



Bill to:
TRAFFIX
141 W Jackson BLVD Suite #300A,
Chicago,
IL,
60604

Invoice Date: 05/31/2024
Invoice #: T00625706
Terms: NET 30
Due Date: 07/01/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
05/30/2024		2800 Eastern Blvd, Middle River, MD 21220, USA - 24 Clapper Rd, Milton, VT 05468, USA			
			1	\$1,300.00	\$1,300.00

TOTAL
\$1,300.00

PLEASE NOTE

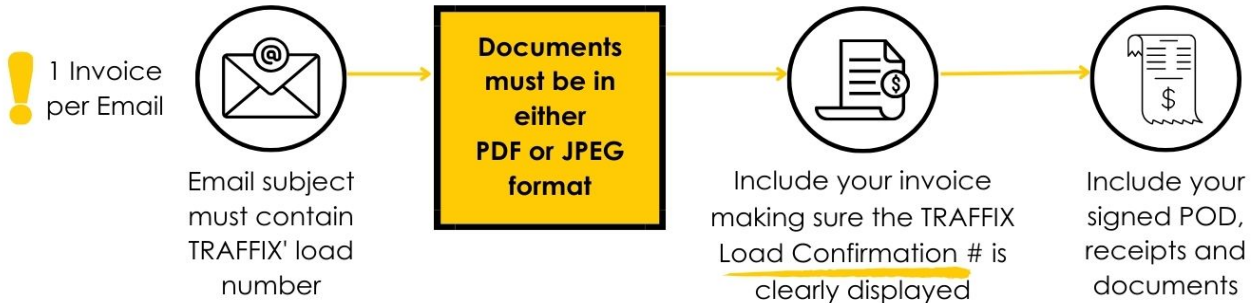
The right to payment under this invoice has been assigned to Compass payment Solutions LLC (CFS) and all payments hereunder are to be directed to the assignee at the address noted below. Remittances to other than CFS do not constitute payment of this invoice. CFS must be given notification of any claims, 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

TRAFFIX
**CARRIER PAYMENT
APP**

COMING SOON *Stay Tuned!*

To receive payment, you **MUST follow** these instructions:



REGULAR PAYMENT: Paid within 30 days of successful invoice and documentation submission.

Email:
carrierpayment@traffix.com

Subject:
Regular - TRAFFIX Load #
<<Insert your load
confirmation number>>



IMPORTANT

Payment aging will begin
on the date complete
documentation is received.



**Payment related questions
can be directed to:**
ap@traffix.com
or
+1 855 240 0730

FES Pay Clients: Please follow the instructions below to be paid within 12 business hours.

1

Email:
fespay@smartfleetfunding.com
Subject:
FES Pay - TRAFFIX load # <<Insert Load #>>

2

SUBMISSIONS MUST INCLUDE:

- Invoice with TRAFFIX load #
- TRAFFIX load confirmation
- Proof of Delivery
- Void Cheque (for first time users only)



FES Pay powered by

**SMART FLEET
FUNDING**

**Get paid within 12 business
hours for only 2.99%!***

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and secure! Rates as low as 2%*!
fespay@smartfleetfunding.com

Talk to us about dispatch, insurance,
and fuel savings!
1-888-875-5506 Option 1

**Terms & Conditions Apply*

Traffix Load #: T00625706

Date Tendered: 05-30-2024



Accept/Decline/View Tender

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Carrier Information

Carrier:944686 Royal3 Inc

Contact:Luc Sipovac

Email:kelly@royal3inc.com

Traffix Contact

Contact:Michael Gatto

Phone:312 820 5949

Email:mgatto@traffix.com

Division:CHICAGO BH

Rate Confirmation Information

Cost Type	Accessorial Desc.	Amount
Freight		\$1,300.00 USD
Total		USD \$1,300.00

Load Summary

Picks / Drops:	1 Pick(s) 1 Drop(s)
Equipment Required:	Dry Van- 53 FT
Mode:	TL
Service:	OTR
Total Miles:	483.0 Mi
Total Weight:	21,725 Lb
Total Pallets:	11
Total Pieces:	715
Total Shipment Value:	\$150,000.00 USD

Notes

Special Instructions:

-TECH TRACKING REQUIRED -LOAD MUST BE RAN DEDICATED -NO RELAYS, DRIVER CHANGES, ETC -AIR RIDE IS REQUIRED **DRIVER MUST HAVE COPY OF BOL ON HAND FOR PICKUP**

Shipper - Pickup 1 OF 1	
Shipper: MWG Address: 2800 Eastern Blvd Middle River, MD 21220 Telephone: Contact:	Reference Numbers
	PO Number: MWG PO-904
Pickup Date: 05-30-2024	
Appointment Time: 11:00	

Items Confirm Receipt Of								
Commodity	Handling Units	Unit Type	Stackable	Pieces	Pieces Type	Weight	DIMS (L x W x H)	Temperature
VSUN 410w	11	Pallet	Yes	715	Piece	21725 Lb		

Consignee - Delivery 1 OF 1	
Consignee: MWG Address: 24 Clapper Road Milton, VT 05468 Telephone: 802.322.4294 Contact: Jeremiah Cutsinger	Reference Numbers
	PO Number: MWG PO-904
Delivery Date: 05-31-2024	
Appointment Time: 08:00 - 13:00	

Consignee Notes
ON SITE CONTACT IS Jeremiah Cutsinger: 802.322.4294

Items								
Confirm Receipt Of								
Commodity	Handling Units	Unit Type	Stackable	Pieces	Pieces Type	Weight	DIMS (L x W x H)	Temperature
VSUN 410w	11	Pallet	Yes	715	Piece	21725 Lb		

Terms and Conditions

FAILURE TO COMPLY WITH THESE TERMS & CONDITIONS WILL RESULT IN NON PAYMENT OF INVOICE:

1. CARRIER MUST ADVISE TRAFFIX OF ANY DELAYS OR DISCREPANCY ATLEAST 2 HOURS PRIOR TO PICK UP / DELIVERY APPOINTMENT TIME. MISSED OR LATE APPOINTMENTS MAY BE SUBJECT TO FINES AND/ OR CHARGE BACK BY TRAFFIX.
2. DOUBLE BROKERING OF TRAFFIX FREIGHT IS STRICTLY PROHIBITED. TRUCK/TRAILER INFORMATION ON BOL MUST MATCH CARRIER CONFIRMATION.
3. TEAM SERVICE REQUIRES A MINIMUM OF 1000 MILES OF TRAVEL PER 24 HOUR PERIOD. LESS THEN 1000 MILES MAY BE SUBJECT TO FINES AND/ OR CHARGE BACK BY TRAFFIX.
4. BACK SOLICITATION WILL RESULT IN LEGAL ACTION AND NON PAYMENT.
5. CARRIER IS RESPONSIBLE FOR ALL LOADING AND UNLOADING CHARGES.
6. CARRIER MUST PULP ALL PRODUCT DURING LOADING AND ENSURE TEMPERATURE MATCHES THEIR BILL OF LADING AND LOAD CONTRACT. DISCREPANCY MUST BE REPORTED TO TRAFFIX DISPATCH IMMEDIATELY AND MUST BE APPROVED BY TRAFFIX PRIOR TO DEPARTURE FROM SHIPPER.
7. CARRIER AGREES THAT THIS CONTRACT IS LIMITED TO THE CARRIER BROKER RELATIONSHIP AND ALSO AGREES TO HOLD THE SHIPPER, CONSIGNEE, AND OTHER BENEFICIAL PARTIES HARMLESS AGAINST ANY DISPUTES ARISING FROM PAYMENT OR SERVICE.
8. ANY ADDITIONAL CHARGES MUST BE APPROVED BY TRAFFIX PRIOR TO INVOICING. CARRIER MUST OBTAIN A REVISED LOAD CONTRACT FROM TRAFFIX DISPATCH FOR THE EXPENSE TO BE PROCESSED.
9. CARRIER IS RESPONSIBLE FOR ALL ASSOCIATED BOND CHARGES AND FINES. PROOF OF BOND CANCELLATION MUST BE PRESENTED FOR PAYMENT.
10. CLAIMS AND DAMAGES WILL BE HELD AGAINST CARRIER ACCOUNT IN ARREARS UNTIL THE CLAIM IS SETTLED. TRAFFIX SHALL HAVE ALL THE RIGHTS AND REMEDIES OF CARRIER UNDER CANADIAN AND UNITED STATES LAW TO PURSUE THE CONSIGNEE/BENEFICIAL RECIPIENT FOR UNPAID FREIGHT IN THE EVENT THAT THE CARRIER HAS BEEN PAID FOR THE LOAD BUT TRAFFIX HAS NOT.
11. ORIGINAL SIGNED PROOF OF DELIVER, CUSTOMS CLEARANCE, AND TRAFFIX LOAD CONTRACT ALL REQUIRED FOR INVOICE SUBMISSION. ALL CARRIER DOCUMENTATION SHOULD BE SUBMITTED TO CARRIERPAYMENT@TRAFFIX.COM WITHIN 72 HOURS OF DELIVERY. IF CARRIER DOCUMENTATION IS RECEIVED MORE THAN 60 DAYS AFTER LOAD HAS DELIVERED, CARRIER WILL HAVE TO GO THROUGH AN APPEAL PROCESS TO BE PAID ON LOAD
12. JURISDICTION WILL BE DETERMINED BY THE TRAFFIX BILL-TO: CITY / STATE (PROVINCE) AS REFERENCED IN THIS CONTRACT.
13. FUEL ADVANCES OF 40% ARE CHARGED A FEE OF 5% OF THE REQUESTED ADVANCE AMOUNT.
14. IF DETENTION OCCURRED, TIMES MUST BE STAMPED AND SIGNED BY PICKUP AND/OR DELIVERY FACILITY IN ORDER TO BE PAID. CARRIER IS ALSO REQUIRED TO NOTIFY TRAFFIX PRIOR TO DETENTION OCCURRING TO ASSIST WITH THE LOADING/UNLOADING PROCESS.
15. IF LUMPER OCCURRED AT DELIVERY, CARRIER MUST NOTIFY TRAFFIX OF AMOUNT PAID & SUBMIT RECEIPT WITHIN 48 BUSINESS HOURS OF DELIVERY OR LUMPER WILL NOT BE REIMBURSED.
16. SEAL MUST REMAIN INTACT AT ALL TIMES AND MAY NOT BE BROKEN WITHOUT CONSENT FROM TRAFFIX. IN THE EVENT THAT A SEAL IS BROKEN BY CANADIAN BORDER SERVICES OR UNITED STATES CUSTOMS & BORDER PROTECTIONS, PLEASE ADVISE TRAFFIX IMMEDIATELY WITH THE NEW SEAL INFORMATION. ANY SEAL BROKEN BY THE CARRIER WILL RESULT IN AN INSURANCE CLAIM FOR THE FULL VALUE OF THE PRODUCT ONBOARD.

The link provided below contains important information regarding the FDA's new regulations for the transportation of food for human and animal consumption. As a carrier you are responsible for meeting the regulations that are outlined in the attached documents. Please go to the attached link and read the documents. <https://traffix.com/media/download/68>

Accept/Decline/View Tender

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VSUN
Innovative & Smart

NSA
Innovative & Smart

Photovoltaic Module

ANCRA

SHIP FROM:																	
Name: MWG				Load#: T00625706				Date: 05-30-2024									
Address: 2800 Eastern Blvd				BOL#:													
City/State/Zip: Middle River, MD 21220				BOL COMMENT:													
Hours of Operation:																	
Contact:																	
SHIP TO:																	
Name: MWG				Pickup Date: 2024-05-30T11:00													
Address: 24 Clapper Road				Pickup Appt: 2024-05-30T11:00													
City/State/Zip: Milton, VT 05468				Delivery Date: 2024-05-31T13:00													
Hours of Operation:				Delivery Appt:													
Contact: Jeremiah Cutsinger, 802.322.4294				Equipment Type: Dry Van- 53 FT													
THIRD PARTY FREIGHT CHARGES BILL TO:				REQUESTED SERVICE:													
Name: TRAFFIX USA INC				SCAC: NAME:													
Address: PO Box 850098				Trailer Number:				Truck#:									
City/State/Zip: Minneapolis, MN 55485-0098				SPECIAL INSTRUCTIONS:													
Freight Charge Terms: (freight charges prepaid unless marked)																	
Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/>																	
CUSTOMER ORDER INFORMATION:																	
CUSTOMER ORDER NUMBER			# PKGS		WEIGHT		PALLET SLIP YES or NO		REFERENCE NUMBERS								
1461367			11		21725.00				PO Number: MWG PO-904								
GRAND TOTAL			11		21725.00												
CARRIER INFORMATION:																	
HANDLING UNIT		PACKAGE		WEIGHT		H.M. (x)		L		W		H		COMMODITY DESCRIPTION		LTL ONLY	
QTY	TYPE	QTY	TYPE											Commodities requiring special, additional care, attention in handling, or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. <small>See Section 2(e) of NMFC Item 360</small>		NMFC#	CLASS
11	Pallet	715	Piece	21725.00 Lb										VSUN 410w,			
11		715		21725.00										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: _____ Prepaid: <input checked="" type="checkbox"/> _____ Customer check acceptable: _____					
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 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. _____ Signature/Date				CONSIGNEE SIGNATURE PRINT NAME 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. _____ Signature/Date									



SHIP FROM:									
Name: MWG									
Address: 2800 Eastern Blvd									
City/State/Zip: Middle River, MD 21220									
Hours of Operation:									
Contact:									
SHIP TO:									
Name: MWG									
Address: 24 Clapper Road									
City/State/Zip: Milton, VT 05468									
Hours of Operation:									
Contact: Jeremiah Cutsinger, 802.322.4294									
THIRD PARTY FREIGHT CHARGES BILL TO:									
Name: TRAFFIX USA INC									
Address: PO Box 850098									
City/State/Zip: Minneapolis, MN 55485-0098									
Freight Charge Terms: (freight charges prepaid unless marked)									
Prepaid <input checked="" type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/>									
Load#: T00625706									
Date: 05-30-2024									
BOL#:									
BOL COMMENT:									
Pickup Date: 2024-05-30T11:00									
Pickup Appt: 2024-05-30T11:00									
Delivery Date: 2024-05-31T13:00									
Delivery Appt:									
Equipment Type: Dry Van- 53 FT									
REQUESTED SERVICE:									
SCAC: NAME:									
Trailer Number: Truck#:									
SPECIAL INSTRUCTIONS:									
CUSTOMER ORDER INFORMATION:									
CUSTOMER ORDER NUMBER		# PKGS		WEIGHT		PALLET SLIP YES or NO		REFERENCE NUMBERS	
1461367		11		21725.00				PO Number: MWG PO-904	
GRAND TOTAL		11		21725.00					
CARRIER INFORMATION:									
HANDLING UNIT		PACKAGE		WEIGHT		H.M. (x)		LTL ONLY	
QTY	TYPE	QTY	TYPE						
11	Pallet	715	Piece	21725.00 Lb					
11		715		21725.00					
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: _____ Prepaid: <input checked="" type="checkbox"/> _____	
								Customer check acceptable: _____	
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 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.					CONSIGNEE SIGNATURE PRINT NAME Jeremiah Cutsinger DATE: 5/31/24				
Signature/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. Signature/Date				