

**Bill to:**

GILTNER LOGISTIC SERVICES, INC  
PO BOX 5129,  
TWIN FALLS,  
ID,  
83303

Invoice Date: 08/25/2023

Invoice #: 1057886

Terms: NET 30

Due Date: 09/25/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/23/2023		64490 HIGHWAY 434 Lacombe, LA - 8100 60th Street, Kenosha, WI, USA			
			1	1900	1900

TOTAL
1900

**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**



GILTNER LOGISTICS, INC.  
DOCS@GILTNER.COM  
PO BOX 5129  
TWIN FALLS ID 83303

PRO # 1057886

Rate Confirmation

08/22/23 16:46:11 (EST)

F  
R  
O  
M  
DUSTIN MILLER  
(208) 209-3093  
(208) 914-7181 (f)  
dmiller@giltner.com

C  
A  
R  
R  
I  
E  
R  
ROYAL3 INC  
(630) 485-7370 (p) Att: MARICA 630.485.7370  
(630) 485-6980 (f)  
MC # 944686 Truck # 704  
DOT 2828543 Trailer # 173509  
Driver ALBERTO Cell # (305) 496-2380

Size & Type: 53' VAN  
Pieces: 3534

Description: FOOD GOODS  
Weight: 29262

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1900.00	USD
TOTAL RATE	1900.00	

PICK 1

J.M. SMUCKER LLC  
64490 HIGHWAY 434  
LACOMBE LA 70445  
Hours : 0001-2359

Appointment 08/22/23 @ 16:30  
Appt Notes: PU# 1340280  
Pieces: 3534  
Weight: 29262  
Seal # X103  
Ref # PU# 1340280

STOP 1

ASSOCIATED WHOLESALE K  
8100 60TH STREET  
KENOSHA WI 53144  
Hours : 0130-  
No detention here- lumper is prepaid

Appointment 08/23/23 @ 21:00  
Appt Notes: 20829 VAN  
Pieces: 3534  
Weight: 29262  
Seal # X103  
Ref # 20829 VAN

PLEASE CALL 208-293-9613 to provide status updates or if you need assistance on a shipment. \*\*DETENTION REQUESTS-LUMPER-OSD must be reported at time of occurrence to BROKER via phone 208-293-9613 or email g3brokerage@giltner.com\*\* All shipment paperwork (including POD's and receipts for reimbursement) must be submitted to Giltner Logistics via email at docs@giltner.com and g3brokerage@giltner.com within 48 hours of final delivery for prompt payment. Lumpers will only be reimbursed with valid receipts. No detention will be paid without IN AND OUT TIMES marked on the bills by SHIPPER or CONSIGNEE and prior approval by BROKER. A missed pu/late delivery fee of up to \$250 per instance will apply to all missed appts caused by Carrier. If this shipment is double brokered, the agreement is VOID. Carrier is responsible for compliance with CA Air Resource Board if operating in CA. Carrier will indemnify BROKER for any fines received for not complying. This confirmation governs the shipment/freight movement referenced above as of the date specified & hereby amends, is incorporated by reference, & becomes part of that certain BROKER-CARRIER agreement executed between BROKER and CARRIER. Carrier agrees to sign and return confirmation via email or fax. Carrier shall be in agreement with rates listed on rate agreement and any change in the rate agreement between BROKER and CARRIER must have subsequent rate agreement issued by BROKER. Rates include all charges including fuel surcharge.

(Rate Confirmation Details on Next Page)

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

Doc ID: 2623062219461461  
Send Carrier Bills to the Address Above  
Sertifi Electronic Signature

PRO #1057886

must appear on all Invoices



GILTNER LOGISTICS, INC.  
DOCS@GILTNER.COM  
PO BOX 5129  
TWIN FALLS ID 83303

PRO # 1057886

Rate Confirmation

08/22/23 16:46:11 (EST)

F  
R  
O  
M

DUSTIN MILLER  
(208) 209-3093  
(208) 914-7181 (f)  
dmiller@giltner.com

C  
A  
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ROYAL3 INC  
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MC # 944686 Truck # 704  
DOT 2828543 Trailer # 173509  
Driver ALBERTO Cell # (305) 496-2380

*This confirmation governs the shipment/freight movement referenced above as of the date specified & hereby amends, is incorporated by reference, & becomes part of that certain BROKER-CARRIER agreement executed between BROKER and CARRIER. Carrier agrees to sign and return confirmation via fax. Carrier shall be in agreement with rates listed on rate agreement and any change in the rate agreement between BROKER & CARRIER must have subsequent rate agreement issued by BROKER & signed by CARRIER. Rates include all charges including fuel surcharge. A minimum charge of one hundred dollars shall apply to all missed appts. No detention will be paid at PU or DEL without IN AND OUT TIMES marked on the bills by SHIPPER or CONSIGNEE and prior approval by BROKER. If this shipment is double brokered, the agreement is VOID. Carrier is responsible for compliance with CA Air Resources Board if operating in CA. Carrier will indemnify BROKER for any fines received for not complying. \*\*PLEASE EMAIL OR FAX SIGNED RATE CONFIRMATION TO EMAIL OR FAX ON UPPER RIGHT HAND CORNER LISTED ON RATE CONFIRMATION\*\* \*\*\*ALL INVOICES MUST BE EMAILED TO DOCS@GILTNER.COM FOR PROMPT PAYMENT\*\**

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

Doc ID: 2623062219461461  
Send Carrier Bills to the Address Above  
Sertifi Electronic Signature

PRO #1057886

must appear on all Invoices

E-Signed : 08/22/2023 03:46 PM CDT

*Marisa S.*

marisa@royal3inc.com  
IP: 93.86.71.46

Sertifi Electronic Signature  
DocID: 20230822154611461




Trailer Closed : 8/23/23, 3:01 AM

## BILL OF LADING

Page 1

M27

<b>SHIP FROM</b> JM SMUCKER LACOMBE 64490 LA-434 Lacombe, LA 70445 FOB: <input type="checkbox"/>		<b>Bill of Lading Number:</b> 1340280  (402) 1340280	
<b>SHIP TO</b> AWG - KENOSHA - VMI 5521 88TH AVENUE KENOSHA, WI 53144-7468 FOB: <input type="checkbox"/>		<b>Carrier Name:</b> Carrier Pick Up <b>Trailer Number:</b> 173509 <b>Seal number(s):</b> 0218471 <b>SCAC:</b> CPUP <b>Pro #:</b>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b> AWG - KENOSHA - VMI 5521 88TH AVENUE KENOSHA, WI 53144-7468		<b>Freight Charge Terms:</b> (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/>	
<b>SPECIAL INSTRUCTIONS:</b>		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	

Associated Wholesale Grocers Kenosha WI  
Cases Received  
Cases Short  
Cases Over  
Cases Damaged  
Reason for Refusal  
Received by Printed  
Received by Signature

3514  
8/24/23

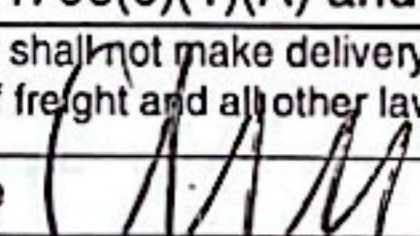
CUSTOMER ORDER INFORMATION						
CUSTOMER ORDER NUMBER	# Cases	NET WEIGHT	Pallet/Slip (Circle One)		REQ DELIV	ADDITIONAL SHIPPER INFO JMS ORD NUM
20829	3514.0	27138.97	Y	N	8/21/23, 11:00 PM	42358966-68764
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
	0.0	0.00	Y	N		
<b>GRAND TOTAL</b>	<b>3514</b>	<b>27138.97</b>				

CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		GROSS WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE			Commodities requiring special or additional 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
0.0		3514.0	Cases	27138.97	0.0	Foodstuffs, other than frozen, Group IV, viz(30 or greater)	73260	60
55.0	Full Chep	0.0		3025.0	0.0	PLATFORM		
55.0		3514.0		30163.97		<b>GRAND TOTAL</b>		

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>COD Amount:</b> \$ _____ <b>Fee Terms:</b> <b>Collect:</b> <input type="checkbox"/> <b>Prepaid:</b> <input type="checkbox"/> <b>Customer check acceptable:</b> <input type="checkbox"/>
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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.

<b>SHIPPER SIGNATURE/DATE</b> 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. <b>Dispatched Time :</b> _____	<b>Trailer Loaded:</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<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>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. <b>Signature</b>  <b>Shipper</b>
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Alberto truck # 704

TIME IN 8:00 PM  
TIME OUT 3:50 AM

Scanned with CamScanner