



Bill to:
ECHO GLOBAL LOGISTICS(ECHO)

Invoice Date: 04/17/2024
Invoice #: 57856515
Terms: NET 30
Due Date: 05/17/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/16/2024		1426 NE Little Beaver Dr, Grimes, IA 50111, USA - 259 30th St, Greeley, CO 80631, USA			
			1	\$2,250.00	\$2,250.00

TOTAL
\$2,250.00

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



Transportation Simplified™



Search, Bid, Book, Manage, Track, Get Paid.

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<https://echodrive.echo.com/>

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LOAD CONFIRMATION

24/7 DRIVER SUPPORT (855) 786-3246

Report All Issues, Delays and Additional Charges Immediately to 24/7 Driver Support
Electronic Tracking Must Be Provided Throughout Transit

Call the Driver Support line and ask for Load Number 57856515

ORDER 57856515

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	637.33 Miles	Equipment Notes:
Note:		

Pursuant to our verbal agreement of 4/16/2024 between Echo Global Logistics, hereafter referred to as ECHO, and ROYAL3 INC, MC944686/DOT2828543, hereafter referred to as CARRIER. Both parties agree that Broker's load number 57856515, moving on 04/16/2024 from GRIMES, IA to GREELEY, CO (number of stops shown below) will move at the following rate:

Service for Load # 57856515	Amount	Rate	Extended
Line Haul	1.00	\$2,250.00	\$2,250.00
		Total	\$2,250.00

PAY SUMMARY	
Line Haul	\$2,250.00
Total:	\$2,250.00

BY MEANS OF EITHER SIGNING THIS LOAD CONFIRMATION OR ITS PROVISION OF SERVICE, CARRIER ACKNOWLEDGES AND AGREES THAT IT WILL TRANSPORT THE LOAD SUBJECT TO THE TERMS AND CONDITIONS OF ITS CARRIER AGREEMENT (THE "AGREEMENT") WITH ECHO AND THAT IT AGREES TO COMPLY WITH THE TERMS OF THIS LOAD CONFIRMATION. CARRIER AGREES THAT THE SHIPPER AND CONSIGNEE ARE EACH A THIRD-PARTY BENEFICIARY OF THE AGREEMENT AND THE TERMS OF THIS LOAD CONFIRMATION.

1. Echo tenders this Load as a broker only and Carrier accepts this Load as the motor carrier responsible for its transportation. This Load Confirmation governs the rate for this Load as of the date specified and hereby amends and is incorporated by reference and becomes part of the Agreement. Carrier represents and warrants that it agrees to the rate herein, 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.
2. All travel directions provided by Echo are for informational purposes only. It is 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 shall provide electronic tracking throughout transit of the Load. Carrier must immediately advise Echo 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. Carrier agrees to be CARB compliant when traveling to, from or through California and shall indemnify Echo and its customers from any loss or damage resulting from Carrier's failure to so comply.
3. Only the Carrier identified in this Load Confirmation is authorized to transport this shipment. Compensation may be withheld if this Load is double-brokered, moved by rail, consolidated with any other freight or if the agreed terms hereunder are not satisfied. Carrier agrees, and authorizes its factoring company, if any, to reimburse Echo for all amounts paid on this Load if it is transported by any carrier other than the Carrier identified herein. Carrier waives

all rights to payment from the shipper and/or consignee.

4. Carrier hereby confirms current and valid insurance coverage without exclusions in conflict with this Load, 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, and workers compensation as required by law. 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. Carrier further confirms that its cargo insurance covers the Item(s) listed below without exclusion.
5. Carrier confirms that the driver assigned to this load is licensed, qualified and has available hours of service sufficient to pick up, transport and deliver this Load as required hereunder. Driver is responsible for an accurate count of crates, pallets/skids, and pieces.
6. Trailer seals must be applied, with the seal number noted on the bill of lading, prior to departure from the shipper. A seal may not be broken with prior written approval from Echo management. Failure to deliver at the designated consignee with the proper seal intact will result in a claim for full value of the Load.

Pickup	
Midwestern Bag Supply	PKU#
1300 NE Little Beaver Dr	Earliest: 04/16/2024 08:00
GRIMES IA 50111	Latest: 04/16/2024 17:00
5154189290	Weight: 43000
: 0	Pallets: 48
Item: Bags	

Pickup INSTRUCTIONS	
suite 106	

Drop	
All American Pet Proteins	DELV#
259 30TH ST	Earliest: 04/17/2024 08:00
GREELEY CO 80631	Latest: 04/18/2024 15:00
970-518-2732	Weight: 43000
: 0	Pallets: 48
Item: Bags	

Drop INSTRUCTIONS	
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INVOICE 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.

SUBMIT INVOICE TO:

EMAIL
APTRUCKLOAD@ECHO.COM
PHONE: (312) 824-6483



INSTAPAY
INSTAPAY@ECHO.COM
InstaPay Payment - 1.9% Fee*
IP Fax: (312) 784-2380
*Subject to terms and conditions as outlined in the Echo carrier packet

SIGNATURE: _____

DATE: _____

BILL OF LADING				BOL Number: 57856515							
SHIP FROM				Carrier: ROYAL3 INC							
Name: Midwestern Bag Supply				Pro #:							
Address: 1300 NE Little Beaver Dr.,				<div style="font-size: 24pt; font-weight: bold;">BAR CODE SPACE</div>							
City/State/Zip: GRIMES, IA, 50111											
Stop Notes: kristina P: 5154189290 Ext. suite 106											
SHIP TO				REFERENCE INFORMATION							
Name: All American Pet Proteins											
Address: 259 30TH ST											
City/State/Zip: GREELEY, CO, 80631											
Hortencia P: 970-518-2732 Ext.											
THIRD PARTY FREIGHT CHARGES BILL TO											
Echo Global Logistics 600 W. Chicago, Suite 725 Chicago, IL 60654 UNITED STATES											
Freight Charge Terms: Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/>		Carrier Acct #: Quote ID:									
Special Instructions: <div style="font-size: 24pt; font-family: cursive;">Seal #003581</div>				Shipper Instructions Pickup #: Loc Type: Special Services:		Consignee Instructions Delivery #: Loc Type: Special Services:					
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.											
LTL or Partial Only: # of Pallets: 0 Pallet Type: Skid Spots: Stackable: No Pallet Dimensions: L: W: H:											
CARRIER INFORMATION											
HANDLING UNIT		PACKAGE		WEIGHT	HM (X)	OD (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and notated as 1</small>	LTL Only			
QTY	TYPE	QTY	TYPE					NMFC#	CLASS		
8	Pallets	0		43000 lb			Bags	-			
8		0		43000 lb			GRAND TOTAL				
<small>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 _____"</small>						COD Amount: \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>					
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).											
<small>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.</small>						<small>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7)</small>					
SHIPPER SIGNATURE / DATE <small>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.</small> Shipper: <u>[Signature]</u> Date: <u>4-16-24</u>						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 <small>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 vehicle.</small> Carrier: <u>[Signature]</u> Date: _____	

Midwestern Bag & Supply

877-311-3422

Lot# : 2887

Item# : 3560 CVAG

Size : 35X35X60"

Palletized: 200 PCS

P/No. : 28 of 48

Midwestern Bag & Supply
877-311-3422

Lot# : 2887

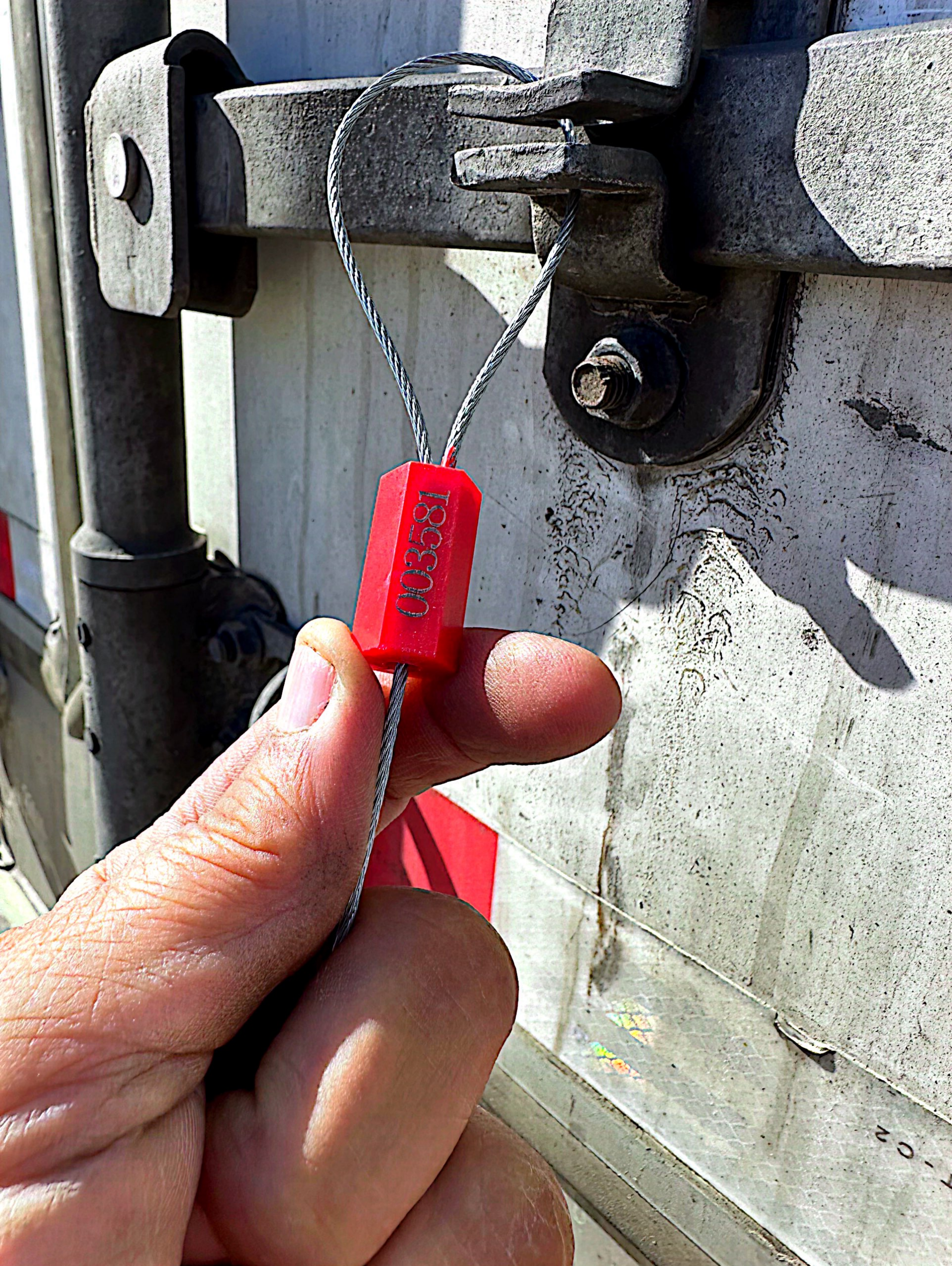
Item# : 3560 CVAG

Size : 35X35X60"

Palletized: 200 PCS

P/No. : 13 of 48





BILL OF LADING				BOL Number: 57856515			
SHIP FROM				Carrier: ROYAL3 INC			
Name: Midwestern Bag Supply				Pro #:			
Address: 1300 NE Little Beaver Dr.,				<div style="font-size: 24pt; font-weight: bold;">BAR CODE SPACE</div>			
City/State/Zip: GRIMES, IA, 50111							
Stop Notes: kristina suite 106 P: 5154189290 Ext.							
SHIP TO				REFERENCE INFORMATION			
Name: All American Pet Proteins							
Address: 259 30TH ST							
City/State/Zip: GREELEY, CO, 80631							
Hortencia P: 970-518-2732 Ext.							
Stop Notes:							
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		Consignee Instructions	
<div style="font-size: 24pt;">Seal # 003581</div>				Pickup #:		Delivery #:	
				Loc Type:		Loc Type:	
				Special Services:		Special Services:	
ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.							
LTL or Partial Only:							
# of Pallets: 0		Pallet Type:		Skid Spots:		Stackable: No	
Pallet Dimensions:		L: W: H:					
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT	HM (X)	OD (X)	COMMODITY DESCRIPTION
QTY	TYPE	QTY	TYPE				
8	Pallets	0		43000 lb			Bags
8		0		43000 lb			
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: \$ _____			
				Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/>			
				Customer check acceptable: <input type="checkbox"/>			
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. (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. Shipper: <u>WBS</u> Date: <u>4-16-24</u>		By Shipper <input type="checkbox"/>		By Shipper <input type="checkbox"/>		Carrier: _____ Date: _____	
		By Driver <input type="checkbox"/>		By Driver/pallets said to contain <input type="checkbox"/>			
		By Driver/Pieces <input type="checkbox"/>					