Royal 3inc.

Bill to: NEON LOGISTICS LLC 7154 E STETSON DR STE 200, SCOTTSDALE, AZ, Invoice Date: 12/15/2023 Invoice #: 117378032 Terms: NET 30 Due Date: 01/15/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
12/13/2023		315 Ship Canal Parkway BUFFALO, NY 14203 - 3600 MEETING STREET ROAD NORTH CHARLESTON, SC 29405			
			1	\$2,500.00	\$2,500.00

TOTAL	
\$2,500.00	

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



Carrier Name: ROYAL	L3 INC	Load #:	117378032
Carrier MC:944686		. .	
Ready Date: 12/13/20			er PO: TAIL 412-55174 // MIDDLE 424-63093 // NOSE 427-57924
Date Needed: 12/15/2	023	Shipper	Ref: 942863
Service Level: Norma	d .	Trailer T	ype/Size: Van / Full
		Tempera	ature:
Shipper Information:			
Name:	General Mills- Buffalo	Contact:	
Address:	315 Ship Canal Parkway	Phone:	
	BUFFALO, NY 14203	Pickup	12/13/2023 10:15 AM -
		Appointment:	10:15 AM
Distance in standing of	REF# FDPNTL8 ***** TAIL 412-55174 // MIDDLE 424-63093		
Pickup Instructions:	// NOSE 427-57924		
Additional Stop Infor	mation:		
Stop Type:	Drop		
Name:	RESTAURANT DEPOT #412	Contact:	
Address:	2030 John Crosland Jr Dr	Phone:	
	CHARLOTTE, NC 28208	Email:	receive.412@jetrord.com
Scheduled:	12/14/2023 9:00 AM - 9:00 AM	Appointment:	12/14/2023 9:00 AM - 9:00 AM
Instructions:	412-55174		
Additional Stop Infor	mation:		
Stop Type:	Drop		
Name:	RESTAURANT DEPOT #424	Contact:	
Address:	1060 E BUTLER RD	Phone:	
	GREENVILLE, SC 29607	Email:	receive.424@jetrord.com
Scheduled:	12/14/2023 1:00 PM - 1:00 PM	Appointment:	12/14/2023 1:00 PM -
	404.00000		1:00 PM
Instructions:	424-63093		
Consignee Informatio			
Name:	RESTAURANT DEPOT #427	Contact:	
Address:	3600 MEETING STREET ROAD	Phone:	
	NORTH CHARLESTON, SC 29405	Delivery	12/15/2023 9:00 AM -9:00 AM
		Appointment:	
B B B B B B B B B B	427-57924 For anything afterhours please reach out to	Delivery	
Delivery Instructions	afterhours@neon-logistics.com or call 480-658-0377	estimated	12/15/2023-9:00 AM9:00 AM
		date/time:	

Handling Units	Package Type	Pieces	HAZMAT	List of Items	Total Weight
7	Pallet	1		foodstuff	17,595
4	Pallet	1		foodstuff	9,180
7	Pallet	1		foodstuff	15,477

PICKUP INSTRUCTIONS:

REF# FDPNTL8 ***** TAIL 412-55174 // MIDDLE 424-63093 // NOSE 427-57924

DELIVERY INSTRUCTIONS:

427-57924

 Rate:
 USD \$2,500.00

 TOTAL:
 USD \$2,500.00

 DETENTION IS NOT VALID UNLESS ON THE TRACKING APP

Carrier to send invoice to ap@neon-logistics.com within 180 days of delivery of freight.

Carrier is bound by the terms of this Load Tender and Rate Confirmation and by the terms of the Broker-Carrier Agreement. Broker has no obligation to remit amounts to Carrier for any non-approved Accessorial Charges or for such other amounts including Detention Pay where Shipper has not consented to the same in writing, adequate documentation exists, and for which Broker is not paid by Shipper. As outlined above, charges may be assessed to Carrier for late pickup or delivery, or other circumstances resulting in a rate reduction. Carrier must strictly adhere to all Hours of Service regulations. It is the Carrier's and driver's responsibility to ensure that the load is safe, secure, and legal for transport. Re-brokering, assigning, interlining, or otherwise breaching the terms of the Broker-Carrier's invoice.

Invoicing Instructions : All undisputed portions of invoice settlements will be paid within 30 days of Broker receiving invoice, together with original completed and properly signed Bill of Lading and signed Load Tender and Rate Confirmation.

The undersigned hereby acknowledges as correct and accepts the referenced order on behalf of Carrier. The undersigned agrees that the rates and charges indicated above include all costs and fees in connection with the order as described. The undersigned agrees to each and every term and condition of this Rate Confirmation.

Phone: | Fax: Please sign and return via fax or email to ap@neon-logistics.com

Carrier Signature: MC#:

Marisa 2 944686 <u>)erano</u>

Driver Name: Driver Phone#:

Please call immediately with any questions, concerns, or problems! Send Invoicing to: Neon Logistics | 6900 E Camelback Rd Suite 1100 | SCOTTSDALE, AZ 85251

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