | 86 | ctns | 2766 | | NEW VACUUMS 6 BUT LESS THAN 8 LBS/FT3 | 121270-2 | 125 |
| | | 17 | ctns | 214 | | NEW VACUUMS 6 BUT LESS THAN 8 LBS/FT3 | 121270-3 | 77.5 |
| | | 3 | ctns | 63 | | NEW VACUUM CLEANERS - SPARE/SERVICE PARTS, TOOLS OR ATTACHMENTS 4 BUT LESS THAN 6 LBS/FT3 | 132680-4 | 175 |
| | | 16 | ctns | 294 | | NEW CLEANING SOLUTION COMPOUNDS - NOT HAZMAT | 48580 | 70 |
| 8 | | 122 | | 3337 | | Grand Total | | |

Where the rate is dependent on value shippers are required to date 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 the 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.

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

Royal Appliance Mfg. Co. Shipper Signature

| | | | |
|---|---|---|---|
| 16-Sep-25 Royal Appliance Mfg. Co. 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: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver | Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain <input type="checkbox"/> By Driver/Pieces | CARRIER SIGNATURE / PICK UP 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. |
|---|---|---|---|



STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - NOT NEGOTIABLE

This form contains only the information necessary for the motor carrier to deliver, rate, and invoice the shipment described below.

Shipper: Ship Date 9/17/2025

DASHING DIVA FRANCHISE CORP
10665 Sanden Dr
DALLAS, TX 75238-1712
Kristopher Larios (516) 808-1375
Reference Number: 0052-7893289-0560

| | |
|-------------|-------------------|
| Carrier: | Daalo Express LLC |
| Pro#: | |
| CHR Order#: | |
| Ship ID#: | 0052-7893289-0560 |

Consignee: Due Date 9/18/2025

Target DC #0560
423 Mount Vernon Rd
Stuarts Draft, VA 24477
Traffic (540) 932-3700
Reference Number: 0052-7893289-0560

All Freight charges PPD/3rd party bill to:
CHRLTL
14701 Charlson Road
Suite 2100
Eden Prairie, MN 55347

| Type/ Reference # | SKU/ UPC | Description | QTY/ UOM | Pallets | Weight | Category/ Temp | NMFC/ Class |
|------------------------------|-------------|------------------------|-------------|---------|--------|-------------------|----------------|
| PO: 0052-7893289- 0560 | | Personal Care Products | 22 Case | 1.00 | 150 | Dry | |
| | | | 22 | 1 | 150 | | |

Shipper Special Instructions:**Consignee Special Instructions:****Comments:**

For any LTL questions/concerns, please email DashingDiva@chrobinson.com.

Shipping Hours: 8:00am-3:00pm, except for 12-12:30pm

PALLET TYPE/MATERIAL: 4-WAY ENTRY/WOOD


DO NOT DOUBLE STACK

For truckload, contact CH Robinson Cleveland at 800-539-7487.

The Shipper certifies that the above named materials are properly classified, described, marked, labeled and packaged, and are in proper condition for transportation, according to the applicable regulations of the Department Of Transportation.

Shipper Signature X [Signature] Date: 9/17/25 Trailer# _____
 Consignee Signature X _____ Date: _____ Seal# _____
 Driver Signature X [Signature] Date: _____ Seal# _____

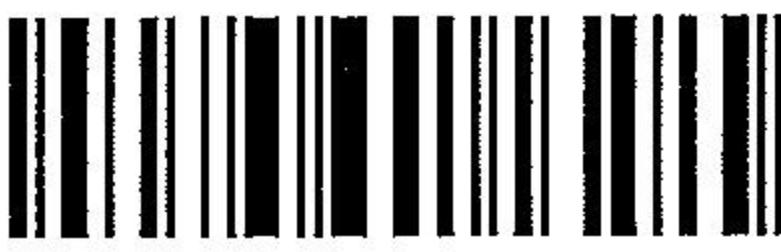
Permanent post-office address of shipper.



Date: 09/12/2025


BILL OF LADING

Page 1 / 2

| | | | | | |
|---|-------------------------------|-----------|---|--|--|
| SHIP FROM | | | Bill of Lading Number: 3781922971 | | |
| Name: LOGITECH INC C/O ARVATO | | |  CHR MEMPHIS | | |
| Address: 3540 S. PRESTON HIGHWAY | | | | | |
| City/State/Zip: SHEPHERDSVILLE, KY, 40165 | | | | | |
| SID#: SSO# | FOB: <input type="checkbox"/> | | | | |
| SHIP TO | | | CARRIER NAME: C.H. ROBINSON WORLDWIDE INC | | |
| Name: TARGET NORTHERN OPS | | | Trailer number: DV59 | | |
| Address: 423 MT VERNON ROAD | | | Seal number(s): 0083-9063 | | |
| City/State/ZIP: STUARTS DRAFT, VA 24477 | | | Load number: DV59 | | |
| CID# | FOB: <input type="checkbox"/> | | SCAC: RBTW Shipment no: 6000435780 | | |
| THIRD PARTY FREIGHT CHARGES BILL TO: | | | Conv. #: PRO number: 528136582 | | |
| Name: LOGITECH C/O CHRLTL | | |  | | |
| Address: 14701 CHARLSON RD STE 2100 | | | | | |
| City/State/Zip: EDEN PRAIRIE, MN 55347 | | | | | |
| SPECIAL INSTRUCTIONS: | | | | | |
| Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3 rd Party <input checked="" type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading | | | | | |
| Appointment Required | | | | | |
| Load ID # | | | | | |
| CUSTOMER ORDER INFORMATION | | | | | |
| See additional page | | | | | |
| GRAND TOTAL | 184 | 1,200 LBS | | | |
| CARRIER INFORMATION | | | | | |
| See Attached Supplement Page(s) | | | | | |
| 3 | 184 | 1200 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: \$ <input type="text"/> Fee Terms: <input type="checkbox"/> Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/> | | |
| NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B). RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations. arvato digital services llc 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 llc. 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. | | | | | |
| 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. | | | Carrier Signature / Pickup Date 09/12/25 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. <i>[Signature]</i> | | |
| Trailer Loaded <input checked="" type="checkbox"/> By Shipper <input checked="" type="checkbox"/> By Driver <input type="checkbox"/> Freight Counted <input type="checkbox"/> By Driver / pallets said <input type="checkbox"/> * contain | | | | | |
| tech_003563_us_lui_05_shipping_bol@arvato.com Shipping_BOL/er / Pieces | | | | | |

E-signed 2025-09-12 03:32PM EDT

tech_003563_us_lui_05_shipping_bol@arvato.com



Date: 09/12/2025

SUPPLEMENT TO THE BILL OF LADING

Bill of Lading Number: 3781922971

| PO NUMBER | | | | | |
|-----------------------|--|------------|--------------|-------------|--|
| CUSTOMER ORDER NUMBER | | # PKGS | WEIGHT | Pallet/Slip | ADDITIONAL SHIPPER INFO |
| 10001513536-0560 | | 20 | 138 LBS | Y | DN #: 56584025 - 3781922971 09/26/2025 53 PC |
| 10001513637-0560 | | 31 | 204 LBS | Y | DN #: 56584047 - 3781922971 09/26/2025 116 PC |
| 10001472642-0560 | | 13 | 126 LBS | Y | DN #: 56584156 - 3781922971 104 PC |
| 10001513475-0560 | | 81 | 493 LBS | Y | DN #: 56583989 - 3781922971 09/26/2025 392 PC |
| 10001472639-0560 | | 37 | 227 LBS | Y | DN #: 56584215 - 3781922971 09/25/2025 148 PC |
| 10001512848-0560 | | 2 | 12 LBS | Y | DN #: 56584095 - 3781922971 09/26/2025 8 PC |
| GRAND TOTAL | | 184 | 1,200 | | |

CARRIER INFORMATION

| HANDLING UNIT | | PACKAGE | | | | COMMODITY DESCRIPTION | LTL ONLY | |
|---------------|--------|---------|--------|----------|----------|--|----------|------|
| QTY | TYPE | QTY | TYPE | WEIGHT | H.M. (X) | NMFC# | CLASS | |
| 1 | PALLET | 1 | CARTON | 10 LBS | | 116030S7 | 92.5 | |
| | | 50 | CARTON | 353 LBS | | UN3091, Lithium metal batteries contained in equipment Lithium metal Batteries in compliance with section II of PI969. Must be handled with care. Flammability hazard exists if package is damaged. For emergency response, please contact 1-800-535-3053, International 1-352-323-3500. Not regulated by the USDOT per 173.185 (c) | 116030S7 | 92.5 |
| | | 2 | CARTON | 12 LBS | | 116030S7 | 92.5 | |
| | | 81 | CARTON | 525 LBS | | Technology, Computer Hardware | 116030S7 | 92.5 |
| 2 | PALLET | 50 | CARTON | 300 LBS | | Technology, Computer Hardware | 116030S7 | 92.5 |
| 3 | | 184 | | 1200 LBS | | PAGE SUBTOTAL | | |

