



Bill to:
TRAFFIX
141 W Jackson BLVD Suite #300A,
Chicago,
IL,
60604

Invoice Date: 05/22/2023
Invoice #:
Terms: NET 30
Due Date: 06/22/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/19/2023		79 E Arlington Rd, Arlington, VT 05250, USA - 3702 Park Ave W bldg 5, Muscatine, IA, USA			
			1	1700	1700

TOTAL
1700


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



PAYMENT OPTIONS

Instapay by Smart Fleet Funding 12 hours after invoice - 2.99%	 SMART FLEET FUNDING
INSTAPAY PAYMENT INSTRUCTIONS » Email: instapay@smartfleetfunding.com » Subject: [Instapay - Traffic Load # ...]	REGULAR PAYMENT INSTRUCTIONS TRAFFIX RECOGNIZES INVOICE DATE AND PAYMENT AGING AFTER COMPLETE DOCUMENTATION IS RECEIVED Email: carrierpayment@traffix.com Subject: [Regular - Traffic Load # ...] Any questions ONLY related to payment, please email AP@traffix.com or Call 855-240-0730
SUBMISSIONS MUST INCLUDE » TRAFFIX load confirmation » Proof of Delivery » Invoice with Traffic load number	
<p style="text-align: center;">Factoring? Considering it? Smart Fleet Funding is the Smartest and Fastest way to get paid. Save 10% Of Your Current Factoring Fee When You Switch! Call or Email today: 888-236-7345 save10@smartfleetfunding.com</p> <p style="text-align: center;">Hablamos Español / www.smartfleetfunding.com</p>	
Submission Instructions: • One Invoice/Load per email submission • Email Subject MUST Read: Traffic Load # 9999999 (Found on the top right-hand corner of Traffic Load Confirmation) • Email MUST Include: Your Invoice, TRAFFIX Load Confirmation, Signed Proof of Delivery + supporting receipts and documents • Supported formats:PDF,JPEG and TIFF	

Traffix Load #: T00224316

Date Tendered: 05-08-2023



Submit Invoices to:

carrierpayment@traffix.com

or call 855-240-0730

This Load Confirmation must accompany Invoice

Accept/Decline/View Tender

Please click this link to Accept a Tender: [Click to Accept](#) Please click this link to Decline a Tender: [Click to Decline](#) Please click this link to View a Tender: [Click to View](#)

CARRIER INFORMATION

CARRIER NAME: Royal3 Inc

CONTACT NAME: Luc Sipovac

MC#:MC944686

EMAIL ADDRESS: kelly@royal3inc.com

TRAFFIX CONTACT

CONTACT NAME: Desean Gambrell

PHONE NUMBER: 972 349 1748 x1865

EMAIL ADDRESS: dgambrell@traffix.com

RATE CONFIRMATION INFORMATION

Cost Type	Accessorial Desc.	Amount
Freight		\$1,700.00 USD
Total	USD	\$1,700.00

LOAD SUMMARY

Picks / Drops:	1 Pick(s) 1 Drop(s)
Equipment Required:	Dry Van- 53 FT
Mode and Service:	TL
Total Miles:	1,035.47 Mi
Total Weight:	40,000 Lb
Total Pallets:	0
Total Pieces:	0
Trailer Length:	
Service Option:	OTR
Is Bonded:	false
Total Shipment Value:	\$95,000.00 USD

SHIPPER - PICKUP 1 OF 1

SHIPPER NAME: MACK MOLDING

SHIPPER ADDRESS: 79 EAST ARLINGTON RD Arlington, VT 05250

TELEPHONE: 8023750500

CONTACT: Shipping

Pickup Date: 05-19-2023 - 05-19-2023

Appt Required	Y	Appt Made	N
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Appointment Time: 08:00 - 16:00

Reference Numbers

Pickup#: 8135993

PO Number: 8135993

BOL#: 8135993

Primary Trace: 8135993

Appointment Number: 8135993

ProBillNum: 8135993

Items Confirm Receipt Of								
Commodity	Handling Units	Unit Type	Stackable	Pieces	Pieces Type	Weight	DIMS (L x W x H)	Temperature
MACHINERY	0	Pallet	Yes	0		40000 Lb	18.00 X X	
SHIPPER Notes								

Terms and Conditions

FAILURE TO COMPLY WITH THESE TERMS & CONDITIONS WILL RESULT IN NON PAYMENT OF INVOICE:

1. CARRIER MUST ADVISE TRAFFIX OF ANY DELAYS OR DISCREPANCY ATLEAST 2 HOURS PRIOR TO PICK UP / DELIVERY APPOINTMENT TIME. MISSED OR LATE APPOINTMENTS MAY BE SUBJECT TO FINES AND/ OR CHARGE BACK BY TRAFFIX.
2. DOUBLE BROKERING OF TRAFFIX FREIGHT IS STRICTLY PROHIBITED. TRUCK/TRAILER INFORMATION ON BOL MUST MATCH CARRIER CONFIRMATION.
3. TEAM SERVICE REQUIRES A MINIMUM OF 1000 MILES OF TRAVEL PER 24 HOUR PERIOD. LESS THEN 1000 MILES MAY BE SUBJECT TO FINES AND/ OR CHARGE BACK BY TRAFFIX.
4. BACK SOLICITATION WILL RESULT IN LEGAL ACTION AND NON PAYMENT.
5. CARRIER IS RESPONSIBLE FOR ALL LOADING AND UNLOADING CHARGES.
6. CARRIER MUST PULP ALL PRODUCT DURING LOADING AND ENSURE TEMPERATURE MATCHES THEIR BILL OF LADING AND LOAD CONTRACT. DISCREPANCY MUST BE REPORTED TO TRAFFIX DISPATCH IMMEDIATELY AND MUST BE APPROVED BY TRAFFIX PRIOR TO DEPARTURE FROM SHIPPER.
7. CARRIER AGREES THAT THIS CONTRACT IS LIMITED TO THE CARRIER BROKER RELATIONSHIP AND ALSO AGREES TO HOLD THE SHIPPER, CONSIGNEE, AND OTHER BENEFICIAL PARTIES HARMLESS AGAINST ANY DISPUTES ARISING FROM PAYMENT OR SERVICE.
8. ANY ADDITIONAL CHARGES MUST BE APPROVED BY TRAFFIX PRIOR TO INVOICING. CARRIER MUST OBTAIN A REVISED LOAD CONTRACT FROM TRAFFIX DISPATCH FOR THE EXPENSE TO BE PROCESSED.
9. CARRIER IS RESPONSIBLE FOR ALL ASSOCIATED BOND CHARGES AND FINES. PROOF OF BOND CANCELLATION MUST BE PRESENTED FOR PAYMENT.
10. CLAIMS AND DAMAGES WILL BE HELD AGAINST CARRIER ACCOUNT IN ARREARS UNTIL THE CLAIM IS SETTLED. TRAFFIX SHALL HAVE ALL THE RIGHTS AND REMEDIES OF CARRIER UNDER CANADIAN AND UNITED STATES LAW TO PURSUE THE CONSIGNEE/BENEFICIAL RECIPIENT FOR UNPAID FREIGHT IN THE EVENT THAT THE CARRIER HAS BEEN PAID FOR THE LOAD BUT TRAFFIX HAS NOT.
11. ORIGINAL SIGNED PROOF OF DELIVER, CUSTOMS CLEARANCE, AND TRAFFIX LOAD CONTRACT ALL REQUIRED FOR INVOICE SUBMISSION. ALL CARRIER DOCUMENTATION SHOULD BE SUBMITTED TO CARRIERPAYMENT@TRAFFIX.COM WITHIN 72 HOURS OF DELIVERY. IF CARRIER DOCUMENTATION IS RECEIVED MORE THAN 60 DAYS AFTER LOAD HAS DELIVERED, CARRIER WILL HAVE TO GO THROUGH AN APPEAL PROCESS TO BE PAID ON LOAD
12. JURISDICTION WILL BE DETERMINED BY THE TRAFFIX BILL-TO: CITY / STATE (PROVINCE) AS REFERENCED IN THIS CONTRACT.
13. FUEL ADVANCES OF 40% ARE CHARGED A FEE OF 5% OF THE REQUESTED ADVANCE AMOUNT.
14. IF DETENTION OCCURRED, TIMES MUST BE STAMPED AND SIGNED BY PICKUP AND/OR DELIVERY FACILITY IN ORDER TO BE PAID. CARRIER IS ALSO REQUIRED TO NOTIFY TRAFFIX PRIOR TO DETENTION OCCURRING TO ASSIST WITH THE LOADING/UNLOADING PROCESS.
15. IF LUMPER OCCURRED AT DELIVERY, CARRIER MUST NOTIFY TRAFFIX OF AMOUNT PAID & SUBMIT RECEIPT WITHIN 48 BUSINESS HOURS OF DELIVERY OR LUMPER WILL NOT BE REIMBURSED.
16. SEAL MUST REMAIN INTACT AT ALL TIMES AND MAY NOT BE BROKEN WITHOUT CONSENT FROM TRAFFIX. IN THE EVENT THAT A SEAL IS BROKEN BY CANADIAN BORDER SERVICES OR UNITED STATES CUSTOMS & BORDER PROTECTIONS, PLEASE ADVISE TRAFFIX IMMEDIATELY WITH THE NEW SEAL INFORMATION. ANY SEAL BROKEN BY THE CARRIER WILL RESULT IN AN INSURANCE CLAIM FOR THE FULL VALUE OF THE PRODUCT ONBOARD.

The link provided below contains important information regarding the FDA's new regulations for the transportation of food for human and animal consumption. As a carrier you are responsible for meeting the regulations that are outlined in the attached documents. Please go to the attached link and read the documents. <https://traffix.com/media/download/68>

Accept/Decline/View Tender

Please click this link to Accept a Tender: [Click to Accept](#) Please click this link to Decline a Tender: [Click to Decline](#) Please click this link to View a Tender: [Click to View](#)

954-673-2928

Date: 5/18/2023

BILL OF LADING

Page 1 of 3

SHIP FROM

Name: KIK MARS
Address: 115 DOWNIEVILLE ROAD
City/State/Zip: MARS PA 16046 United States
Order#: 3677515
SID#: 2680647 Use for Billing Purpose

FOB []

Bill of Lading Number: 1796702



(402) 1796702

CONSIGNEE

Name: C&S Wholesale Grocers-Brattleboro
Location#: BRATTLEBORO-CSWHO
Address: Old Ferry Road Brattleboro VT 05301
City/State/Zip: United States
Phone#:
CID#:
Attention:

FOB [X]

CARRIER NAME: 129015 AXLE LOGISTICS
Trailer/Container #: W34958
Seal Number(s): 0331008
SCAC: AXLL
Pro Number:

SPECIAL INSTRUCTION TO CARRIER:
Delivery Date: 05/18/23 - 05/19/23

DELIVER TO

Freight Charge Terms: Prepaid

[]
(check box)

Master Bill of Lading: with
attached underlying Bills of
Lading

SPECIAL INSTRUCTIONS

For Hazardous Materials [or Dangerous Goods] Incident
Spill, Leak, Fire, Exposure, or Accident
Call CHEMTREC Day or Night
1-800-424-9300 / 001-703-527-3887

CHRIS GAUDREAU
CSWG
CASES REC 1008
5/19/23

Sign In Time: 1100
Bump Time:
Load Out Time: 1130

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	#PKGS (in SO UoM)	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
627121	1,008	44,382.24 LB	Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL	1,008	44,382.24 LB		**NO ACCESSORIALS CAN BE APPLIED WITHOUT PRIOR AUTHORIZATION

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be 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
		1008	CA	43,227.24 LB		11004085391 AUSTIN POOL TCH SHOCK NON4x128 UPC# 054200001763 Cust Item#	48580	060
21	PL			1,155.00 LB		PALLET COUNT		
21		1008		44,382.24 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: [X]

Customer check acceptable: []

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

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

Shipper Signature

SHIPPER SIGNATURE / DATE

I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations.

Shipper Signature

Date

Trailer

Loaded:
☐ By Shipper
☐ By Driver

Freight Counted:

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

Carrier Signature

Date