

**Bill to:**

AM TRANS EXPEDITE, INC
710 WEST BELDEN AVENUE SUITE B,
Addison,
IL,
60101

Invoice Date: 01/25/2024

Invoice #: 540863

Terms: NET 30

Due Date: 02/25/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/24/2024		546 English Rd, Rocky Mount, NC, USA - 490 IN-60, New Pekin, IN, USA			
			1	\$1,400.00	\$1,400.00

TOTAL
\$1,400.00

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**



AM TRANS EXPEDITE, LLC
P.O. BOX 67066
INVOICES@AMTRANSEXPEDITE.COM
NEWARK NJ 07101-8082

PRO # 540863

Rate Confirmation

01/24/24 11:50:44 (EST)

F
R
O
M
CALEB ANDERSON
X 308 (p)
(847) 238-0400 (f) (704) 998-0397 (c)
andersonc@amtransexpedite.com

C
A
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E
R
ROYAL3 INC
(630) 485-7370 (p)
(630) 485-6980 (f)
MC # 944686 Truck #
DOT 2828543 Trailer #
Driver Cell #

Size & Type: 53' VAN
Pieces: 73

Description: CLASS 125 ITEM
Weight: 4890

Miles: 611

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1400.00	! 104300676628 ! *MACROPOINT MUST BE ACCEPTED OR \$100 DEDUCTION PER DAY WILL OCCUR** POD MUST BE TURNED IN WITHIN 24 HOURS OR \$100 PER DAY DEDUCTION WILL OCCUR** DRIVER/DISPATCH MUST ALERT IF ANY PROBLEMS OCCUR DURING TRANSIT, AND MAY BE LATE OR \$250 LATE FEE WILL OCCUR PER DAY**
TOTAL RATE	1400.00	

PICK 1

HUBBELL LENOIR
546 ENGLISH RD.
ROCKY MOUNT NC 27804
Hours : 0800-1600
Phone/Contact: (252) 316-7058 NOT AVAILABLE

Appointment 01/24/24 @ FCFS
Appt Notes: 4501094475
Pieces: 73
Weight: 4890
Ref # 1043006766280102

STOP 1

ERVIN CABLE CONSTRUCTI
490 IN-60
NEW PEKIN IN 47165
Hours : 0800-1300
Phone/Contact: (270) 213-3482 NOT AVAILABLE

Appointment 01/25/24 @ FCFS
Appt Notes: DRIVER ASSIST.
Pieces: 73
Weight: 4890
Ref # 1043006766280102

EMAIL INVOICE AND POD TO INVOICES@AMTRANSEXPEDITE.COM FOR STANDARD PAY TERM
DRIVER IS RESPONSIBLE FOR COUNTING PIECES AND SIGNING FOR NUMBER OF PIECES
RECEIVED. IF FOR ANY REASON THERE IS A PROBLEM WITH THE COUNT, DRIVER MUST
CALL THIS OFFICE FOR ASSISTANCE. The rate quoted by the BROKER, AM Trans
Expedite, Inc. to the CARRIER addressed on this agreement, herein and is hereby
confirmed and agreed to as the rate assessed for the shipment. Further more,
by accepting this shipment at the rate quoted, the CARRIER agrees to hold
harmless the SHIPPER, CONSIGNEE, and BROKER for any billing in excess of the
rate and charges as quoted in the agreement. Carrier agrees to be responsible
for cargo insurance on a full value basis for all shipments in their care,
custody, and control. Carrier assumes the liability of a common carrier
(i.e. Carmack Amendment liability) for loss, delay, damage to or destruction o
any and all of Customer's goods or property while under Carrier's care, custod
or control. Carrier shall pay Broker, or allow Broker to deduct from the amount
Broker owes Carrier, Customer's full actual loss for the kind and quantity of
commodities so lost, delayed, damaged or destroyed. Carrier shall be liable to
Broker for all economic loss, including consequential damages that are incurred
by Broker or the Customer for any freight loss, damage or delay claim.
Carrier assumes the liability of a common carrier (i.e. Carmack Amendment

(Rate Confirmation Details on Next Page)

Carrier Signature Asta Mijao

Date / /
M D

Send Carrier Bills to the Address Above

PRO # 540863

must appear on all Invoices



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ROYAL3 INC
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MC # 944686 Truck #
DOT 2828543 Trailer #
Driver Cell #

liability) for loss, lets fees, damage to or destruction of any and all of Customer's goods or property while under Carrier's care, custody or control. Carrier shall pay Broker, or allow Broker to deduct from the amount Broker owes Carrier, Customer's full actual loss for the kind and quantity of commodities so lost, delayed, damaged or destroyed. Carrier shall be liable to Broker for all economic loss, including consequential damages that are incurred by Broker or the Customer for any freight loss, damage or delay claim. Carrier could be held responsible for late fees provided from the customer.

Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 540863

must appear on all Invoices

Bill Of Lading

Shipment ID: 104300676628

Date 23 Jan. 2024

Ship From	HUBBELL LENOIR 546 ENGLISH RD. ROCKY MOUNT, NC 27804 UNITED STATES	BOL Number	104300676628	Pro Number	
		Carrier Name	AM TRANS EXPEDITE	House BOL	
Ship To	ERVIN CABLE CONSTRUCTION - RDOF 490 IN-60 NEW PEKIN, IN 47165 UNITED STATES	SCAC	AMXK	Equipment Group	53FT DV
		Trailer		Commercial Inv.	
		STACKABLE		Handling Unit	15
		Plate		Freight Terms	THIRD PARTY
Bill To	CHARTER COMMUNICATIONS C O RXO Attn MT-AP01 11215 N Community House Road CHARLOTTE, NC 28277 UNITED STATES	Mode	TL	Delivery Appt.	(Not Available) America/New_York
		Cust. Order	4501094475		
		ASN#			
		References			
		Hot Shipment	No		
		Line Number	30		
		Freight Value	15452 USD		
		Item Description	PED 14X20X34 HEX SLAM LOCK STD BRACKET		
		Shipping Text			

Stop	Loc	Address	Contact	Arrive	Depart	Shipping Unit				
1	P	201285 HUBBELL LENOIR 546 ENGLISH RD. ROCKY MOUNT, NC 27804 UNITED STATES	252 316 7058 tcooke@hubbell.com	24 JAN 2024 08:00 America/New_York	26 JAN 2024 16:00 America/New_York	Qty	Description	Weight	Dimensions	HM
						73	CLASS	4890 LB	59x48x24 IN	125.0
2	D	202682 ERVIN CABLE CONSTRUCTION - RDOF 490 IN-60 NEW PEKIN, IN 47165 UNITED STATES	270-213-3482 Franklasm@ervincable.com	25 JAN 2024 11:14 America/New_York	25 JAN 2024 11:14 America/New_York	Qty	Description	Weight	Dimensions	HM
						73	CLASS	4890 LB	59x48x24 IN	125.0
Totals						Quantity: 73 Weight: 4890 LB Volume: 1019520 CUIN				

15 Pallets

Bill of Lading Remarks

Note: "Freight/Declared values are not intended to be used for excess cargo Liability coverage"

Straight Bill Of Lading - Short Form - Original - Not Negotiable

Signature Shipper M. Shange
Date 1/24/2024

Signature Carrier _____
Date _____

Print Carrier Name **AM TRANS EXPEDITE**

Signature Consignee _____
Date _____

2:25 PM

JAN 24 PM 2:23

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Date 23.Jan.2024

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Signature Shipper

Date

Signature Carrier

Date

Signature Consignee

Date

Print Carrier Name

AM TRANS EXPEDITE

2:25 PM

JAN 24 PM 2:23