



**Bill to:**  
MCLEOD LOGISTICS, LLC  
611 N. 10TH ST.,  
Saint Louis,  
MO,  
63101

Invoice Date: 05/19/2024  
Invoice #: 1128124  
Terms: NET 30  
Due Date: 06/19/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/17/2024		575 ISLAND PARK DRIVE, MADISONVILLE, KY 42431 - 1302 Henderson Dr, N LITTLE ROCK, AR 72114			
			1	\$1,100.00	\$1,100.00

<b>TOTAL</b>
\$1,100.00

**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**



Trailer must be clean, dry, and odor-free. Please have driver call 855-241-3100 for dispatch. If carrier/driver fails to report detention within the first 2 hours of occurrence, detention compensation will be denied. In addition, IN and OUT times need to be notated on BOL with a legible customer signature. The original seal must be on the trailer upon delivery to avoid rejection and/or future claim and if original seal is not intact and load is rejected, carrier is responsible for full contents of load. Driver must check in under MCLEOD on ALL loads.

- Carrier acknowledges that Shipper's insertion of McLeod Logistics or McLeod Express name on the bill of lading, freight tender, or any other document shall be for Shipper's convenience only and shall not change McLeod Logistics status as a transportation broker. In the event Broker's name is listed on the bill of lading, shipping manifest or other similar document, as the carrier, Carrier shall cross-out or otherwise remove Broker's name and enter Carrier's name as applicable. Invoice must include McLeod load number and a signed copy of the BOL or POD.
- Lumpers will be reimbursed with a valid receipt as long as lumper is reported within 24 HR. If a receipt is not submitted, carrier will not be reimbursed and/or freight bill will be deducted by that amount.
- Invoices can be mailed to P.O. Box 1368, St Louis, MO 63188 or e-mailed to [accounting@mcleodlogistics.com](mailto:accounting@mcleodlogistics.com)

**\*Thank you for your business\***

McLeod Logistics LLC  
PO Box 1368  
St. Louis, MO 63188  
(855) 241-3100  
[www.mcleodexpress.com](http://www.mcleodexpress.com)



McLeod Logistics  
1001 Craig Rd. Ste. 352  
St. Louis, MO 63146  
855-241-3100 888-237-5655

## Load Confirmation

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<b>Carrier:</b>	ROYAL3 INC CHICAGO IL 60638	<b>Contact:</b>	sterling
<b>Date:</b>	05/17/2024	<b>Phone:</b>	(630) 566-2080
		<b>Fax:</b>	
<b>Order</b>	<b>Order:</b> 1128124 <b>Miles:</b> 369.0 <b>Temp:</b> <b>BOL:</b> 504377001	<b>Commodity:</b>	LID/12/16/22 OZ/CLEAR FLAT
		<b>Weight:</b>	3814.5
		<b>Trailer:</b>	Van (DAT)
		<b>Reference:</b>	7026215

<b>PU 1</b>	Name:	BERRY PLASTICS	Date:	05/17/2024 1800
	Address:	575 ISLAND PARK DRIVE MADISONVILLE KY 42431	Driver Load:	No driver loading or unload
	Reference number:	CR 7026215		
	Reference number:	LI 504377001		
	Reference number:	P8 07492609		

<b>SO 2</b>	Name:	Martin Brower	Date:	05/18/2024 1300
	Address:	1302 Henderson Dr N LITTLE ROCK AR 72114	Driver Load:	No driver loading or unload
	Reference number:	CR 25916		
	Reference number:	CR 37		
	Reference number:	CR 37 2024 7026215		
	Reference number:	CR 7026215		
	Reference number:	CR 9070950		
	Reference number:	CR DRY MCD		
	Reference number:	CR MCD		
	Reference number:	CR rbagby@mcleodlogistics.com		
	Reference number:	LI 504377001		
	Reference number:	LM 392.1		
	Reference number:	PO 7026215		



McLeod Logistics  
1001 Craig Rd. Ste. 352  
St. Louis, MO 63146  
855-241-3100 888-237-5655

## Load Confirmation

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<b>Carrier:</b>	ROYAL3 INC	<b>Contact:</b>	sterling
	CHICAGO IL 60638	<b>Phone:</b>	(630) 566-2080
<b>Date:</b>	05/17/2024	<b>Fax:</b>	

Reference number:	SI	904448567
Reference number:	TP	DRY
Reference number:	Z1	850
Reference number:	ZZ	93

<b>Payment</b>	<b>Carrier Freight Pay:</b>	\$1,100.00
	<b>Total Carrier Pay:</b>	\$1,100.00

**Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.**

BERRY PLASTICS - ARMAPIPA: TRAILER MUST BE 100% FOOD GRADE - CLEAN / DRY / ODOR FREE. NO HOLES IN THE ROOF/WALLS OR RECENT AND BAD STAINS. NO GLASS PARTICLES, METAL SHAVINGS, HAY, OR PAPER PULP STUCK IN THE FLOOR OR WALLS.

BERRY PLASTICS - ARMAPIPA: ALL ACCESSORIALS - INCLUDING LUMPER RECEIPTS - MUST BE SUBMITTED TO US WITHIN 24 HRS OF DEL. CUSTOMER REQUIREMENT OR THEY WILL DENY ANY ACCESSORIAL REQUESTS - INCLUDING LUMPERS

BERRY PLASTICS - ARMAPIPA: \*\*\*DRIVER MUST BE WILLING/ABLE TO DO MACROPOINT TRACKING. MACROPOINT TRACKING IS A REQUIREMENT ON THIS SHIPMENT BY THE CUSTOMER\*\*\*

**Please Sign:** *Sterling Medica*

(X) Accept

( ) Decline

Attention: Jim Barnes  
(855) 241-3100  
logistics@mcleodlogistics.com

Driver Name: Nelson  
Driver Cell: 786-780-9920  
Driver Email:  
Tractor #: 738  
Trailer #: W97973



[illegible]



# BILL OF LADING

DATE: 5/17/2024

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SHIP FROM				BILL OF LADING NUMBER: 08036887			
BERRY GLOBAL, INC. 270 824-9990 575 ISLAND PARK DRIVE MADISONVILLE, KY 42431				BAR CODE SPACE			
SID#: 9039141				TMS Load #: 474682425			
SHIP TO				CARRIER NAME: CPU Common carrier			
MARTIN-BROWER CO 1302 HENDERSON DRIVE N LITTLE ROCK AR 72114				TRAILER NUMBER: W97973 SEAL NUMBER(S): 0043927			
LOC#:				SCAC: CPUX PRO NUMBER:			
CID#:				BAR CODE SPACE			
THIRD PARTY FREIGHT CHARGES BILL TO:				FREIGHT CHARGE TERMS: (Freight charges are prepaid unless marked otherwise)			
				PREPAID _____ COLLECT <input checked="" type="checkbox"/> 3rd PARTY _____			
				<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading <small>(check box)</small>			
SPECIAL INSTRUCTIONS:				Load Locks Required - Y N			
				<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>Martin Brower</b></p> <p style="margin: 0;">NLR AR (1300)</p> <p style="margin: 0;">Appt Date/Time 5-18 (1233)</p> <p style="margin: 0;">Check In Date/Time 5-18 (1233)</p> <p style="margin: 0;">Check Out Time 5-18 1358</p> <p style="margin: 0;">DC Signature <i>NE</i></p> <p style="margin: 0;">Driver Signature <i>[Signature]</i></p> <p style="margin: 0; font-size: small;">*Use Military Time to Avoid Confusion *</p> </div>			
CUSTOMER ORDER INFORMATION							
CUSTOMER ORDER NUMBER	NO. PKGS.	WEIGHT (LB)	CUBE	PALLET / SLIP (Circle One)	ADDITIONAL SHIPPER INFO		
7026215	288	3744		Y N			
				Y N			
				Y N			
				Y N			
				Y N			
				Y N			
GRAND TOTAL	288	3744					
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		WEIGHT (LB)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE			NMEC NO.	CLASS
		144	BX	2016		Plastic Items	156600-250
		144	BX	1728		Plastic Items	156600-250
		288		3744		GRAND TOTAL	
If a motor carrier, freight forwarder, broker or other transportation service provider accepts this shipment from anyone other than the shipper listed hereon, it agrees to seek payment of its charges exclusively from the entity from which it accepted the shipment and expressly waives any other collection rights or remedies otherwise available to it, including any right to seek payment of the transportation charges from the consignor or consignee.						COD AMOUNT: \$ _____	
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, the property described below, received in good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown below. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state regulatory agency, or maintained by the carrier, except as specifically agreed to in writing by the Shipper and Carrier. Rate individually determined and NOT subject to filed tariffs. No limitation of carrier liability applies to this shipment.						FEE TERMS: COLLECT: <input type="checkbox"/> PREPAID: <input type="checkbox"/> CUSTOMER CHECK ACCEPTABLE: <input type="checkbox"/>	
						Unless this shipment is marked FREIGHT PREPAID, the carrier shall not make delivery of this shipment without payment of freight and all other lawful charges, and if it does it shall have no recourse against the Consignor or anyone other than the Consignee. <div style="text-align: right;"> <b>/s/ Jason Greene</b>                      Shipper Signature                 </div>	
SHIPPER SIGNATURE / DATE				TRAILER LOADED: FREIGHT COUNTED:		CARRIER SIGNATURE / PICKUP DATE	
This is to certify that the herein named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to applicable labels on product, the regulations of the Department of Transportation, and NMFC number/classification as noted in above section "LT Only." <div style="text-align: right; font-family: cursive;"> <i>Joe McPherson</i> </div>				<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		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. Property described above is received in good order, except as noted.	
				<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver / Pallets sold to contain <input type="checkbox"/> By Driver / Pieces			