Royal 3inc.

#### Bill to:

, ,

Best Logistics

Invoice Date: 02/16/2024 Invoice #: 1579168 Terms: NET 30 Due Date: 03/16/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/15/2024		350 S ROHLWING RD, ADDISON, IL 60101 - 14449 W 100th St, Lenexa, KS 66215, USA			
			1	\$1,350.00	\$1,350.00

### **TOTAL** \$1,350.00

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

*** Loa	ad Confirm	ation ***	Page 1
TEAM: Green Team Best Logistics P.O. Box 336 Kernersville, NC 27285 PHONE: (336) 515-9001 * FAX: 1 (866) 557-5170 *	BEST LOGISTICS	Order: 1 *ORDER # MUST APPE *DRIVER MUST CALL I	579168 AR ON ALL BILLING*
Carrier: ZIGI FREIGHT INC Carrier ID: ZIGLOM Phone: Fax: Date: 02/15/2024		Contact: Green Tean OUR NEW CONTACT NUMBERS BE Phone: (336) 515-90 Fax: 1 (866) 557-5 Reference: PO0603853	ELOW: 01 *
	nstructions / Comr	nents:	
ADDISON - JDE - PICK UP SOUTH SIDE OF B Order Miles: 506.0 PU # 161566 BOL: 161566	ULDING	Weight: 43500.0 Trailer: 53' Van Only Commodity: ROLL PAPEI	
PU 1 Name: ADDISON - JDE Address: 350 S ROHLWING RD ADDISON	IL 60101	<b>Date: 02</b> /15/2 Contact: (336) 5 Driver Assist: N	
Reference number(s): PO PO06038 Reference number(s): PO ZZ	953		
SO 2 Name: MIDLAND PAPER LENEX Address: 14449 W 100TH ST LENEXA	(A KS 66215	<b>Date: 02/16/2</b> Contact: (336) 5 Driver Assist: N	
Reference number(s): PO PO06038 Reference number(s): PO ZZ	353		
Payment Total Carrier Pay: \$1	,350.00		



### \*\*\* Load Confirmation \*\*\*

IN ORDER TO HAUL FOR BEST, ALL CARRIERS MUST INFORM DRIVERS OF MACROPOINT TRACKING REQUIREMENT. AT THE TIME OF BOOKING, ALL CARRIERS MUST PROVIDE VALID DRIVER PHONE NUMBER. DRIVERS MUST ACCEPT AND DOWNLOAD MACROPOINT APP BEFORE ARRIVING TO SHIPPER. SHOULD CARRIER/DRIVER NOT COMPLY, A \$100 FINE WILL BE IMPOSED. SUBMISSION OF SIGNED RATE CONFIRMATION VALIDATES THIS AGREEMENT. NOTE: ELD COMPLIANCE VIA MACROPOINT IS ALSO ACCEPTABLE.

#### Agreement Please sign below

STANDARD TERMS ARE PAYMENT MADE 28 DAYS FROM RECEIPT OF LEGIBLE SIGNED BILL OF LADING, INVOICE, AND LUMPER RECEIPT (IF APPLICABLE). ALL EXTRA CHARGES MUST BE PRE-APPROVED BY BEST REPRESENTATIVE THAT BOOKED LOAD. ALL EXTRA CHARGES MUST BE BILLED WITH RECEIPT & BOL. DRIVER MUST REPORT ANY OVERAGES, SHORTAGES, OR DAMAGED PRODUCT IMMEDIATELY.

CARRIER CERTIFIES THAT THEY HOLD THE APPROPRIATE LISCENCES AND AUTHORITIES AND MAINTAIN THE APPROPRIATE INSURANCE COVERAGES AS REQUIRED BY REGULATION TO PERFORM THIS TRANSPORTATION ON BEHALF OF BEST LOGISTICS.

ANY DOUBLE BROKERAGE WILL RESULT IN NON-PAYMENT. CONFIRMATION OF THE ACTUAL CARRIER OF THIS LOAD WILL BE MADE BEFORE PAYMENT IS RELEASED. FINES IMPOSED FOR LATE PICKS AND LATE DELIVERIES.

#### To Expedite Payment: Email All invoices and Signed POD as attachments to: CarrierAP@shipwithbest.com (PICTURES IN EMAIL BODY WILL NOT BE ACCEPTED)

In the SUBJECT LINE Reference ORDER NUMBER 1579168

608 1-27-16

Bonnie R

(X) Accept

() Decline

02/15/2024

Michel (689) 222-1097 723 W97972





Bill of Lading Number: 30140977

HE BILL OF LADING

Date: 02/15/2024

Page: 2

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