



Bill to:  
FREIGHT FLEX LLC

Invoice Date: 04/16/2024  
Invoice #: 118555017  
Terms: NET 30  
Due Date: 05/16/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/12/2024		2849 River Rd, Council Bluffs, IA 51501, USA - 1002 Konica Dr, Elkton, MD 21921, USA			
			1	\$2,400.00	\$2,400.00

TOTAL
\$2,400.00

**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**

## TRUCKLOAD RATE CONFIRMATION

**118555017**

Freight Flex  
1701 W. Northwest Hwy, Ste 100  
Grapevine, Texas 76051  
817-668-0666



**Carrier Name:** ROYAL3 INC

**Pickup Date:** 4/12/2024

**Delivery Date:** 4/16/2024

**Service Level:** Normal

**Shipper Information:**

**Name:** Highline Council Bluffs

**Address:** 2849 River Rd  
COUNCIL BLUFFS, IA 51501

**Consignee Information:**

**Name:** Highline Elkton

**Address:** 1002 Konica Dr  
ELKTON, MD 21921

**Load #:** 118555017

**Customer PO:** 198825

**Shipper Ref:** 561842

**Trailer Type/Size:** Van / Full

**Contact:**

**Phone:**

**Pick Up Time:** 10:00 AM -  
10:00 AM

**Contact:**

**Phone:**

**Delivery Time:** 11:30 AM -  
11:30 AM

Handling Units	Package Type	Pieces	HAZMAT	List of Items	Total Weight
20	Pallet	20		AUTOMOTIVE ITEMS	43,151

**PICKUP INSTRUCTIONS:**

Appt. Control# 29539 Warehouse CB Appt. Date/Time. . 04/12/2024 10:00 A M PO  
Number. . . . 198825

**DELIVERY INSTRUCTIONS:**

Delivery appointments to any Highline Warren DC are reserved, if you are  
unable to make an appointment OR are expecting to be late and do not notify  
us by 16:00 PM CST the previous day, a \$150 no call/no show fee will apply.

**Rate:** USD \$2,400.00  
**TOTAL:** USD \$2,400.00

**\*\*\*\*\* SIGNED POD IS REQUIRED WITHIN 48 HOURS OF DELIVERY\*\*\*\*\***  
**POD's must be signed by the consignee with printed name, date, signature and time of delivery**

This confirmation governs the movement of the above-referenced freight as of the specified and hereby amends, is incorporated by reference and becomes a part of the certain transportation contract by and between "Broker" and "Contract carrier". Carrier Agrees to sign the confirmation and return it to the broker via FAX and carrier shall be conclusively presumed and compensatory that the freight would not have been tendered to Carrier at higher rates and that not shipments handled under such rates will subsequently be subject to a later claim for undercharges. IF AGREED SERVICES ARE FULFILLED, RATES ARE NOT NEGOTIABLE. Carrier is responsible for all delivery appointments. LATE DELIVERIES AND RETURN OF PROOF OF DELIVERY ARE SUBJECT TO RATE REDUCTION.

The undersigned accepts the referenced shipment on behalf of the carrier and acknowledge as correct the information contained herein, the carrier agrees to the terms of the Master agreement previously executed between our companies. Invoicing by the carrier and payment by Freight Flex Corporate, constitutes acceptance of this agreement and creates a valid contract for carriage shipment.

When loading, the driver must count and inspect his/ her load. The Driver / Carrier is responsible for piece count and condition of load at time of delivery. All shipments, unless otherwise specified, must be run 100% dedicated. If a carrier is caught combining or consolidating other freight then the load is subject to rate reduction. **For payment of freight charges, we must receive signed Bill of landing and Proof of Delivery with a carrier invoice.** Payment will be made 30 days after all required paperwork is received at Freight Flex Corporate, facilities. We are not responsible for Overweight. If Dimensions, Weight, Quantity or type of commodity are different than those consigned in our Load Confirmation Agreement, the carrier or Broker contracted MUST notify Freight Flex Corporate Before picking up and request a WRITTEN AUTHORIZATION. Freight Flex Corporate will not pay any extra charges without AUTHORIZATION.

**\*\*\* FACTORING COMPANIES NEED TO EMAIL NOA TO INVOICES@FREIGHTFLEX.COM \*\*\* Phone: 817-668-0666**

Please sign and return email to [invoices@freightflex.com](mailto:invoices@freightflex.com)

**Carrier Signature:**  
**MC#:**

*Samm Stanojevic*

**Driver Name:**  
**Driver Phone#:**

\_\_\_\_\_  
\_\_\_\_\_



## SHIP FROM:

Name: HIGHLINE WARREN LLC  
Address: 2849 RIVER ROAD  
City/State/Zip: COUNCIL BLUFFS, IA 51501  
SID#: 6752

Shipper Order: 561842

TF

Load Build Manifest

4853807

## SHIP TO:

Name: HIGHLINE WARREN LLC  
Address: 1002 KONICA DR  
City/State/Zip: ELKTON, MD 21921  
CID#: FOB: ☐

CARRIER NAME: CUSTOMER PICK UP FRT COLLECT  
Trailer number: 244804

Seal number(s): 0064402

SCAC: CPU

Pro number

Load number

Name: HIGHLINE WARREN LLC  
Address: 1002 KONICA DR  
City/State/Zip: ELKTON, MD 21921

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid \_\_\_\_\_ Collect XXXXXX 3rd Party \_\_\_\_\_

☒ Master bill of Lading: with attached underlying Bills of Lading  
(check box)  
EMERGENCY RESPONSE # 1-800-424-9300 (Chemtrec)

### CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT  LBS	PALLET/ SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
			Y	N					
198825	80	43150	Y	N		4B			561842 TF
Appt 04/12/24 10.00			Y	N					
Arr 04/12/24 10.07			Y	N					
Dep 04/12/24 11.46			Y	N					
			Y	N					
			Y	N					
			Y	N					
			Y	N					
			Y	N					
GRAND TOTAL	80	43150	Y	N					

## CARRIER INFORMATION

[illegible]

Where their 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

COD Amount: \$

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.

**Shipper Signature**

## SHIPPER SIGNATURE/DATE

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

TROY ZEISING 04/12/24

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 DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

FREDDY GILBREATH

04/12/24



## MASTER BILL OF LADING

CUSTOMER ORDER INFORMATION									
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT LBS	PALLET/SLIP (CIRCLE ONE)		Must Deliver By Date	5-Digit Destination Number	4-Digit PO Type Number	5-Digit Dept. Number	Additional Shipper Info
198825	80	43150	Y	N		4B			561842 TF
Appt 04/12/24 10.00			Y	N					
Arr 04/12/24 10.07			Y	N					
Dep 04/12/24 11.46			Y	N					
			Y	N					
			Y	N					
			Y	N					
			Y	N					
			Y	N					
GRAND TOTAL	80	43150	Y	N					

[illegible]

Where their 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: \$ \_\_\_\_\_

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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04/12/24