

**Bill to:**

FCC TRANSPORTATION SERVICES,INC
P.O. BOX 489,
Fremont,
NE,
68026

Invoice Date: 04/23/2024

Invoice #: 0107085

Terms: NET 30

Due Date: 05/23/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/22/2024		1510 WAREHOUSE DRIVE, OTTAWA, IL 61350 - 3210 21ST AVE, COUNCIL BLUFFS IA 51501			
			1	\$1,000.00	\$1,000.00

TOTAL
\$1,000.00

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

LOAD CONFIRMATION AGREEMENT
FCC Transportation Services (FTS)

P O BOX 489

FREMONT, NE 68026

Page 1

Dispatch # 844-350-8530

Fax 402-721-0959

0107085

Carrier: ROYAL3 INC
CHICAGO IL 60638
Date: 04/22/24

Contact: MILO
Phone: 630-566-1286
Fax:

Order
Order: 0107085
Miles: 396.0
Pickup # 15540
BOL: 4530207760

Commodity: SWIFT OUTBOUND
Approx. Weight: 30000.0
Trailer: Van
Reference: 15540

PU 1 **Name:** ZIP PAK
Address: 1510 WAREHOUSE DRIVE
OTTAWA IL 61350
Phone: 815-587-6488

Pickup Date: 04/22/24 0700
04/22/24 1500

Parking/Amentities

SO 2 **Name:** SWIFT PREPARED FOODS
Address: 3210 21ST AVE
COUNCIL BLUFFS IA 51501
Phone:

Delivery Date: 04/23/24 0700
04/23/24 1100

Parking/Amentities

Payment Carrer Freight Pay \$1,000.00
Total Carrier Pay: \$1,000.00

For Dispatch please call: 844-350-8530

Instructions

Special instructions here

- 1) Driver to call FTS for dispatch information and when unloading for release # 877-597-3069
- 2) Driver must check call daily (Monday through Sunday) before 1200 noon Central Time to 877-597-3069
- 3) Carrier is responsible for documenting a continuous seal record on shipping documents, ensuring seal records and signed intact by the shipper prior to departure from shipper and signed by the consignee as intact upon delivery.
- 4) If scheduled delivery appointment can't be met, Carrier will notify FTS prior to appointment. Failure to do this can result in fines.
- 5) **Carrier will not double-broker this shipment. If carrier does double-broker this shipment, carrier forfeits all rights to any revenue derived from this shipment.**
- 6) Driver responsible to scale load. FTS not responsible for over weight fines.
- 7) Upon completion of load, you can email your paper work to FTSBilling@fcc-inc.com.

By signing below, carrier acknowledges that they have read, understands, and will comply with all of the terms in this agreement.

	/	Milo Morrison	/	Dispatcher	/	4-22-2024
Carrier Signature		Printed Name		Title		Date

Order: 0107085 When complete, fax back to Greg Hill 402-721-0959


For Dispatch please call: 844-350-8530



BILL OF LADING

4/22/22 12-1

Date: 4/22/2024
Page 1 of 1

SHIP FROM		Bill of Lading Number: BOL0056126						
Name: Zip-Pak Street: 1510 Warehouse Drive City/State/ZIP: Ottawa, IL, 61350, USA SID#:		 (402) BOL0056126						
SHIP TO								
Name: PLUMROSE - IA Street: 3210 21ST AVE City/State/ZIP/Country: Council Bluffs, IA, 51501, USA CID#: C0340								
THIRD PARTY FREIGHT CHARGES BILL TO		Carrier Name: CPU:Customer Pick-up Trailer number: Seal number(s): 0005622						
Name: Street: City/State/ZIP/Country:		SCAC: Pro number:						
Special Instructions:		Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="radio"/> Collect <input checked="" type="radio"/> 3rd Party <input type="radio"/> <input type="radio"/> Master bill of lading with attached underlying bills of lading.						
CUSTOMER ORDER INFORMATION								
Customer Order Number	Customer PO Number	Packages	Weight	Pallet/Slip (circle one)	Additional Shipper Information			
SON0057339	4530207760	30	15,540.00	<input checked="" type="radio"/> Y <input type="radio"/> N	651-005			
				<input type="radio"/> Y <input type="radio"/> N				
				<input type="radio"/> Y <input type="radio"/> N				
				<input type="radio"/> Y <input type="radio"/> N				
		30	15,540.00					
CARRIER INFORMATION								
Handling Unit		Package		LTL Only				
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description	NMFC	Class
30	Pallet	480	Cartons	15,540.00		651-005 plastic zipper	66450	70
30		480		15,540.00				
Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 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 charges and all other lawful fees.				
Shipper Signature/Date				Shipper Signature				
Trailer Loaded: <input checked="" type="radio"/> By shipper <input type="radio"/> By driver				Freight Counted: <input checked="" type="radio"/> By shipper <input type="radio"/> By driver/pallets said to contain <input type="radio"/> By driver/pieces				
Carrier Signature/Pickup Date				Carrier Signature/Pickup Date				



BILL OF LADING

9/4/22 12-1
Date: 4/22/2024
Page 1 of 1

SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO	
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Bill of Lading Number: BOL0056126		Carrier Name: CPU:Customer Pick-up Trailer number: Seal number(s): 0005622		SCAC: Pro number:	
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Shipper Signature 			Shipper Signature		
Trailer Loaded: <input checked="" type="radio"/> By shipper <input type="radio"/> By driver			Freight Counted: <input checked="" type="radio"/> By shipper <input type="radio"/> By driver/pallets said to contain <input type="radio"/> By driver/pieces		
Carrier Signature/Pickup Date 4-23-2024			By signing above, I, as an agent of the carrier described within this document, hereby acknowledge receipt of products detailed on the included document. My signature acknowledges and certifies products are in good condition from the supplier and will be delivered without any defects.		