

**Bill to:**

Kirsch Transportation Services, Inc  
25 Main Place, Suite 300,  
Council Bluffs,  
IA,  
51503

Invoice Date: 01/26/2024

Invoice #: 0474261

Terms: NET 30

Due Date: 02/26/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/25/2024		194 Plattsburgh, NY 12901 - 620 Lowe's Blvd, Garysburg, NC 27831			
			1	\$1,700.00	\$1,700.00

TOTAL
\$1,700.00

**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**



**Attention: If the following are not completed, FREIGHT INVOICE WILL NOT BE PAID**

Carrier agrees that Carrier (including any driver employed, retained or otherwise engaged by Carrier) will comply with all applicable laws and regulations of the DOT, FMCSA and other authorities in the transportation of freight subject to this Rate Confirmation.

**\*\*Remit To Instructions:** Within 24 hours of delivery, please email a legible Proof of Delivery, Rate Confirmation and Invoice to [invoice@kirschtrans.com](mailto:invoice@kirschtrans.com) to begin payment processing, or subject to \$100 deduction.

**Carrier is responsible for sending Proof of Delivery directly to Kirsch Transportation; this is applicable to carriers who utilize a factoring company.**

1. For sealed loads, seal numbers and "Seal Intact" notation must appear on Bill of Lading.
2. If tarp required, keep load **dry and clean**.
3. Communications with Kirsch Transportation will be conducted by Carrier's dispatch or other designated department. Carrier acknowledges that Kirsch Transportation will not accept, respond to or engage in communications with any Carrier driver.
4. Quick Pay Processing:

We offer two Quick Pay options:

10 day at a 3% fee

24 hour at a 5% fee

Invoice, Rate Confirmation, and all pages of the signed Bill of Lading and any other pertinent paperwork must be legible and sent to [invoice@kirschtrans.com](mailto:invoice@kirschtrans.com). You must clearly note which quick pay option you would like on your invoice.

Invoices not noted will default to our normal 30-day payment terms. Kirsch Transportation Services, Inc. reserves the right to refuse quick pay processing in the event of incomplete or illegible paperwork and can require that original paperwork be mailed to our office for processing.

5. Macropoint tracking is required on all loads or subject to deduction.

6. For payment status updates, please email [Paymentstatus@KirschTrans.com](mailto:Paymentstatus@KirschTrans.com).

This rate has been mutually agreed upon by Carrier and Kirsch Transportation and includes all stop-off charges, fuel surcharges, loading and unloading charges and other applicable charges. This rate cannot be changed, modified or supplemented by reference to any other rates, rules, classification, schedule or tariff. Carrier shall be liable for full loss resulting from loss, damage, injury or delay.

Carrier acknowledges and understands this Rate Confirmation is a valid and binding contract by and between Carrier and Kirsch Transportation.

Kirsch Transportation understands this Rate Confirmation has been approved and executed for or on behalf of Carrier by an authorized officer, director or other agent or representative of Carrier. Carrier and Kirsch Transportation mutually agree that the terms and conditions of this Rate Confirmation are governed by the Broker-Carrier Agreement by and between Carrier and Kirsch Transportation. In the event any of the provisions of this Rate Confirmation conflict with those of such Broker-Carrier Agreement, the terms of this Rate Confirmation will control only as to the freight specified herein and extent of any such conflict.

Customer product must not be moved or transloaded without written authorization from Kirsch. Carrier agrees to exclusive trailer use on this load, no outside product may be added to the trailer without written authorization from Kirsch.

Names on the side of Carrier trailer must be marked with Carrier logo/signage or have nothing. No large customer trailers such as Amazon may pick-up or deliver product to our customers without written authorization. Failure to follow this rule may result in delivery being rejected.

Kirsch Transportation Services, Inc.

1102 Douglas St.

Omaha, NE 68102

(877) 341-9611

[www.kirschtrans.com](http://www.kirschtrans.com)



Load Confirmation

Kirsch Transportation Services, Inc.  
Omaha, NE 68102  
1102 Douglas St



**KIRSCH**  
TRANSPORTATION SERVICES, INC.

Order #: 0474261

Kirsch Representative:  
Taylor Pickett  
531-213-2123

**Carrier:** ROYAL3 INC  
CHICAGO IL 60638  
**Date:** 01/24/2024

**Contact:** AI  
**Phone:** 630-566-2080  
**Fax:**

**Order**  
**Order:** 0474261  
**Miles:** 723.0  
**Temp:**  
**BOL** 24891727  
**Pickup #:** 256322835

**Commodity:** Retail  
**Weight:** 23900.0  
**Trailer:** 53ft Van  
**Reference:** 256322835  
**Tarp Required:**

**PU 1** **Name:** SCHLUTER SYSTEMS LP **Date:** 01/25/2024 1000  
**Address:** 194 PLEASANT RIDGE RD 01/25/2024 1002  
  
PLATTSBURGH NY 12901 **Contact:**  
Drvr Ld/Unld: No driver loading or unload  
  
**Phone:**  
**Reference Number:** IC INBOUND  
**Reference Number:** KD TOTALMILES  
**Reference Number:** KL TARIFFID 2462  
**Reference Number:** OW SERVICEID TL\_VAN\_BRKNONOPT  
**Reference Number:** PO 256322835  
**Reference Number:** RB RATECODE 12901\_27831  
**Reference Number:** SCA KTSW  
**Reference Number:** SI 91727  
**Reference Number:** ZZ 92

**SO 2** **Name:** LOWE'S MID-ATLANTIC RDC **Date:** 01/26/2024 1030  
**Address:** 620 LOWE'S BLVD  
  
GARYSBURG NC 27831 **Contact:** 2012624A04098  
Drvr Ld/Unld: No driver loading or unload  
  
**Phone:**  
**Reference Number:** PO 256322835  
**Reference Number:** ZZ 93

**Payment**  
**Carrier Freight Pay:** \$1,700.00  
**Total Carrier Pay:** \$1,700.00

**Instructions**

SCHLUTER SYSTEMS LP - LOWENWNC: APPROX WEIGHT WILL BE 35K - 40K  
MUST scale 48k

\*Flatbeds must secure any load with at least one strap while moving from loading to any staging area.

\*Must call ahead to schedule delivery to all stores. When calling hit #44# for receiving.

PLEASE CONTACT KIRSCH on LOAD / UNLOAD AND WITH ANY ISSUES INTRANSIT THANKS AGAIN AND  
STAY SAFE!

Tyron

719

239-245-3469

289473

*Al Milanovic*



(X) Accept

( ) Decline

Date:

BILL OF LADING

Page

SHIP FROM  
Name: SCHLUTER SYSTEMS LP  
Address: 194 PLEASANT RIDGE ROAD  
City/State/Zip: PLATTSBURGH, NY 12901  
SID#:

Bill of Lading Number:

BAR CODE SPACE

SHIP TO  
Name: LOWES MID-ATLANTIC  
Address: 620 LOWES BLVD  
City/State/Zip: GARYSBURG NC 27831  
CID#:

CARRIER NAME: KIRSCH TRANSPORT  
Trailer number:  
Seal number(s):  
SCAC:  
Pro number:

THIRD PARTY FREIGHT CHARGES BILL TO:  
Name:  
Address:  
City/State/Zip:

BAR CODE SPACE

SPECIAL INSTRUCTIONS:  
VICS# 40118320240020090

Freight Charge Terms:  
(freight charges are prepaid unless marked collect)  
Prepaid Collect ☒ 3rd Party

CUSTOMER ORDER INFORMATION			(check box)		Master Bill of Lading: with attached underlying Bills of Lading	
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLETS/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO	
PO# 256322835	15	24,265	Y	N	DN# 24017737	
			Y	N		
			Y	N		
			Y	N		
			Y	N		
			Y	N		
GRAND TOTAL	15	24,265				

HANDLING UNIT				CARRIER INFORMATION				LTL ONLY	
QTY	TYPE	PACKAGE	TYPE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION		NMFC #	CLASS
18'	SKID			1,385		PROFILES		13515	60
18'	SKID			713		KERDIBAORD		157320-4	175
64'	SKID			2,217		SHOWER PRODUCT		157320-3	175
74'	SKID			19,950		THINSET		5248NP SPACE	50
15				24,265		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: "Noting a value is not a request for Additional Cargo Liability under OD Rules 100, Item 574." The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_.

Freight Amount: \$  
Fee Terms: Collect: Prepaid: Personal/company check NOT acceptable: ☐

NOTE - Liability Limitation applies. See OD Rules 100, Items 574 and 594.

RECEIVED, subject to the rates, classifications and rules that have been established by the Carrier and are available on request to the Shipper (Shipper defined in 49 U.S.C.A. § 13102(13)(c)), and to all applicable federal and state regulations. Shipper 1) warrants it has read all applicable contract(s) or Carrier's applicable tariff(s) and the limitations on liability provisions set forth therein, and 2) has actual knowledge of and accepts the applicable contract or tariff terms, including the limitations on liability. Carriers' tariffs, including OD Rules 100, take precedence in the event of any terms or conditions conflicts.

SHIPPER SIGNATURE / DATE		Trailer Loaded:		Freight Counted:	
Victor Marrero		X		By Shipper	
		By Driver		By Driver/pallets said to contain	
		1/24/24		By Driver/Pieces	

SHIPPER SIGNATURE  
CARRIER SIGNATURE / PICKUP DATE  
Carrier acknowledges receipt of goods and services provided by shipper and warrants that the carrier has the U.S. DOT emergency response guidelines in the vehicle.  
Property described above is received in good order, except as noted.





GSI Standard BOL: WWW.GSIUS.ORG for complete GSI BOL Guideline Information LOAD # 24891727

**BILL OF LADING**

Date: \_\_\_\_\_ Page: \_\_\_\_\_

Name: **SHIP FROM**  
Schluter Systems L.P.  
Address: 194 PLEASANT RIDGE ROAD  
City/State/Zip: PLATTSBURGH, NY 12901  
SID#:

Name: **SHIP TO**  
LOWES MID-ATLANTIC  
Address: 620 LOWES BLVD  
City/State/Zip: GARYSBURG NC 27831  
CID#:

Carrier Name: **KPSCHTRANS**  
Trailer number: \_\_\_\_\_  
Seal number(s): \_\_\_\_\_  
SCAC: \_\_\_\_\_  
Pro number: \_\_\_\_\_

Freight Charge Terms:  
(Freight charges are prepaid unless marked collect)  
Prepaid \_\_\_\_\_ Collect ☒ 3<sup>rd</sup> Party \_\_\_\_\_

Master Bill of Lading: with attached  
underlying Bills of Lading

Additional Shipper Info  
DN# 24017737

Special Instructions:  
VICS# 40118320240020090

Customer Order Number  
PO# 256322835

Customer Order Information  
# PKGS 151  
WEIGHT 24,265  
DATE 1/24/24

Customer Order Information  
Pallet/Slip (Circle One)  
Y N

Customer Order Information  
CTNS Y N  
PITS Y N  
DAMAGED: PITS Y N

Customer Order Information  
CTNS Y N

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