



Bill to:
SABRE TRANSPORTATIN SYSTEMS

Invoice Date: 06/20/2024
Invoice #: 14730
Terms: NET 30
Due Date: 07/20/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/18/2024		#4 Copper Drive, Wilmington, DE, 19804 - 1509 E Main St, Russellville, AR 72801, USA			
			1	\$2,200.00	\$2,200.00

TOTAL
\$2,200.00

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

Rate & Load Confirmation



Dispatcher:	Regenea W	LOAD #	14730
Phone #:	479-453-1408	Ship Date:	06/18/2024
Fax #:	207-685-4084	Today's Date:	06/19/2024
Email:	Logistics@sabretransport.com		
W/O:			

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
Zigi freight Inc dba Royal3 Inc	630-566-1257		53' Van	\$2,275.00 USD	On Route

Shipper 1	Date: 06/18/2024	Purchase Order #: PO# 0618-A
Shipping Copper Drive	Time: 2:00 PM	Major Intersection:
#4 Copper Drive	Type: TL	Shipping Hours:
Wilmington, DE, 19804	Quantity: 26	Appointment: No
Phone: 479-453-1408	Weight: 30000 lbs	Description: Dry Food - FAK
Contact: Reg	Notes: Per Lisa	
Shipper Notes:	Unhook trailer and do not block the street please.	

Consignee 1	Date: 06/20/2024	Purchase Order #: PO# 0618-A
Receiving 1509 E Main	Time: 10:00 AM	Major Intersection:
1509 E Main Street	Type: TL	Receiving Hours:
Russellville, AR, 72801	Quantity: 26	Appointment: Yes
Phone: 4794531408	Weight: 30000 lbs	Description: Dry Food - FAK
Contact: Reg	Notes: Per Luke	
Consignee Notes:	Loading dock - in the back area go through the gates. Call 4794531408 when you arrive or need help. If you are late need to know 4 hours in advance (only if you are hours behind) will have a late fee.	

Dispatch Notes:

- *Carriers are required to sign all rate confirmations before truck is dispatched.
- *Drivers are responsible for securing freight, ensuring the seal# is listed on the shipper's BOL and the consignee(s) notes the seal was intact upon delivery. Lumper charges must be pre-approved and receipts provided to insure payment.
- *All OS&D exceptions must be reported to SABRE upon delivery before leaving facility.
- *Carrier shall not re-broker, sub-broker, subcontract assign, interline or warehouse any shipments hereunder without prior written consent from Sabre. Failure to comply will result in non-payment of freight charges. In addition, CARRIER assumes liability for any claims, loss, damage, expenses or liability, including reasonable attorney's fees, arising from non-compliance.
- *Detention will not be paid unless Sabre is notified via email, text or phone call 1 hour before detention charges start.
- Late Fees incurred due to driver missing scheduled appointments will *not* be reimbursed.
- Lumpers must be reported to SABRE and a valid receipt provided with billing in order to be reimbursed.
- *Carrier could be charged a late fee for a missed appt. past scheduled appt time, maximum of \$300 per day late.
- *Check in calls are required before or by 12:00PM (EST) every day the load is in transit.
- *All Loads need to be sealed leaving the shipper. Driver is responsible in making sure that the seal number is written on the BOLs at the shipper, and that the receiver signs "Seal Intact" on the BOLs, otherwise carrier will be held responsible for any damaged or missing product.

Carrier Pay: Line Haul: \$2200.00, : \$75.00, **TOTAL: \$2275.00 USD**

Accepted By: _____ **Date:** _____ **Signature:** _____

Driver Name: _____ **Cell #:** _____ **Truck #:** _____ **Trailer #:** _____

THIS MEMORANDUM

is an acknowledgment that a bill of lading has been issued and is not the Original Bill of Lading and a copy.

Shipper's No. 306 0618-A

Carrier

Royal 13

SCAC

Carrier's No.

21

date 6-18-24

from

Consigned to

Hatsprings

State AK

County

Zip

Route

Delivery Address

Delivering Carrier

Vehicle Number

Number of Packages

Description of Articles

Weight (sub. to correction)

Class or Rate

Subject to Section 7 of conditions, if the shipment is to be delivered to the consignee and not to the consignee, the consignee shall not make delivery of the goods without payment of freight and all other bills of lading.

(Signature of Consignee)

FREIGHT CHARGES:

Prepaid ☐

Collect ☐

COD AMT:

\$

TOTAL CHARGES:

Collect On Delivery and remit to \$

COD FEE: \$

Prepaid ☐

\$

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ per

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 1470(c)(1)(A) and (B).

Shipper:

[Signature]

Carrier

X. [Signature]

Per:

Date: 6-18-24

Per:

Date:

1 BLP-A 9 (Rev. 1/07)

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THIS MEMORANDUM

IS AN ACKNOWLEDGMENT THAT A SET OF BOLTS HAS BEEN ISSUED AND IS NOT THE ORIGINAL SET OF BOLTS AND A COPY

SHIPPER'S NO.

CARRIER

Royal 13

SCAC

CARRIER'S NO.

DATE 6-18-24

FROM

CONSIGNEE TO

Hot Springs

State AR

County

Zip

Delivery Address

Route

Delivering Carrier

Number of Packages

Description of Articles

Vehicle Number

Weight (sub. to correction)

Class or Rate

26

Ballets

26,000

Subject to Section 7 of conditions, if the shipper is to be held liable for loss or damage to the contents of the package, the shipper must sign the following statement: "I hereby acknowledge that the contents of the package are in my possession and control and I am responsible for their safe delivery to the consignee without payment of freight and all other charges."

Freight Charges of Consignee

FREIGHT CHARGES:

Prepaid ☐

Collect ☐

COD AMT:

Truck 708
Trailer W97972

Seal 30210017052

Collect On Delivery and remit to \$

COD FEE:

\$

Prepaid ☐

Collect ☐

\$

TOTAL CHARGES:

NOTE: Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).

Shipper:

Carrier:

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Date: 6-18-24

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