



**Bill to:**  
FOUNTAIN CITY LOGISTICS

Invoice Date: 06/14/2024  
Invoice #: 119306325  
Terms: NET 30  
Due Date: 07/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		255 W.E.Baab Industrial Rd, Taylorsville, NC 28681, USA - 8449 Congdon Hill Dr, Alburtis, PA 18011, USA			
			1	\$1,740.00	\$1,740.00

TOTAL
\$1,740.00

**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**

TRUCKLOAD RATE CONFIRMATION

Fountain City Logistics  
PO Box 7590  
OVERLAND PARK, KS 66207  
MC# 857399  
Payment Terms: Net 30 / Quick Pay instructions on 2nd page



Carrier Name: ROYAL3 INC  
Ready Date: 6/13/2024  
Date Needed: 6/14/2024  
Service Level: Normal  
Cargo Value: Cargo Value is \$100,000

Load #: 119306325  
Customer PO: LD63787  
Shipper Ref: LD63787  
Trailer Type/Size: 53 ft Van | Dry / Full  
Temperature:

Shipper Information:

Name: Paragon Films - Taylorsville  
Address: 255 W.E Baab Industrial Rd  
TAYLORSVILLE, NC 28681

Contact: Dwight H.  
Phone: (828) 632-5552  
Pickup Appointment 6/13/2024 7:00 AM - 3:30 PM

Shipper Reference Number LD63787 - 2

Pickup Instructions: Driver needs two load locks or straps. No rollup doors. FCFS 0700-1530

Additional Stop Information:

Stop Type: Pick  
Name: Paragon Films - Conover  
Address: 1409 Deborah Herman Road  
CONOVER, NC 28613  
Scheduled: 6/13/2024 1:00 PM - 3:00 PM  
Shipper Reference Number: LD63787-1

Contact:  
Phone:  
Email:  
Appointment: 6/13/2024 1:00 PM - 3:00 PM

Consignee Information:

Name: Uline - PA  
Address: 8449 Congdon Hill Dr  
ALBURTIS, PA 18011

Contact:  
Phone:  
Delivery Appointment 6/14/2024 7:00 AM - 7:00 AM

Customer PO Number 3742322  
Appointment Confirmation Number 11163022  
Delivery Instructions:

Delivery Instructions:

Handling Units	Package Type	Pieces	HAZMAT	List of Items	Total Weight
44	Pallet	1		Stretch Film	43,000

Rate: USD \$1,740.00  
TOTAL: USD \$1,740.00

Carrier must sign and email this Confirmation back to the Broker representative before picking up load. **This Confirmation constitutes an addendum to the BROKER/CARRIER AGREEMENT between Broker and Carrier and is subject to its terms and conditions.** Broker and Carrier ("Party" or "Parties") hereby consent and agree to conduct business using electronic mail ("e-mail"). This consent and agreement encompasses the use of e-mail to transmit and effect the signature of any document, including, without limitation, any addendum, modification, amendment, notice, consent and/or waiver, required by the Broker/Carrier. The Parties agree that the use of e-mail will effect electronic signatures by: (1) identifying and authenticating a Party as the source of the electronic communication; (2) indicating that Party's approval of the information contained in the electronic communication; and (3) producing an electronic document with the same integrity, accuracy, and accessibility as a paper document or handwritten signature. Either Party may elect, with respect to any document, to use a manual/hardcopy signature; provided that such election shall not preclude the other Party from effecting an electronic signature to the same document. In the event CARRIER accepts a shipment without returning a signed (either electronic or manual) Confirmation with respect thereto, CARRIER shall be deemed to have agreed to and accepted all terms, rates and charges of the Confirmation transmitted to CARRIER with respect to such shipment as if signed. Per Broker's Customer's requirements.

Broker's payment terms are net 30 unless otherwise discussed and agreed upon.

For Quick Pay there is a 3% charge off of the linehaul rate for net 3 day payments. Carrier's Invoice must have "Quick Pay" in the subject line of the invoice, and show the corrected amount with the 3% deduction. Quick Pay requests where there is a pending claim will be considered.

Carrier must contact Broker for the following:

Driver must call for dispatch prior to arriving at shipper.

Upon arrival and when loaded at each shipper.

Breakdown or delays in transit.

Unable to handle load in full.

Any issues (in advance) with making on time pickup or delivery.

Upon arrival at each delivery.

After delivery to obtain release number(s).

Must notify of any O/S/D and/or lumpers prior to leaving.

Driver status updates daily by 8:30AM and 4:00PM [Central Time].

Truck-ordered-not-used charges not applicable if Carrier does not call Broker for approval of Carrier's dispatch.

Carrier constitutes its certification and agreement that:

Carrier, its drivers, and its equipment, are and will remain in compliance with all FMCSA/DOT requirements.

Carrier confirms it is their driver and their equipment, **no double-brokering** as mentioned in the agreement.

By its acceptance of this Confirmation, Carrier represents and warrants that its driver/drivers has/have sufficient hours-of-service time available in order to meet Broker's Customer's requirements within the applicable USDOT/FMCSA rules and regulations.

This Confirmation and the Broker-Motor Carrier Agreement constitute the complete agreement of the Parties hereto with respect to the transportation of this load.

Carrier is aware of, and agrees to meet, all equipment and special requirements pertaining to this load. Carrier acknowledges and agrees that Broker is a licensed transportation broker and not a shipper or carrier.

Carrier is responsible to confirm accurate piece counts at time of pickups and deliveries.

Carrier acknowledges its legal responsibility for loss, damage, or delay in delivery of this load.

Carrier is responsible to supply POD within 2 business days (48 hours) of delivery. Carrier's failure to supply POD within 2 business days (48 hours) may result in a \$50 penalty.

Additional Instructions: Clean, food grade trailers required for all shipments. NO TRANSLUCENT TOPS ARE ACCEPTED, AT MINIMUM 2 LOAD LOCKS/STRAPS ARE MANDATORY. Driver must accept telematic tracking via TruckerTools, Macropoint, Fourkites or via text links from the Broker. \$150 minimum fine for no tracking. If the Carrier misses a scheduled delivery appt, it is their responsibility to secure the load until the next available delivery appointment. Customer is not responsible for layover charges in between the new appointment. Any delivery fees or penalties will be the Carrier's responsibility if enforced. \*POD, lumper (if applicable), all paperwork must be submitted within 24 hours so payment can be processed by customer.

Phone: (877) 811-0854 | Fax: (877) 860-5481

Please submit invoices and PODs to [ap@fountaincl.com](mailto:ap@fountaincl.com), or to (877) 860-5481 For any concerns – please email [capacity@fountaincl.com](mailto:capacity@fountaincl.com)

Carrier Signature:


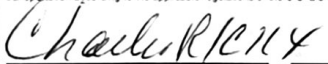
MC#:

*Marisa Serano*

Driver Name:

Driver Phone#:

Please call (877) 811-0854 immediately with any questions, concerns, or problems!  
Send Invoicing to: Fountain City Logistics | PO Box 7590 | OVERLAND PARK, KS 66207

<b>SHIP FROM</b>				<b>Bill Of Lading Number: ROYAL 3</b>					
Name: Paragon Films inc. Address: 1409 Deborah Herman Road City/St/Zip: Conover, NC 28613 SID# 11205 / 11526-1 FOB: <input type="checkbox"/>				  (402) ROYAL 3					
<b>SHIP TO</b>									
Name: ULINE, INC-PA Address: 8449 CONGDON HILL DR City/St/Zip: ALBURTIS, PA 18011 CID# ULINE PA FOB: <input type="checkbox"/>				<b>CARRIER NAME: CUSTOMER ASSIGNED</b> Trailer number: 94938 Seal number(s): 49940983					
<b>THIRD PARTY FREIGHT CHARGES BILL TO:</b>				<b>SCAC: CUAD</b> <b>Pro Number:</b>					
Name: PARAGON FILMS INC Address: 3500 WEST TACOMA FREIGHTINVOICES@PARAGONFILMS.COM City/St/Zip: BROKEN ARROW, OK 74012				<b>Freight Charge Terms: (freight charges are prepaid unless marked otherwise)</b> Prepaid _____ Collect <u>X</u> 3 <sup>rd</sup> Party _____  <input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading					
<b>SPECIAL INSTRUCTIONS:</b>									
<b>CUSTOMER ORDER INFORMATION</b>									
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFORMATION			
LD-63787		25	23915	Y	N				
				Y	N				
				Y	N				
				Y	N				
				Y	N				
<b>GRAND TOTAL</b>		<b>25</b>	<b>23915</b>						
<b>CARRIER INFORMATION</b>									
<b>HANDLING UNIT</b>		<b>PACKAGE</b>		<b>WEIGHT</b>	<b>H.M. (X)</b>	<b>COMMODITY DESCRIPTION</b> <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 340</small>		<b>LTL ONLY</b>	
QTY	TYPE	QTY	TYPE			NMFC #	CLASS		
25	PLT	25	PLT	23915		PLASTIC/RUBR FILM/SHEETING SUB1		156830-01	55
<b>25</b>		<b>25</b>		<b>23915</b>		<b>GRAND TOTAL</b>			
Where the rate is dependent of 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 _____.						<b>COD Amount: \$</b> _____			
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).						Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>			
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			
<b>SHIPPER SIGNATURE / DATE</b> <small>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 U.S. DOT.</small> 				<b>Trailer Loaded:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		<b>Freight Counted:</b> <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		<b>CARRIER SIGNATURE / PICKUP DATE</b> <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</small> _____ Property described above is received in good order, except as noted.	

## Load details

Page 1 of 1  
6/12/2024 8:20 AM

Order ID: SO-30030900



Customer order #: 3742322  
Customer account: 9101  
Terms of delivery: PPD  
Shipped via: FORS  
Requested ship date and time: 6/12/2024 12:00:00 PM

Item number	Product name	Order quantity	Order unit	Packing quantity	Pieces
ULS.2186	0.7MIL,15",1500', E1 ULINE P/L	1.00	sk	1.00	0
ULS.2188	0.8MIL,12",1500', E1 ULINE P/L	3.00	sk	1.00	0
ULS.2433	0.9MIL,18",1500', E1 ULINE P/L	2.00	sk	1.00	0
ULS.9968	19MIC, 44.5CM, 457M, ULINE P/L	1.00	sk	1.00	0
ULS.2187	0.7MIL,18",1500', E1 ULINE P/L	11.00	sk	1.00	0
ULS.3212	0.6MIL,18",2000', E1 ULINE P/L	7.00	sk	1.00	0

Load template ID	Load ID	Stack load on floor	Load tip volume	Max. allowed load weight	Available capacity	Final shipping location	Load arrival date and time
	LD0063787	No	0.00	0.00	-23,909.70	Baydoor	6/11/2024 11:00:00 PM

pfpdtp

LD0063787-2

**STRAIGHT BILL OF LADING  
SHORT FORM-ORIGINAL-NOT NEGOTIABLE**BILL OF LADING NO.  
251565041634888CUSTOMER NO.  
9101SHIP TO P.O.  
3742322SHIP  
FROMParagon Films, Inc.  
255 W. E Baab Industrial Dr.  
Taylorsville, NC 28681  
USASHIP  
TOUline X1 / Alburdis PA  
8449 Congdon Hill Dr  
Alburdis, PA 18011  
USA

SHIP VIA	FREIGHT BILL NO	LOAD NO.	SHIPPING NO.	WAREHOUSE	SEQUENCE NO.	GROUP ID	DATE SHIPPED
CKYN - Fountain City Logistics	LD0063787-2	LD0063697	SHP-0033783	21	1	AUX	06/13/2024

SHIPPED	UNIT	ITEM NUMBER	DESCRIPTION - PLASTIC STREACH FILM	STD GROSS PER UNIT	GROSS WEIGHT
19	SK	ULS.2190	0.8MIL, 18", 1500', E1	1,000.60	19,011.40

CKYN - Fountain City Logistics



LD0063787-2

ARRIVAL

DEPART

DRIVER NO.

Drivers are responsible to notify Paragon of shortages or damages prior to leaving each stop.  
Photos requested of any damages

Total Shipped	19
Total Gross Weight	19,011.40

NOTES

Delivery Appt Required / ulinereceivingWI@uline.com / Information below should be included in the e-mail: Vendor name / Carrier / Trailer / BOL number / Building name and address they are delivering to / PO number / Date and time of requested appointment

**FLSA CERTIFICATION**

We hereby certify that these goods were produced in compliance with all applicable requirements of the Fair Labor Standards Act, as amended, including but not limited to sections 6, 7, 12, and 15, and of regulations and orders of the United States Department of Labor. Among other things, the Fair Labor Standards Act (1) prohibits the use of oppressive child labor in commerce, in the production of goods for commerce, or in any enterprise engaged in commerce or in the production of goods for commerce, and (2) restricts the shipment or delivery of goods produced in an establishment in which oppressive child labor has been employed.


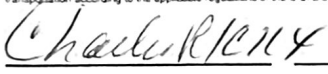
<b>FREIGHT CHARGES</b> <b>Prepaid</b>	<b>ARTC</b> <b>251565041634888</b>
<b>PLASTIC STRETCH FILM</b> NMFC Item 156830 Sub 8 <b>CLASS 55</b>	<b>PARAGON FILMS, INC.</b> 3500 West Tacoma Broken Arrow, OK 74012-1164

Warehouse \_\_\_\_\_ Date \_\_\_\_\_

Driver \_\_\_\_\_ Date \_\_\_\_\_

Consignee \_\_\_\_\_ Date \_\_\_\_\_



Printed: 06/13/2024 14:37:01		<b>BILL OF LADING</b>		Page 1	
SHIP FROM			Bill Of Lading Number: ROYAL 3    (402) ROYAL 3		
Name: Paragon Films inc. Address: 1409 Deborah Herman Road City/St/Zip: Conover, NC 28613 SID#: 11205 / 11526-1 FOB: <input type="checkbox"/>					
SHIP TO			CARRIER NAME: CUSTOMER ASSIGNED Trailer number: 94938 Seal number(s): 49940983  SCAC: CUAD Pro Number: 143 STC 6/14 N. Edwards		
Name: ULINE, INC-PA Address: 8449 CONGDON HILL DR City/St/Zip: ALBURTIS, PA 18011 CID#: ULINE PA FOB: <input type="checkbox"/>					
THIRD PARTY FREIGHT CHARGES BILL TO:			Freight Charge Terms: (freight charges are prepaid unless marked otherwise)  Prepaid _____ Collect <u>X</u> 3 <sup>rd</sup> Party _____  <input type="checkbox"/> (check box) Master Bill of Lading: with attached underlying Bills of Lading		
Name: PARAGON FILMS INC Address: 3500 WEST TACOMA FREIGHTINVOICES@PARAGONFILMS.COM City/St/Zip: BROKEN ARROW, OK 74012					
SPECIAL INSTRUCTIONS:					
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	
LD-63787		25	23915	Y N	
				Y N	
				Y N	
				Y N	
				Y N	
GRAND TOTAL		25	23915		
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)
QTY	TYPE	QTY	TYPE		
25	PLT	25	PLT	23915	
25		25		23915	GRAND TOTAL
<small>Where the rate is dependent of 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 _____.</small>				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.  _____ Shipper Signature	
SHIPPER SIGNATURE / DATE <small>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 U.S. DOT.</small> 		Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/pallets said to contain <input type="checkbox"/> By Driver/Pieces		CARRIER SIGNATURE / PICKUP DATE <small>Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.</small>  _____	
<small>Property described above is received in good order, except as noted.</small>					

LD0063787-2

# STRAIGHT BILL OF LADING SHORT FORM-ORIGINAL-NOT NEGOTIABLE

BILL OF LADING NO. 251565041634888	CUSTOMER NO. 9101
SHIP TO P.O. 3742322	

SHIP FROM

Paragon Films, Inc.  
255 W. E Baab Industrial Dr.  
Taylorsville, NC 28681  
USA

SHIP TO

Uline X1 / Alburdis PA  
8449 Congdon Hill Dr  
Alburdis, PA 18011  
USA

SHIP VIA	FREIGHT BILL NO	LOAD NO	SHIPPING NO	WAREHOUSE	SEQUENCE NO	GROUP ID	DATE SHIPPED
CKYN - Fountain City Logistics	LD0063787-2	LD0063697	SHP-0033783	21	1	AUX	06/13/2024

SHIPPED	UNIT	ITEM NUMBER	DESCRIPTION - PLASTIC STREACH FILM	STD GROSS PER UNIT	GROSS WEIGHT
19	SK	ULS.2190	0.8MIL, 18", 1500', E1	1,000.60	19,011.40

*M Edwards*  
*6/14*

CKYN - Fountain City Logistics



LD0063787-2

ARRIVAL

DEPART

DRIVER NO.

Drivers are responsible to notify Paragon of shortages or damages prior to leaving each stop.  
Photos requested of any damages

Total Shipped	19
Total Gross Weight	19,011.40

Delivery Appt Required / ulinereceivingWI@uline.com / Information below should be included in the e-mail: Vendor name / Carrier / Trailer / BOL number / Building name and address they are delivering to / PO number / Date and time of requested appointment

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FREIGHT CHARGES Prepaid	ARTC 251565041634888
PLASTIC STRETCH FILM NMFC Item 156830 Sub 8 CLASS 55	PARAGON FILMS, INC. 3500 West Tacoma Broken Arrow, OK 74012-1164

Warehouse \_\_\_\_\_ Date \_\_\_\_\_  
Driver \_\_\_\_\_ Date \_\_\_\_\_  
Consignee \_\_\_\_\_ Date \_\_\_\_\_