Royal 3inc.

Bill to: BAT LOGISTICS INC 20 ARENA WAY STE, Council Bluffs, IA, 51501 Invoice Date: 05/22/2023 Invoice #: DC5300025034 Terms: NET 30 Due Date: 06/22/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/19/2023		390 Viking Circle, Rio, WI, USA - 1300 Aviation Parkway, Waco, TX, USA			
			1	2000	2000

TOTAL	
2000	

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

Cat Scale	Please write down if you, the driver, paid or if the comp	any paid.	North Contraction
Date	Amount & Description Truck Wash \$62.70	Driver	Company
5/15/23	noon wayn pouro		
Truck Wash	Please write down if you, the driver, paid or if the comp		
		al fat his dischi denge state i ber	
Date	Amount & Description	Driver	Company
			2 - 2
Lumper Receipts	Please write down if you, the driver, paid or if the comp	any paid.	E Statis
Date	Amount & Description	Driver	Company

Truck Expenses & Repair Receipts	Please write down if you, the driver, paid or	if the company paid.	
Date	Amount & Description	Driver	Company
Other Expenses	Please write down if you, the driver, paid or i	if the company paid.	
Date	Amount & Description	Driver	Company

- In the Start Location write down where you began driving from at the beginning of the week .
- In the End Location write down where you are on Monday at the end of the following week 0

- Under Other Expenses you can write down miscellaneous things paid out of pocket such as: flights, tools, etc. •
- If you are team drivers write down WHO paid under expenses. 0
- Make sure to send the trip sheet BEFORE Tuesday 12:00p.m. or you will NOT get paid for that week on time 0
- ALWAYS attach all receipts and send BOTH sides of the trip sheet 0
- Send trip sheet and receipts all in the same email: bol@royal3inc.com 0
- If you have a long load over the weekend that may be delivered on Tuesday write it down on this week's sheet 0

Tifton GA CHECK 05/15/23 ROYAL 3

Tractor #: 748 Trailer #: NA Check #: 1718178741 Authorization #: 070401

MARCER

1ConventionalOnlyClassicWsh52.502BrightenPoweredTank0.002BrightenPoweredFrontWheel0.004BrightenPoweredBackWheel0.001EngineWashConventional10.20

SubTotal Tax Total

62.70 0.00

Amount Paid Change Given

62.70 62.70 0.00

Received by

TICKET# 087257923 BLUE BEACON TRUCK WASH 27 Expressway Lane Tifton, GA 31794

We want you to be satisfied. If you have a question or concern, please bring it to our attention before you leave. If you have already left the facility, please call.

Truck Wash (229)556-9490 Home Office (785)825-2221 PO Box 856 * Salina, KS 67402-0856 Printed: 05/15/2023



Roz	pal Dinc.	68 Phone: (630) 485-73	50 W. 63 70 ext.300	^d St, Chicago, IL 60638 email:bol@royal3inc.com
Driver Amal	Ry Coppia Co-Driver	Truck		Trailer W34958
*NOTE: All trip sh	neets must ONLY be from Monday pick-up	to Monday delivery of th	e following	Week
Date	Start Location City, State, Zip Code		Notes	
5/15/27	565 ATLANTIS DR Middleburg, FL 72068			
Date L/107	End Location City, State, Zip Code 22 LaMB LOOP		Notes	
5/16/25	TIFTON GA 31794			
Date	PICKUP City, State, Zip Code		Notes	
5/16/27	4130 SEMINOLFLANE			
Date	DELIVERY City, State, Zip Code		Notes	
5/17/29	300 KECKAUE NEW BETHLEHEM, MA			

Date	PICKUP City, State, Zip Code	Notes
5/18/27 Date	OLD FORTZ RODD BRATTLOGORO VT DELIVERY City, State, Zip Code	Notes
5/19/23	47 OLS FERRY ROAD BRATTLE BORD	NOTES
Date	PICKUP City, State, Zip Code	Notes
5/19/23	ARTINGTON, VT	
Date F / D2 / D2	DELIVERY City, State, Zip Code 7707, Park AVC W	Notes
5/00/05 Date	<u>3702 Payk AVE W</u> <u>musca Time IA</u> PICKUP City, State, Zip Code	
	Trekor City, State, Zip Coue	Notes
Date	DELIVERY City, State, Zip Code	Notes
Date	PICKUP City, State, Zip Code	Notes





Non-Negotiable Shipper Bill Of Lading

BILL OF LADING NUMBER 425972-425974

DATE 5/19/2023

CARRIER TRANSAVER SUPPLY CHAIN CO. # 8135993

CONSIGNED TO AND ADDRESS

FROM	WHITE DISTRIBUTION WAREHOUSE
MACK MOLDING CO.	3318 PARK AVE. WEST
79 EAST ARLINGTON ROAD	MUSCATINE, IA 52761
ARLINGTON, VT 05250	UNITED STATES

FREIGHT CHARGES	Indicate with X	
COLLECT	PREPAID	THIRD PARTY BILLING

SHIPPER PACK LIST OR REF. # 425972-425974	THIRD PARTY ADDRESS: RAYMOND CORP C/O TRANSAVER
CONSIGNEES PO /REF # 3281249, 3281250, 3280593	108 WASHINGTON ST. MANLIUS, NY 13104

NO. OF PIECES	DESCRIPTION OF ARTICLES	WEIGHT	NMFC #	CLASS
28 CTNS	PLASTIC ARTICLES AND OR UNITS	3164#	2-4# PER CUBIC FEET	
	ALL ON 28 PALLETS Barn 1800			
TOTAL 28 CTNS		TOTAL 3164#		

These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S. law is prohibited.	FOR FREIGHT COLLECT SHIPMENTS: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. Signature of Consignor Mack Molding
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Shipper	Name
Lisa Kra	mer

Driver Signature SEAL # 8184457

Date

Trailer #

DATE 5/19/2023

PLACE PRO STICKER HERE

Mack Molding Company 79 East Arlington Rd Arlington, VT 05250

Date:05/15/2023		BILL	OFL	AD	ING	1.1		Page	1 of 1		
SHIP FR	OM	Dies				ling Numb	er:6	5347			
Name: Total Wall				BI	III of Lac	ing Nume			The state		
Address: 390 Viking Circle						BARCO	DE	SPACE			
City/State/Zip: Rio, WI 53960 SID#:		F	ОВ:								
SHIP T	го				RRIER NA						
Name: Sherwin Williams	Name: Sherwin Williams Location #: Address: 1300 Aviation Parkway				Trailer number: Seal number(s):						
	City/State/Zip: Waco, TX 76705				SCAC:						
CID#:	EOD					Pro number:					
THIRD PARTY FREIGH Name:	T CHARGES BIL	L 10:	IEIDEM			BARCO	DE	SPACE			
Address:				_	114.04	To me			-		
City/State/Zip:				Freight Charge Terms: Prepaid Collect 3 rd Party							
SPECIAL INSTRUCTIONS.	SPECIAL INSTRUCTIONS:				Master Bill of Lading: with attached						
CUSTOMER ORDER IN					(check box) underlying Bills of Lading FORMATION SLIP ADDITIONAL SHIPPER INFO						
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/S			5/20 100000 0400			0900		
DC5300025034					Appt Dat	- Vra		ive Time 0	735		
					Arrive Da Start Tim			iah Time &	50		
		-	-	1	Piece Co	77		ma Count	<u>a</u>		
A Durf	1	The second			Uniçade		-				
					Driver						
GRAND TOTAL	and a strength	CARE	IER INFOR		***	de tettores					
HANDLING UNIT PACKAGE			COM	MO	DITY DES	CRIPTION		LTL C	ONLY		
QTY TYPE QTY TYPE	WEIGHT	(X)		See	e Section 2(4) of NMFC	ention in handling or stowing reportation with ontinary car 2 frem 350	must be m.	NMFC #	CLASS		
37	43200	51	ucco Mat	enais	S						
			_								
								RECEIV			
									TACL		
		IS SOL		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:				COD Amount: \$						
							_				
"The agreed or declared value of the property is specificate	ally stated by the ship	per to be not exc	eesing		Fee Te C	rms: Collect ustomer check		Prepaid:			
NOTE Liability Limitation for loss on RECEIVED, subject to individually determined rates or co	r damage in t	this shipm	ent may b	e app	olicable. See		706(c)	(1)(A) and (B).		
between the carrier and shipper, if applicable, otherwise the established by the carrier and are available to the shipper	o the rates, classifica	tions and rules t	hat have been	an	nd all other lawful	charges.	is sinpin		r Signature		
regulations	Trailer Lo		eight Coun	ted:		CARRIER SIG		RE / PICKUP	DATE		
SHIPPER SIGNATURE / DATE	visio certity that the above named materials are properly classified. By Shipper By Shipper By Shipper					Carrier acknowledges reco	mation was	made evaluation and/or (rds. Carrier certifies carrier has the DOT		
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classifie perkaged, marked and label d, and are in proper condition for	ву ву в	hipper			and the second s	smergency response guid	ebook or eq	uivalent documer/ation	in the vehicle.		
SHIPPER SIGNATURE / DATE Thy is to certify that the above named materials are properly classified pytkaged, marked and laterial, and are in knopp condition for vansportation according to the applicable regulations of the DOT. All carpo tendered the transfort is sufficient to incoroction. By tendening cargo to carrier, shipper grants consent to such as inspection.			By Driver/	pallets t	said to contain	smargency response guid	pe to koode	uivalent documentation	in the vehicle.		
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