



Bill to:
ECHO GLOBAL LOGISTICS(ECHO)

Invoice Date: 03/18/2024
Invoice #: 57418130
Terms: NET 30
Due Date: 04/18/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/15/2024		650 S 23rd St, Beaumont, TX 77707, USA - 4105 Castlewood Rd, Richmond, VA 23234, USA			
			1	\$2,500.00	\$2,500.00

TOTAL
\$2,500.00

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



600 W. Chicago Ave #725
Chicago IL 60610

PHONE (855) 786-3246

Please call when
unloaded for a release
number

LOAD CONFIRMATION

Please call the Echo Shipment Info line at 855-786-3246 and ask for Load Number 57418130

ORDER 57418130

CARRIER	ROYAL3 INC	***ORDER NUMBER(S) MUST APPEAR ON ALL BILLING***
Echo Rep	Todd Durham	MODE: TL
Rep Phone	224-251-6510	
Rep Email	Todd.Durham@echo.com	TRAILER TYPE: Van 53' TRAILER #:
Distance	1242.74 Miles	Equipment Notes:
Note: Questions Contact Arthur @224-619-6841		

Pursuant to our verbal agreement of 3/13/2024 between Echo Global Logistics, hereafter referred to as BROKER, and ROYAL3 INC, hereafter referred to as CARRIER. Both parties agree that Broker's load number 57418130, moving on 03/15/2024 from BEAUMONT, TX to RICHMOND, VA (number of stops shown below) will move at the following rate:

Service for Load # 57418130	Amount	Rate	Extended
Line Haul	1.00	\$2,500.00	\$2,500.00
		Total	\$2,500.00

PAY SUMMARY	
Line Haul	\$2,500.00
Total:	\$2,500.00

ALL TRAVEL DIRECTIONS PROVIDED BY ECHO GLOBAL LOGISTICS ARE FOR INFORMATIONAL PURPOSES ONLY. IT IS THE CARRIER'S SOLE RESPONSIBILITY TO LAWFULLY AND SAFELY OPERATE ALL VEHICLES AND THEIR CONTENTS OVER ANY ROAD, HIGHWAY, BRIDGE AND/OR ROUTE IN STRICT COMPLIANCE WITH ALL APPLICABLE LAWS, RULES AND REGULATIONS.

CARRIER MUST ADVISE IF ANY DELIVERY SCHEDULES, SPECIFICATIONS, INSTRUCTIONS OR REQUIREMENTS CANNOT BE LEGALLY ACCOMPLISHED OR IF THE AVOIDANCE OF ANY FINES, PENALTIES OR DEDUCTIONS WOULD REQUIRE OR RESULT IN THE VIOLATION OF ANY LAWS OR REGULATIONS.

COMPENSATION MAY BE WITHHELD IF THIS SHIPMENT IS DOUBLE-BROKERED, MOVED BY RAIL, CONSOLIDATED WITH ANY OTHER FREIGHT OR IF THE AGREED SERVICES ARE NOT FULFILLED.

Carrier must be CARB compliant when traveling to, from or through California and Carrier agrees to and indemnify Echo and all other parties from any loss or damage resulting from Carrier's failure to comply.

TRAILER SEALS: SEAL MUST BE APPLIED, WITH THE SEAL NUMBER NOTED ON THE BILL OF LADING, PRIOR TO DEPARTURE FROM THE SHIPPER. SEALS MUST NOT BE BROKEN WITHOUT PRIOR WRITTEN APPROVAL FROM ECHO GLOBAL LOGISTICS MANAGEMENT. FAILURE TO DELIVER AT THE DESIGNATED CONSIGNEE WITH THE PROPER SEAL INTACT WILL RESULT IN A CLAIM.

This confirmation governs the rate for the movement of the above-referenced freight as of the date specified and hereby amends, and is incorporated by reference and becomes part of that certain Agreement by and between BROKER and CARRIER. By means of either its signature on the Confirmation or its provision of service: i) CARRIER shall perform its services in accordance with all applicable laws, rules, and regulations (including, if applicable, the requirement to record hours of service via electronic logging device); and ii) CARRIER shall be conclusively presumed to have agreed to the rates and conditions set forth herein. CARRIER shall be conclusively presumed to have agreed to the rates and conditions set forth herein. CARRIER further represents and warrants that said mutually agreed upon rates are reasonable and compensatory, that the freight would not have been tendered to CARRIER at higher rates, and that no shipments handled under such rates will subsequently be subject to a later claim of undercharges.

CARRIER hereby confirms current and valid insurance coverage without exclusions in conflict with load 57418130, in amounts no less than the following: one million dollars (\$1,000,000) auto liability coverage, one million dollars (\$1,000,000) general liability coverage, \$100,000.00 cargo coverage. If carrier's insurance policy contains a schedule of covered vehicles, carrier will only transport this shipment using a vehicle that is listed as a scheduled vehicle on their insurance policy.

Pickup	
ITI	PKU#
650 S 23rd Street	Earliest: 03/14/2024 14:00
BEAUMONT TX 77707	Latest: 03/15/2024 14:00
409-718-7494	Weight: 43762
Pallets: 17	: 0
Item: Resin	
Pickup INSTRUCTIONS	
Drop	
Upaco Adhesives	DELV#
4105 CASTLEWOOD RD	Earliest: 03/18/2024 08:00
RICHMOND VA 23234	Latest: 03/18/2024 09:00
804-275-9231	Weight: 43762
Pallets: 17	: 0
Item: Resin	
Drop INSTRUCTIONS	
FCFS 0800-0900	

DRIVERS ARE RESPONSIBLE FOR AN ACCURATE COUNT OF CRATES, PALLETS/SKIDS & PIECES

PAYMENT REQUIREMENTS:

- SIGNED BOL / SIGNED DELIVERY RECEIPT / SIGNED RATE CONFIRMATION SHEET.
- LOAD / UNLOAD / LUMPER RECEIPTS MUST ACCOMPANY INVOICING OR THEY WILL NOT BE PAID.
- MUST REFERENCE LOAD # ON ALL CORRESPONDENCES.
- ALL ACCESSORIAL CHARGES MUST BE PRE-APPROVED & BILLED WITH RECEIPT & POD.

SIGNATURE: _____ DATE: _____

PLEASE SIGN AND FAX TO (312) 544-8490

Load Number 57418130

**Invoice, bill of lading, and any supporting documentation (weight tickets, lumper receipt, etc)
may be faxed to Accounts Payable at 312-544-8490
or e-mailed to aptruckload@echo.com**

PAYMENT OPTIONS

PHONE: 312-824-6483
EMAIL: APTRUCKLOAD@ECHO.COM
FAX: (312) 544-8490
MAIL: Echo Global Logistics, 600 W. Chicago Ave., Ste. 725,
Chicago, IL 60654

InstaPay Payment - 1.9% Fee*
IP Email: InstaPay@echo.com
IP Fax: 312-784-2380

*Subject to terms and conditions as outlined in the Echo carrier packet



BILL OF LADING				BOL Number: 57418130				
SHIP FROM				Carrier: ROYAL3 INC				
Name: ITI				Pro #:				
Address: 650 S 23rd Street,,				BAR CODE SPACE				
City/State/Zip: BEAUMONT, TX, 77707				Pick up date: 3/15/2024				
Dana P: 409-718-7494 Ext.				Trailer #: Seal #:				
Stop Notes:								
SHIP TO				REFERENCE INFORMATION				
Name: Upaco Adhesives								
Address: 4105 CASTLEWOOD RD								
City/State/Zip: RICHMOND, VA, 23234								
Valane P: 804-275-9231 Ext.								
Stop Notes: FCFS 0800-0900								
THIRD PARTY FREIGHT CHARGES BILL TO								
Echo Global Logistics								
600 W. Chicago, Suite 725								
Chicago, IL 60654 UNITED STATES								
Freight Charge Terms:				Carrier Acct #:				
Prepaid <input checked="" type="checkbox"/>				Quote ID:				
Collect <input type="checkbox"/>								
3rd Party <input checked="" type="checkbox"/>								
Special Instructions:				Shipper Instructions				
Questions Contact Arthur @224-619-6841				Pickup #:				
				Loc Type:				
				Special Services:				
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.				Consignee Instructions				
Delivery #:								
Loc Type:								
Special Services:								
LTL or Partial Only:								
# of Pallets: 0 Pallet Type: Skid Spots: Stackable: No								
Pallet Dimensions: L: W: H:								
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		HM	OD	COMMODITY DESCRIPTION	LTL Only	
QTY	TYPE	QTY	TYPE	(X)	(X)	Commodities requiring special or additional care or attention in handling or stowage must be so marked and checked as to	NMFC#	CLASS
0		17	Pallets			Resin	-	
0		17				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: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						COD Amount: \$ _____		
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).						Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>		
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.						Customer check acceptable: <input type="checkbox"/>		
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7)						Shipper Signature		
SHIPPER SIGNATURE / DATE				Trailer Loaded:		Freight Counted:		CARRIER SIGNATURE / PICKUP 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 Department of Transportation.				<input type="checkbox"/> By Shipper		<input type="checkbox"/> By Shipper		Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.
Shipper: _____ Date: _____				<input type="checkbox"/> By Driver		<input type="checkbox"/> By Driver/pallets said to contain		Carrier: _____ Date: _____
				<input type="checkbox"/> By Driver/Pieces				



BILL OF LADING				BOL Number: 57418130			
SHIP FROM				SHIP TO			
Name: ITI				Name: Upaco Adhesives			
Address: 650 S 23rd Street,,				Address: 4105 CASTLEWOOD RD			
City/State/Zip: BEAUMONT, TX, 77707				City/State/Zip: RICHMOND, VA, 23234			
Dana P: 409-718-7494 Ext.				Valane P: 804-275-9231 Ext.			
Stop Notes:				Stop Notes: FCFS 0800-0900			
THIRD PARTY FREIGHT CHARGES BILL TO				REFERENCE INFORMATION			
Echo Global Logistics 600 W. Chicago, Suite 725 Chicago, IL 60654 UNITED STATES							
Freight Charge Terms:				Carrier Acct #:			
Prepaid <input checked="" type="checkbox"/>				Quote ID:			
Collect <input type="checkbox"/>							
3rd Party <input checked="" type="checkbox"/>							
Special Instructions: Questions Contact Arthur @224-619-6841				Shipper Instructions Pickup #: Loc Type: Special Services:			
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.				Consignee Instructions Delivery #: Loc Type: Special Services:			
LTL or Partial Only: # of Pallets: 0 Pallet Type: Skid Spots: Stackable: No Pallet Dimensions: L: W: H:							
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		HM	OD	COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	(X)	(X)	Commodities requiring special or additional care or attention in handling or storage must be so marked and indicated as such	
0		17	Pallets			Resin	
0		17				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: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."						COD Amount: \$ _____	
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 14706(c)(1)(A) and (B).						Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>	
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.						Customer check acceptable: <input type="checkbox"/>	
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 Department of Transportation. Shipper: _____ Date: _____						Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	
Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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 Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Carrier: _____ Date: _____	

ROAD UPACO 3/18/24
George Brent
BISMA