



Bill to:
Priority1

,
,
,

Invoice Date: 03/06/2024
Invoice #: 60106997819
Terms: NET 30
Due Date: 04/06/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/04/2024		1705 Interstate 35W, Northlake, TX 76262 - 15380 W 101st Terrace, Lenexa, KS 66219, USA			
			1	\$3,200.00	\$3,200.00

TOTAL
\$3,200.00

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

Carrier Load Tender

Reference: 60106997819 (BOL)	Carrier: ROYAL3 INC. (944686)	Tender: 03/01/2024 21:24
	Contact: Bonnie (Bonnie@royal3inc.com)	Contact: Brian Vershum
	Phone: 6305661434	Phone: (501) 263-7722
	Fax:	Email: Brian.Vershum@priority1.com
		Main Line: 501-372-3925

Bill To:	Priority 1 Inc. (P.O. Box 398) North Little Rock, AR 72115
Equipment:	53' Dry Van ,
Service Type:	Full

Stop 1 Pick

Monday, March 4, 2024 08:00 - 11:00	Total Weight:	39300.00 lb	Total Quantity:	16
Schluter Systems LP DFW (17505 Interstate 35W) Northlake, TX 76262				
Contact: Shawn Rayburn Phone:				
Packaging: 6 Pallet(s)	Total Weight: 15,100 lbs	Dimensions: " x " x "	Linear Feet: 0	Description: SHOWER ACCESSORIES
Packaging: 5 Pallet(s)	Total Weight: 11,700 lbs	Dimensions: " x " x "	Linear Feet: 0	Description: shower accessories
Packaging: 5 Pallet(s)	Total Weight: 12,500 lbs	Dimensions: " x " x "	Linear Feet: 0	Description: shower accessories
Carrier Notes: - CARRIER MUST NOTIFY WHEN ON SITE AT EACH LOCATION				
Special Instructions: CARRIER MUST NOTIFY WHEN ON SITE AT EACH LOCATION				

Stop 2 Drop

Monday, March 4, 2024 08:00 - 00:00	Total Weight:	0 lb	Total Quantity:	
DAL TILE / KANSAS CITY #106 (15380 W 101ST TERRACE) Lenexa, KS 66219				
Contact: Phone:				
Carrier Notes:				
Special Instructions: PO: 4502573784 DN Ref # 24070882 6 total skids				

Stop 3 Drop

Tuesday, March 5, 2024 08:00 - 16:00	Total Weight:	0 lb	Total Quantity:	
WALCRO INC/LINCOLN #321 (3340 OX BOW CIRCLE STE 100) Lincoln, NE 68504				
Contact: Phone:				
Carrier Notes:				
Special Instructions: PO: 4208806 DN Ref # 24070785 / 24070786 5 total skids				

Stop 4 Drop

Wednesday, March 6, 2024 08:00 - 16:00	Total Weight:	0 lb	Total Quantity:	
WALCRO INC/RAPID CITY #340 (2360 DEADWOOD AVE STE H) Rapid City, SD 57702				
Contact: Phone:				
Carrier Notes:				
Special Instructions: PO: 4208954 DN Ref # 24071236 5 total skids				

Freight Terms

Charge Details			
Description	Rate		Charge
Line Haul	3200.00	Flat Rate	1
			\$3,200.00 USD
Total:			\$3,200.00 USD

Freight Terms: \$3,200.00 USD Third Party (lb)

References

Carrier Instructions

MISSED APPT WILL RESULT IN \$300 FINE

Thank you for doing business with Priority 1.

DRIVERS NAME: _____

TRUCK #: _____

TRAILER #: _____

DRIVER CELL#: _____

DISPATCHER / PRIORITY 1

CARRIER SIGNATURE

All invoices & PODs are to be sent to Priority 1 within 72 hours of delivery. Please email invoice and POD to: tlap@priority1.com. Please provide Priority 1's reference number on your invoice.

Date: 03/04/2024

BILL OF LADING

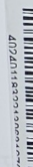
Page 1

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

BILL OF LADING NUMBER: 40118322130631676

SID#:



Page 1

Date: 03/04/2024

FOB: ☐

BILL OF LADING

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

BILL OF LADING NUMBER: 40118322130631676



SID#:

FOB: ☐

SHIP TO

Name: WALCRO INC/LINCOLN #321
ALL HOLDINGS/ALL TILE CCS
Address: 3340 OX BOW CIRCLE STE 100
City/State/Zip: LINCOLN NE 68504, US
Telephone number:
CID#: 4208806

CARRIER NAME: pop
Trailer number:
Seal number(s): 11659061
SCAC: POP
Pro number: 60106997819



Name:

Address:

City/State/Zip:

THIRD PARTY FREIGHT CHARGES BILL TO

60106997819

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐
Master Bill of Lading with attached
underlying Bills of Lading

SPECIAL INSTRUCTIONS:

CUSTOMER ORDER INFORMATION

ADDITIONAL SHIPPER INFO

CUSTOMER ORDER NUMBER # PKGS WEIGHT [lb] PALLET(S) [CIRCLE ONE]

24070786

5680.0 Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Date: 03/04/2024

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

SID#:

SHIP TO

Name: WALCRO INC/RAPID CITY #340
ALL HOLDINGS/ALL TILE CCS
Address: 2360 DEADWOOD AVE STE H
City/State/Zip: RAPID CITY SD 57702, US
Telephone number:
CID#: 4208954

Name:
Address:
City/State/Zip:

THIRD PARTY FREIGHT CHARGES BILL TO

SPECIAL INSTRUCTIONS:

Page 1 / 2

BILL OF LADING NUMBER: 40118322130632017



40240118322130632017

CARRIER NAME: poip
Trailer number:

Seal number(s):

SCAC: POIP

Pro number: 60106997819



60106997819

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)
Prepaid: ☒ Collect: ☐ 3rd Party: ☐

☐ Master Bill of Lading with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
24071236		11769.4	Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL		11769.4	Y N	

CARRIER INFORMATION

HANDLING UNIT	PACKAGE	WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE	Commodities requiring special or additional care or attention in handling or stowing must be so marked and marked with handling date. See Section 2(b) of NMFC Item 300.	MMFC # CLASS
				SEE ATTACHED SUPPLEMENT PAGE	
5				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 is specifically stated by the shipper to be not exceeding

per

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. • 14706(c)(1)(A) and (B).
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the latest classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer loaded Freight Counted

☒ By Shipper
☐ By Driver
☐ By Shipper
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE
Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Signature shipper

3rd Step
X
Signature

DATE: 03/14/24

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTH LAKE TX 76262-3634, US

BILL OF LADING

SHIP TO

SID#

FOB:

Name: DAL TILE / KANSAS CITY #106
Address: 15380 W 101ST TERRACE
City/State/Zip: LENEXA KS 66219, US
Telephone number:
CID#: 4502573784

Location #4106

CARRIER NAME: polp

Trailer number:

Seal number(s):

SCAC: POIP

Pro number: 60106997819

4024018322130631911



BILL OF LADING NUMBER: 40118322130631911

Page 1 / 2

Name:

Address:

City/State/Zip:

FOB:

THIRD PARTY FREIGHT CHARGES BILL TO

SPECIAL INSTRUCTIONS:

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐
☐ Master Bill of Lading with attached
underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER

PKGS

WEIGHT (lb)

ADDITIONAL SHIPPER INFO

24070882

15097.1

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

Y N

GRAND TOTAL

15097.1

Y

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

N

HANDLING UNIT

PACKAGE

WEIGHT (lb)

H.M.

(X)

COMMODITY DESCRIPTION

LTL ONLY

NMFC #

CLASS

SEE ATTACHED

SUPPLEMENT PAGE

SEE ATTACHED

SUPPLEMENT PAGE

SEE ATTACHED

SUPPLEMENT PAGE

SEE ATTACHED

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SUPPLEMENT PAGE

SEE ATTACHED

SUPPLEMENT PAGE

QTY

TYPE

QTY

TYPE

WEIGHT (lb)

H.M.

(X)

COMMODITY DESCRIPTION

LTL ONLY

NMFC #

CLASS

SEE ATTACHED

SUPPLEMENT PAGE

SEE ATTACHED

SUPPLEMENT PAGE

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6

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property, is specifically stated by the shipper to be not exceeding

per

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

RECEIVED: subject to individual determined date of contract that have been agreed upon in writing between the carrier and shipper. If applicable, the carrier's liability is limited to the actual value of the property, as shown on the bill of lading, and the carrier's liability is limited to the actual value of the property, as shown on the bill of lading, and the carrier's liability is limited to the actual value of the property, as shown on the bill of lading.

rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

SHIPPER SIGNATURE / DATE

Trailer loaded Freight Counted

By Shipper By Shipper

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

By Driver By Driver

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

Signature shipper

3/14/24

157

5701

3/4/24

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

SID#:

FOB: ☐

BILL OF LADING NUMBER: 40118322130632017



40240118322130632017

SHIP TO

Name: WALCRO INC/RAPID CITY #340
ALL HOLDINGS/ALL TILE CCS
Address: 2360 DEADWOOD AVE STE H
City/State/Zip: RAPID CITY SD 57702, US
Telephone number:
CID#: 4208954

Location #340

FOB: ☐

CARRIER NAME: poip

Trailer number:

Seal number(s):

SCAC: POIP

Pro number: 60106997819



60106997819

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:
City/State/Zip:

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐☐ Master Bill of Lading: with attached underlying Bills of Lading

SPECIAL INSTRUCTIONS:

Matt Hilt ✓ [Signature]

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER		# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO	
24071236			11769.4	Y	N		
				Y	N		
				Y	N		
				Y	N		
GRAND TOTAL			11769.4				

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
						SEE ATTACHED SUPPLEMENT PAGE		
5				11769.4		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared.

*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding

_____ per _____

COD Amount 0.00

Fee Terms: Collect: ☐ Prepaid: ☐Customer check acceptable: ☐

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer loaded

☒ By Shipper
☐ By Driver

Freight Counted

☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

3rd Stop

[Signature]

Date: 03/04/2024

BILL OF LADING

Page 1 / 1

SHIP FROM

Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

SID#:

FOB: ☐

SHIP TO

Location #321

Name: WALCRO INC/LINCOLN #321
ALL HOLDINGS/ALL TILE CCS
Address: 3340 OX BOW CIRCLE STE 100
City/State/Zip: LINCOLN NE 68504, US
Telephone number:
CID#: 4208806

FOB: ☐

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:
City/State/Zip:

SPECIAL INSTRUCTIONS:

BILL OF LADING NUMBER: 40118322130631676



40240118322130631676

CARRIER NAME: poip
Trailer number:

Seal number(s):

SCAC: POIP

Pro number: 60106997819



60106997819

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)

Prepaid: ☒Collect: ☐3rd Party: ☐

☐ Master Bill of Lading: with attached
underlying Bills of Lading

CUSTOMER ORDER INFORMATION

ADDITIONAL SHIPPER INFO

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)	
24070786		5680.0	<input checked="" type="radio"/> Y	<input type="radio"/> N
			<input type="radio"/> Y	<input type="radio"/> N
			<input type="radio"/> Y	<input type="radio"/> N
			<input type="radio"/> Y	<input type="radio"/> N

GRAND TOTAL

CARRIER INFORMATION

COMMODITY DESCRIPTION

Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 350.

LTL ONLY

HANDLING UNIT		PACKAGE		WEIGHT [lb]	H.M. (X)	NMFC #	CLASS
QTY	TYPE	QTY	TYPE				
2	030			5680.0		42180	50.0
2				5680.0			

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 is specifically stated by the shipper to be not exceeding _____ per _____.

Fee Terms: COD Amount 0.00
Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer loaded

☐ By Shipper
☐ By Driver

Freight Counted

☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

2nd stop x [Signature]

Date: 03/04/2024

BILL OF LADING

Page 1/2

SHIP FROM
Name: SCHLUTER SYSTEMS LP DFW
Address: 17505 INTERSTATE 35W
City/State/Zip: NORTHLAKE TX 76262-3634, US

SID#:

FOB: ☐

BILL OF LADING NUMBER: 40118322130631911



40240118322130631911

SHIP TO
Name: DAL TILE / KANSAS CITY #106
Address: 15380 W 101ST TERRACE
City/State/Zip: LENEXA KS 66219, US
Telephone number:
CID#: 4502573784

Location #: 4106

FOB: ☐

CARRIER NAME: poip

Trailer number:

Seal number(s): 11659079

SCAC: POIP

Pro number: 60106997819



60106997819

THIRD PARTY FREIGHT CHARGES BILL TO

Name:
Address:
City/State/Zip:

FREIGHT CHARGE TERMS:

(freight charges are prepaid unless marked otherwise)

Prepaid: ☒ Collect: ☐ 3rd Party: ☐☐ Master Bill of Lading; with attached
underlying Bills of Lading

SPECIAL INSTRUCTIONS:

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT [lb]	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
24070882		15097.1	Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL		15097.1		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT [lb]	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 360.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
						SEE ATTACHED SUPPLEMENT PAGE		
6				15097.1		GRAND TOTAL		

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value.
The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.

COD Amount 0.00
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

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

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Signature shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labelled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

Trailer loaded Freight Counted

☐ By Shipper ☐ By Shipper
☐ By Driver ☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

R. Weber
Ron WEBER

1st
stop x
3/4/24