

**Bill to:**

Live Logistics
200 N FAIRWAY DR SUITE 192,
Vernon Hills,
IL,
60061

Invoice Date: 03/04/2024

Invoice #: 0206500

Terms: NET 30

Due Date: 04/04/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/01/2024		11700 STONEHOLLOW DR, AUSTIN TX 78758 - 2345 MCCLELLAN PARK DR, MCCLELLAN CA 95652			
			1	\$3,400.00	\$3,400.00

TOTAL
\$3,400.00

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



Rate Confirmation Agreement for Omni Logistics, LLC dba LiVe Logistics

- All invoices must include a SIGNED DELIVERY RECEIPT, BOL and RATE AGREEMENT. Please send invoices to the following address.

Live Logistics
150 N Fairway Drive Suite 144
Vernon Hills, IL 60061

- Invoicing, document collection and payment will be done using Epay Manager, an ACH payment system. Please upload paperwork to Epay Manager (epaymanager.com) or email invoices to ap@livelogisticscorp.com
- The rate on this confirmation is the agreed upon sum between CARRIER and Live Logistics.
- This load cannot be double brokered. Double brokering of this load WILL result in non payment to the carrier, in addition to any other penalties applicable by contract or law.
- Any additional charges must be approved and added to rate confirmation.
- By signing the below, CARRIER agrees it has at least \$100,000 in cargo insurance and \$1,000,000 in automotive liability insurance.
- For any team shipment there will be a \$500 rate reduction for using a Solo driver
- Any team load a driver does not accept Macropoint or P44 there will be a \$500 rate reduction
- If a shipment is co-loaded with other freight or put on the rail without LIVE/Omni's consent the linehaul rate will be cut by 50%
- In order for detention to be paid the driver must accept Macropoint or P44. If the driver accepts tracking then detention will be paid upon delivery and POD being received. If the driver does not accept tracking then there will be no detention paid.
- POD required upon delivery. Subject to a \$50 per day rate reduction for PODs submitted after delivery date.

Omni Logistics, LLC dba LiVe Logistics
150 N. Fairway Drive
Vernon Hills, IL 60061
844-351-3780



Page 1

Load Confirmation

0206500

Carrier:	Royal3 Inc	Contact:	Riki Kovacevic
	LOMBARD IL 60148	Phone:	630-485-7370
Date:	03/01/2024	Fax:	

Order	Order:	0206500	Commodity:	HVAC Equipment
	Miles:	1740.0	Weight:	12252.0
	Temp:		Trailer:	Van (DAT)
	BOL:	3399317	Reference:	

PU 1	Name:	DAIKIN COMFORT TECHNOLOGIES	Date:	03/01/2024 0800
	Address:	11700 STONEHOLLOW DR		03/01/2024 1600
		AUSTIN TX 78758	Contact:	SHIPPING
	Phone:	512-834-8622	Driver Load:	No driver loading or unload
	Reference number:	PO 3399317		
	Reference number:	PO TRANSFER 3837697		

SO 2	Name:	DAIKIN COMFORT TECHNOLOGY #784	Date:	03/04/2024 0700
	Address:	2345 MCCLELLAN PARK DR		03/04/2024 1200
		STE 100	Contact:	
		MCCLELLAN CA 95652	Driver Load:	No driver loading or unload
	Phone:			

Payment	Carrier Freight Pay:	\$3,400.00
	Total Carrier Pay:	\$3,400.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

DAIKIN COMFORT TECHNOLOGIES - HVAC EQUIP
DAIKIN COMFORT TECHNOLOGIES - TRANSFER 3837697
DAIKIN COMFORT TECHNOLOGIES - TRANSFER 3837697
DAIKIN COMFORT TECHNOLOGIES - DAIKWATX: DRIVER MUST ACCEPT MACROPOINT TRACKING.
DAIKIN COMFORT TECHNOLOGIES - DAIKWATX: POD required upon completion of delivery. Charges of up to \$50.00 per day will incur beginning 48hrs after delivery until POD is received.
DAIKIN COMFORT TECHNOLOGY #784 - HVAC EQUIP
DAIKIN COMFORT TECHNOLOGY #784 - APPT DELIVERY REQUIRED
DAIKIN COMFORT TECHNOLOGY #784 - Receiving hours 7-12pm
2HR PRECALL TO DELIVERY, REFER TO TRANSFER 3837697

Please Sign: *Sterling Medica*

Driver Name: Vladimir
Driver Cell: 561-201-6549
Driver Email:
Tractor #: 710
Trailer #: H03236

(X) Accept

From: Roberto Ruiz
Phone:
Email: rruiz@livelogisticscorp.com

() Decline



DAIKIN COMFORT TECHNOLOGIES NORTH AMERICA, INC.

STRAIGHT BILL OF LADING

-SHORT FORM-

ORIGINAL- NOT NEGOTIABLE

SHIP REFERENCE # 3837697

DATE 3/01/2024

CARRIER OT OTHER

RECEIVED, subject to the classifications and tariffs in effect on the date of issue of this Original Bill of Lading.

TO (Consignee and Destination)

P:916-619-7237 F:916-646-2445

FROM
AT DAIKIN COMFORT TECHNOLOGY #366
11700 STONEHOLLOW DR SUITE 200
AUSTIN, TX 78758
(512) 834-8622
BR366@daikincomfort..com

DAIKIN COMFORT TECHNOLOGY #784
2345 McClellan Park Dr, Ste100
MCCLELLAN, CA 95652
(916) 619-7237
BR784@daikincomfort.com

TRANSFER # 3837697

CUSTOMER PO #:

PRO # ROYAL TRUCKING

No. Packages	Pkg. Type	HM	NMFC Article	Sub	Description of Articles, Special Marks and Exceptions	Weight (Subj. to Corr.)	Rate	V	
70	EA		114125-4		Air Conditioners/Parts of Air Conditioners	12,252	77.5		<p>Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:</p> <p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges</p> <p>(Signature of Consignor)</p> <p>() PREPAID () COLLECT</p> <p>() T/L () L/T/L</p> <p>Received \$ _____ to apply in prepayment of the charges on the property described herein</p> <p>(Agent or Cashier)</p> <p>Per _____ (The signature here acknowledges only the amount prepaid)</p> <p>C.O.D. Charge To Be Paid By:</p> <p>Shipper <input type="checkbox"/> Consignee <input type="checkbox"/></p> <p>Charges advanced: \$ _____</p>



ROYAL TRUCKING

*** Special Instructions ***

DTPP Paying Freight

Put "ZZ" in Ship Via for the created Tra
MPO:REPLEN CSR:Rachel Pratt

DTPP To Arrange Transportation

Over 7,500 lbs, contact Logistics at
Ship: OTHER

Truck Driver Verified This Count:
\$ per

Remit to: BILL TO CONSIGNEE!
Address:

C.O.D. SHIPMENT
C.O.D. Amt.
\$

Bill to:

Shipper's Reference # must be included on remittance for proper invoice processing.

** SECURE LOAD AFTER EACH STOP ** * SIGNED PROOF OF DELIVERY TO BE PRESENTED WITHIN 30 DAYS **

Shipper's Agent	Pallets	Packages	Weight	Carrier's Agent
	41	70	12252	

This is to certify that the above articles are properly described by name and are packed and marked and are in proper condition for transportation according to the regulations prescribed by the Interstate Commerce Commission.
CODSBL 03/01/24 03:04 PM

(This bill of lading is to be signed by the shipper and agent of the carrier issuing same.)

DAIKIN COMFORT TECHNOLOGIES NORTH AMERICA, INC.

STRAIGHT BILL OF LADING

-SHORT FORM-

ORIGINAL- NOT NEGOTIABLE

DATE 3/01/2024
CARRIER OT OTHER

SHIP REFERENCE # 3837697

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TO (Consignee and Destination)

FROM
AT
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11700 STONEHOLLOW DR SUITE 200
AUSTIN, TX 78758
(512) 834-8622
BR366@daikincomfort..com

P: 916-619-7237 F: 916-646-2445
DAIKIN COMFORT TECHNOLOGY #784
2345 McClellan Park Dr, Ste100
MCCLELLAN, CA 95652
(916) 619-7237
BR784@daikincomfort.com

TRANSFER # 3837697

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PRO # ROYAL TRUCKING

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70	EA		114125-4		Air Conditioners/Parts of Air Conditioners	12,252	77.5		<p>Subject to Section 7 of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:</p> <p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges</p> <p>(Signature of Consignor)</p> <p>() PREPAID () COLLECT</p> <p>() T/L () L/T/L</p> <p>Received \$ _____ to apply in prepayment of the charges on the property described hereon</p> <p>(Agent or Cashier)</p> <p>Per _____ (The signature here acknowledges only the amount prepaid)</p> <p>C.O.D. Charge To Be Paid By:</p> <p>Shipper <input type="checkbox"/> Consignee <input type="checkbox"/></p> <p>Charges advanced: \$ _____</p>

ROYAL TRUCKING

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MPO: REPLEN CSR: Rachel Pratt

DTPP To Arrange Transportation

Ship: OTHER

Truck Driver Verified This Count:
\$ per

Remit to: BILL TO CONSIGNEE!
Address:

C.O.D. SHIPMENT
C.O.D. Amt.
\$

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CODSBL 03/01/24 03:04 PM

(This bill of lading is to be signed by the shipper and agent of the carrier issuing same.)



6850 W. 63rd St, Chicago, IL 60638

Phone: (630) 485-7370 ext.300 email:bol@royal3inc.com

Driver	Vladimir b	Co-Driver		Truck	710	Trailer	H03236.
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*NOTE: All trip sheets must ONLY be from Monday pick-up to Monday delivery of the following week.

Date	Start Location City, State, Zip Code	Notes
2-26-24	Greenville, SC	
Date	End Location City, State, Zip Code	Notes
2-27-24	Vicksburg, MS.	
Date	PICKUP City, State, Zip Code	Notes
2-27-24	Monroe, LA.	
Date	DELIVERY City, State, Zip Code	Notes
2-28-24	Mc Allen, TX	
Date	PICKUP City, State, Zip Code	Notes
2-28-24	Mc Allen, TX	
Date	DELIVERY City, State, Zip Code	Notes
2-29-24	Seads, TN	
Date	PICKUP City, State, Zip Code	Notes
2-29-24	Southaven, MS	
Date	DELIVERY City, State, Zip Code	Notes
3-01-24	Manor, TX.	
Date	PICKUP City, State, Zip Code	Notes
3-1-24	Austin, TX.	
Date	DELIVERY City, State, Zip Code	Notes
3-4-24	McClellan, CA.	
Date	PICKUP City, State, Zip Code	Notes
Date	DELIVERY City, State, Zip Code	Notes