

**Bill to:**

AM TRANS EXPEDITE, INC
710 WEST BELDEN AVENUE SUITE B,
Addison,
IL,
60101

Invoice Date: 04/25/2024

Invoice #: 566119

Terms: NET 30

Due Date: 05/25/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
04/24/2024		334 N Main St, Burlington, NC 27217, USA - 9266 Meridian Way, West Chester Township, OH 45069, USA			
			1	\$900.00	\$900.00

TOTAL
\$900.00

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



AM TRANS EXPEDITE, LLC
FUSION TRANSPORT P.O BOX 24498
INVOICES@AMTRANSEXPEDITE.COM
NEW YORK NY 10087-4498

PRO # 566119

Rate Confirmation

04/24/24 10:49:32 (EST)

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JAKE SWAFFORD
(708) 312-0878 x 557 (p)
(847) 238-0400 (f)
jswafford@amtransexpedite.com

ROYAL3 INC
(630) 485-7370 (p) Att: GEORGE
(630) 485-6980 (f)
MC # 944686 Truck # 425316
DOT 2828543 Trailer # H03234
Driver ALEX Cell #

Size & Type: 53' VAN
Pieces:

Description: PAPER PRODUCTS
Weight: 44000

Miles: 473

CHARGES		DISPATCH NOTES
LINE HAUL RATE	900.00	PLEASE ACCEPT MACROPOINT TRACKING FOR AUTOUPDATES, PROVIDE POD SUBMISSION 24 HOURS UPON DELIVERY. ANY ACCESSORIAL REQUESTS MUST BE MADE SAME DAY AND IN/OUT TIMES WITH SIGNATURES MUST BE PROVIDED FOR ANY COMPENSATION
TOTAL RATE	900.00	

PICK 1

MEREDITH WEBB
334 N MAIN STREET
BURLINGTON NC 27217
Hours : 0600-1700
Phone/Contact: (336) 228-8378

Appointment 04/24/24 @ 14:00
Ref # 24-1848

STOP 1

WESTROCK MERCHANDISING
9266 MERIDIAN WAY
WEST CHESTER OH 45069
Hours : 24 HOURS

Appointment 04/25/24 @ FCFS
Appt Notes: SU-TH 24 HRS
Ref # 24-1848

EMAIL INVOICE AND POD TO INVOICES@AMTRANSEXPEDITE.COM FOR STANDARD PAY TERM DRIVER IS RESPONSIBLE FOR COUNTING PIECES AND SIGNING FOR NUMBER OF PIECES RECEIVED. IF FOR ANY REASON THERE IS A PROBLEM WITH THE COUNT, DRIVER MUST CONTACT BROKER FOR ASSISTANCE. The rate quoted by the BROKER, AM Trans Expedite, Inc. to the CARRIER addressed on this agreement, herein and is hereby confirmed and agreed to as the rate assessed for the shipment. Further more, by accepting this shipment at the rate quoted, the CARRIER agrees to hold harmless the SHIPPER, CONSIGNEE, and BROKER for any billing in excess of the rate and charges as quoted in the agreement. Carrier agrees to be responsible for cargo insurance on a full value basis for all shipments in their care, custody, and control. Carrier assumes the liability of a common carrier (i.e. Carmack Amendment liability) for loss, delay, damage to or destruction o any and all of Customer's goods or property while under Carrier's care, custod or control. Carrier shall pay Broker, or allow Broker to deduct from the amount Broker owes Carrier, Customer's full actual loss for the kind and quantity of commodities so lost, delayed, damaged or destroyed. Carrier shall be liable to Broker for all economic loss, including consequential damages that are incurred by Broker or the Customer for any freight loss, damage or delay claim. Carrier assumes the liability of a common carrier (i.e. Carmack Amendment liability) for loss, lets fees, damage to or destruction of any and all of Customer's goods or property while under Carrier's care, custody or control. Carrier shall pay Broker, or allow Broker to deduct from the amount Broker owes Carrier, Customer's full actual loss for the kind and quantity of commodities

(Rate Confirmation Details on Next Page)

Carrier Signature George Pavkovic

Date 04 / 24 / 2024
M D

Send Carrier Bills to the Address Above

PRO # 566119

must appear on all Invoices



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NEW YORK NY 10087-4498

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MC # 944686 Truck # 425316
DOT 2828543 Trailer # H03234
Driver ALEX Cell #

so lost, delayed, damaged or destroyed. Carrier shall be liable to Broker for all economic loss, including consequential damages that are incurred by Broker or the Customer for any freight loss, damage or delay claim. Carrier could be held responsible for late fees provided from the customer.

Carrier Signature George Pavkovic

Date 04 / 24 / 2024
M D

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must appear on all Invoices



Meredith Webb Printing Company, Inc.
334 N. Main Street • Post Office Box 2196
Burlington, North Carolina 27216-2196
Telephone 336-228-8378 Fax 336-229-4659

BILL OF LADING

Original - Non Negotiable

SHIPPER (from) Meredith Webb Printing Co 334 N Main Burlington, NC 27217 Contact: Candie Owen 336-228-8378		Date: February 24, 2024
CONSIGNEE (to) Westrock Merchandising Display 9266 Meridian Way West Chester, OH 45069		Carrier AM Trans
Third Party Freight Charges Bill to:		Bill Freight Charges to: PrePaid to MW
		NMFC NMFC 161700-03/Class 55
		Bill of Lading Number / MW Job Number 24-1848
		Shipping/Receiving Hours: 7:00am - 3:00pm

Flat Samples

Special Instructions:

☐ Inside Delivery ☐ Call Before Delivery ☐
☐ Liftgate at Delivery ☐ Do Not Double Stack ☐

Description of Freight				Weight (lbs)
PRINTED MATERIAL-Class 55				
Number of Skids	Qty	PO#		
1	2,150	807874	Salt & Vinegar Pepsico 50ct 30060769 Rework	2168

Shipper Signature/P/U Date & Time
Please Print

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

Charles Alexander

Trailer Loaded:

☐ By shipper
☒ By driver

SAMPLES

Freight Counted:

☐ By shipper
☒ By driver

Carrier Signature/P/U Date & Time
Please Print

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.

[Signature]



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Burlington, North Carolina 27216-2196
Telephone 336-228-8378 Fax 336-229-4659

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		<input type="checkbox"/> Inside Delivery <input type="checkbox"/> Call Before Delivery <input type="checkbox"/> <input type="checkbox"/> Liftgate at Delivery <input type="checkbox"/> Do Not Double Stack <input type="checkbox"/>		
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Charles Owen

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- ☐ By shipper
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[Signature]

