



**Bill to:**  
UNITED DISPATCH OF IOWA  
P.O. Box 45917,  
Omaha,  
NE,

Invoice Date: 01/17/2024  
Invoice #: 108843  
Terms: NET 30  
Due Date: 02/17/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/15/2024		900 Doris Dr, Evansdale, IA 50707, USA - 682 HIGHWAY 78 NW MONROE, GA 30655			
			1	\$2,600.00	\$2,600.00

<b>TOTAL</b>
\$2,600.00

**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**

**LOAD TENDER**

ROYAL 3 INC

Phone: (630)566-1257

Fax: (630)485-6980

**UNITED DISPATCH OF IOWA INC**

PO Box 45917

Omaha NE 68145-0917

BILLING EMAIL: m.sedlacek@uniteddispatch.com

Phone: (319)-364-7519 Fax: 319-364-6957

Exhibit "A" Schedule of Rates &amp; Charges

THIS SIGNED CONFIRMATION MUST ACCOMPANY BILLING.

**LOAD TENDER**

Load Ref #

**108843**

Mst Bol #

If possible, please enter the following information before returning.

Tractor: \_\_\_\_\_ Trailer: \_\_\_\_\_ Driver: \_\_\_\_\_

Dispatcher: \_\_\_\_\_

**Shipper** RYDELL WAREHOUSE LLC  
900 DORIS DR  
EVANS DALE, IA 50707-**P/U Date:** 01/15 13:00 to 01/15 to 13:00**Appt Set:** N **With:** 1PM APPT**Trlr Req:** 53' VAN**Pieces:****Weight:** 10,000**Special Instructions:**

Take photo after trailer is loaded & before trailer is unloaded  
MC# & DOT# MUST MATCH AFFIXED NUMBERS ON SIDE OF YOUR TRUCK.  
DO NOT CHANGE SCHEDULED DELIVERY APPOINTMENT  
This is a NO-TOUCH load, you will NOT be paid to load or unload freight.  
Please Do not contact Origin or Destination to change anything!!!  
If a change is needed Call Bob @ United 800-428-9272 OR 319-361-2326 24/7 cell  
\*\*\*SEAL MUST BE BROKEN BY CUSTOMER AND THE DELIVERY BOL MUST BE  
SIGNED SEAL IN TACT / SHIPPER LOAD AND COUNT.

**Pickup Number:** 108843**Final** LKQ POTOMAC MID ATLANTIC  
682 HIGHWAY 78 NW  
MONROE, GA 30655**Del Date:** 01/17 08:00 to 01/17 to 08:00**Appt Set:** Y **With:** 8AM APPT**Load Notes:** DRIVER MUST Take photo after trailer is loaded & before trailer is unloaded  
DRIVER MUST Take photo after trailer is loaded & before trailer is unloaded

Carrier Pay	Rate	Rate Type	Mult	Amount
LINE HAUL PAY	\$2600.00	FLAT	0	\$2,600.00
<b>Total</b>				<b>\$2,600.00</b>

**LOAD TENDER****ROYAL 3 INC****Phone: (630)566-1257****Fax: (630)485-6980****UNITED DISPATCH OF IOWA INC****PO Box 45917****Omaha NE 68145-0917****BILLING EMAIL: m.sedlacek@uniteddispatch.com****Phone: (319)-364-7519 Fax: 319-364-6957****Exhibit "A" Schedule of Rates & Charges****THIS SIGNED CONFIRMATION MUST ACCOMPANY BILLING.****LOAD TENDER**

Load Ref #

**108843**

Mst Bol #

If possible, please enter the following information before returning.

**Tractor:** \_\_\_\_\_ **Trailer:** \_\_\_\_\_ **Driver:** \_\_\_\_\_**Dispatcher:** \_\_\_\_\_

Carrier, Please sign and fax back to (319)364-6957

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**Carrier Instructions**

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HAVE DRIVER CALL FOR DISPATCH.

(800)428-9272 / (319)364-6957

DRIVER MUST CALL TO BE DISPATCHED - NO EXCEPTIONS!!!

Motor Carrier listed above MC# &amp; DOT# MUST MATCH the affixed numbers on side of your truck.

IF DOUBLE BROKERED, THIS AGREEMENT IS VOID.

X \_\_\_\_\_ Please Sign &amp; Email with billing

Upon pickup of shipment this load tender constitutes an agreement of rates, charges and all below provisions, between United Dispatch of Iowa Inc. and the Motor Carrier listed above. And if the load originates or delivers in the state of California, that said carrier's equipment is CARB certified to operate within that state.

Carrier accepts all responsibility for ensuring the delivery of the goods.

United Dispatch of Iowa Inc. must be notified of any delay on loading or unloading prior to detention starting or detention request will be denied.

When requesting detention, signed bills with in and out times must be sent in to United Dispatch within 24hrs of the delay or detention will be denied.

Late delivery charges will be a minimum of \$300.00 per day, to be deducted from the revenue.

Carrier will not re-broker, co-broker, subcontract, assign, interline or transfer the transportation of shipments hereunder to any other persons or entity conducting business under a different operating authority. If carrier breaches this provision, broker shall have the right of not paying the monies it owes the carrier.

Motor Carrier agrees not to solicit freight from any shipper, consignor, consignee or customer, associated with this shipment for a period of 24 months from the delivery date. In the event of breach of this provision, United Dispatch of Iowa Inc. shall be entitled to a commission of not less than 20% of the gross transportation revenue for a period of 24 months.

Any deviation of this agreed rate, including detention, fuel surcharges, labor, etc., must be approved in writing and signed by both parties. A copy of this signed approval must accompany any billing, for payment to be made within terms.

Please send signed bill of lading to United Dispatch of Iowa to the address listed above.

**\*ALL TRAILERS MUST BE SEALED AND SEALS REMOVED BY CONSIGNEE ONLY\***

\* AFTER HOURS (319) 361-2326 BOB

\* FAX (319) 364-6957

\* BILLING EMAIL: m.sedlacek@uniteddispatch.com



Receiver/Driver Copy

Receiver/Driver Copy

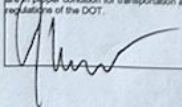
Inv# MID ATLANTIC

## BILL OF LADING

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SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO:	
Name: Rydell Warehousing Address: 900 Doris Drive City/State/Zip: Evansdale, IA 50707 SID#:		Name: LKQ Potomac Address: 682 US Hwy 78 City/State/Zip: Monroe, GA 30665 CID#:		Name: Address: City/State/Zip:	
Bill of Lading Number		CARRIER NAME:		Freight Charge Terms:	
BAR CODE SPACE		Trailer number:		Prepaid Collect 3rd Party	
Seal number(s): 54281739		SCAC:		(check box) Master Bill of Lading: with attached underlying Bills of Lading	
Pro number		BAR CODE SPACE			
SPECIAL INSTRUCTIONS:					
CARRIER & CUSTOMER ORDER INFORMATION					
Item Number/Description	# Units	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
Auto Parts	185pcs	10000lbs	Y	N	Sign for total piece count only
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL					
GRAND TOTAL					

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

SHIPPER SIGNATURE / DATE	Trailer Loaded:	Freight Counted:	Receiver Signature / Total Piece Count
 1/15/24	X By Shipper By Driver	X By Shipper X By Driver/pallets/pieces X By RECEIVER # OF UNITS	