

**Bill to:**

J. RAYL TRANSPORT INC
1016 TRIPLETT BOULEVARD ,
Akron,
OH,
44306

Invoice Date: 05/21/2024

Invoice #: 1472529

Terms: NET 30

Due Date: 06/21/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/20/2024		51 E Hines Hill Rd, Boston Heights, OH 44236 - 1107 NORTH ELLIS STREET, Bensenville, IL 60106			
			1	\$750.00	\$750.00

TOTAL
\$750.00

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

JRAYL TRANSPORT

05/20/24 10:23

1016 Triplett Blvd. Akron, OH 44306

Phone#: 800-929-5092

Rate Cons Fax#: 330-940-1663

POD & Invoice Fax#: 330-784-4040 ; AP@Jrayl.com

Load & Rate Confirmation

CARRIER: ROYAL 3 INC
PHONE: 6304857370
FAX:

ORDER: 1472529
*** ORDER NUMBER(S) MUST APPEAR ON ALL BILLING ***
BL#

Load At:
ARHAUS FURNITURE
51 E Hines Hill Rd
ALL Lloads must track with MACRO POINT
ELECTRONIC TRACKING!!!
Boston Heights,OH/ 44236

Earliest: 5/20/2024 1:00:00 PM **BL#**
Latest: 5/20/2024 4:00:00 PM
Weight:
Instructions:

Deliver To:
FIDELITONE [ARHAUS CHICAGO (BENSENVILLE)]
1107 NORTH ELLIS STREET

Bensenville,IL/ 60106

Earliest: 5/21/2024 8:00:00 AM **BL#**
Latest: 5/21/2024 8:00:00 AM
Weight:
Instructions:

Remarks: for delivery DRIVER MUST PARK IN ANY OPEN DOCK DOOR 14-18. PLEASE DO NOT BLOCK EMPLOYEE SPACES;MAKE SURE TO CHECK IN FOR APPOINTMENT INSIDE Checking in 15-30 minutes early
DRY VAN ONLY

Pay Summary:

Flat Rate: \$750.00
Accessorial: \$0.00
Fuel Surcharge: \$0.00
Total: \$750.00

Miles: 383

Carrier agrees and warrants that:

THIS CUSTOMER REQUIRES EXCLUSIVE USE OF THE TRUCK, REGARDLESS OF WEIGHT/ PALLETS, ETC. carrier must Return all original signed bill of ladings and POD documents within 24hrs of delivery.

Carrier understands that failure to comply with the above may result in denial of payment at the sole discretion of Broker.

No charges other than those listed herein shall be permitted without prior written consent from Broker, except for approval of lumper/unloading services shall be requested via telephone prior to incurring said charges. Proof of payment receipts for all approved charges shall be returned to Broker within 24hrs of delivery for reimbursement. Carrier understands that failure to comply with the above may result in denial of reimbursement claims at the sole discretion of Broker.

Double brokering, co-broker or sub-contract/leasing this shipment to any other carrier is forbidden . Failure to comply with this shall result in automatic termination of this agreement and Carrier shall be subject to all costs incurred by Broker to recover this shipment.

Driver's in and out times must be documented on BOL and signed by shipper/receiver. This must also be approved by our dispatch to receive payment for a valid truck detention.

driver Instructions:

1. Driver must call 800-929-5092 Ext.3465. for dispatch 2. Drivers are required to secure freight for transit and seal loaded trailer.
 3. Driver must accept macro point tracking 4. Any and All delays must be reported to the brokerage immediately.
 5. Any late deliveries without notifying dispatch in advance , will be subject to a minimum \$50 fine per occurrence per day.
 6. Carrier payment will be made 30 days from receipt of all legible documentation.
- Settlement will not be paid unless driver calls in empty within 24 hrs of delivery



Brokerage

Date: Monday, May 20, 2024

Order: 1472529

X _____



ROYAL 3 INC

Date: _____



Date: 05/20/2024

BILL OF LADING

Page: 1

SHIP FROM		SHIP TO		THIRD PARTY FREIGHT CHARGES BILL TO	
Name:	ARHAUS LLC - BH	Name:	FIDELITONE CHICAGO	Name:	
Address:	51 E Hines Hill Rd	Address:	1107 N Ellis St	Address:	
City/State/Zip:	Hudson OH 44236-1151	City/State/Zip:	Bensenville IL 60106	City/State/Zip:	
SID#:	SHI000000445	CID#:			
FOB: <input type="checkbox"/>		FOB: <input type="checkbox"/>			
Bill of Lading Number: 04000000000028316		CARRIER NAME: JRAYL		Freight Charge Terms: (freight charges are prepaid unless marked otherwise)	
		Trailer number: H03246		Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/>	
(402)04000000000028316		Seal Number: 187891			
		SCAC: JRAYL			
		Pro number: 1472529			
					
		(9012K)JRAYL1472529			
SPECIAL INSTRUCTIONS:		Master Bill of Lading: with attached underlying Bills of Lading			
Master Bill Of Lading Number:		<input type="checkbox"/> (check box)			

CUSTOMER ORDER INFORMATION							
MANIFEST KEY		# PKGS	WEIGHT	PALLET/SLIP		Additional Shipper Info	
800-932TR-052024		37 ctns	3359.52 lb	Y	N		
GRAND TOTAL		37 ctns	3359.52 lb				
CARRIER INFORMATION							
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	NMFC #	CLASS
37	ctns	37	ctns	3360 lb			
37		37		3360 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:				COD Amount: \$			
*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____.				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.			
SHIPPER SIGNATURE/DATE				SHIPPER SIGNATURE			
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 DOT.							
Trailer Loaded:				Freight Counted:			
<input type="checkbox"/> By Shipper				<input type="checkbox"/> By Shipper			
<input type="checkbox"/> By Driver				<input type="checkbox"/> By Driver/pallets said to contain			
				<input type="checkbox"/> By Driver/Pieces			
CARRIER SIGNATURE/PICKUP DATE				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.			

Date: 05/20/2024		BILL OF LADING		Page: 1	
SHIP FROM				Bill of Lading Number: 04000000000028316  (402)04000000000028316	
Name: ARHAUS LLC - BH Address: 51 E Hines Hill Rd City/State/Zip: Hudson OH 44236-1151 SID#: SH100000445 FOB: <input type="checkbox"/>					
SHIP TO					
Name: FIDELITONE CHICAGO Address: 1107 N Ellis St City/State/Zip: Bensenville IL 60106 CID#: FOB: <input type="checkbox"/>				CARRIER NAME: JRAYL Trailer number: H03246 Seal Number: 187891 SCAC: JRAYL Pro number: 1472529  (9012K)JRAYL1472529	
THIRD PARTY FREIGHT CHARGES BILL TO				Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> <input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading (check box)	
SPECIAL INSTRUCTIONS: Master Bill Of Lading Number:					

CUSTOMER ORDER INFORMATION								
MANIFEST KEY		# PKGS	WEIGHT	PALLET/SLIP		Additional Shipper Info		
800-932TR-052024		37 ctns	3359.52 lb	Y	N			
GRAND TOTAL		37 ctns	3359.52 lb					
CARRIER INFORMATION								
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowage must be so marked and packaged as to ensure safe transportation with ordinary care. See Shipping Rules and Regulations, page 388.</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
37	ctns	37	ctns	3360 lb				
37		37		3360 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. <div style="text-align: right;">Shipper Signature</div>			
SHIPPER SIGNATURE/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 DOT.				Trailer Loaded: Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> 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.		

Ben T Mullins
 #30 5/21/24

LUIS
 305-407-0395