

**Bill to:**

OTR TRANSPORTATION INC
344 N OGDEN AVE; FLOOR 4,
Chicago,
IL,
60607

Invoice Date: 06/27/2024

Invoice #: PRO # 21066

Terms: NET 30

Due Date: 07/27/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/26/2024		230 E 15TH STREET, BRYAN TX 77803 - 18th St, Daleville, AL 36322, USA			
			1	\$1,700.00	\$1,700.00

TOTAL
\$1,700.00

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**



OTR FREIGHT SOLUTIONS INC
PO BOX 5960
SCOTTSDALE AZ 85261

PRO # 21066

Rate Confirmation

06/26/24 10:01:15 (EST)

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DASHA VESELY
(623) 562-1115
loads@otrfs.com

ROYAL3 INC
(630) 485-7370 (p) Att: PHILL
(630) 485-6980 (f)
MC # 944686 Truck #
DOT 2828543 Trailer #
Driver JULIO Cell # (941) 250-7606

Size & Type: 48' VAN
Pieces: 9

Description: DESKS AND CHAIR
Weight: 4959

Miles:

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1700.00	MILITARY BASE, NEED 2 FORMS OF IDS AND NO FELONIES
TOTAL RATE	1700.00	

PICK 1

NEUTRAL POSTURE WAREHO
230 E 15TH STREET
BRYAN TX 77803
Hours : 0800-1200

Appointment 06/26/24 @ FCFS
Appt Notes: FCFS
Seal # 6304857370
Ref # 363423

STOP 1

W6YJ USALRCTR FT NOVOS
BLDG 1212 18TH STREET
DOOR 1-4
FORT NOVOSAL AL 36362
Hours : 0800-1530

Appointment 06/27/24 @ 08:00
Appt Notes: FCFS
Seal # 6304857370
Ref # DONNA

BY ACCEPTING THIS LOAD, DRIVER MUST HAVE ENOUGH HOURS IN THE LOG BOOK TO MEET THE DELIVERY DATE & TIME - OS&D CALLS MUST BE MADE FROM ALL DELIVERY LOCATIONS - CARRIER AGREES THAT AN UNAUTHORIZED LATE DELIVERY WILL RESULT IN A 50% RATE REDUCTION PER DAY - CARRIERS ARE NOT PERMITTED TO CHANGE APPOINTMENTS MULTISTOP SHIPMENTS REQ DRIVER TO ENSURE PRODUCT IS LOADED IN CORRECT ORDER - ANY CLAIM WILL BE DEDUCTED FROM SETTLEMENT - NO DOUBLE BROKERING LUMPERS MUST BE PRE-APPROVED & HAVE VALID RECEIPT - OTR FREIGHT SOLUTIONS DOES NOT ISSUE ADVANCES FOR LUMPERS WITHOUT A -\$10 FEE THAT WILL BE DEDUCTED FROM THE PAYMENT - CARRIER IS RESPONSIBLE FOR ALL MISSED & CANCELED APPT FEES CARRIER IS RESPONSIBLE FOR COUNT AND CONDITION OF PRODUCT ALL SHIPMENTS MUST BE RAN DEDICATED UNLESS NOTED ON RATE CONFIRMATION 50% FEE FOR ANY SHIPMENT THAT IS PARTIALED W/O APPROVAL IN WRITING FROM OTRFS CARRIER MUST BE ABLE TO PROVIDE A REEFER DOWNLOAD WHEN REQUESTED IF HAULING A REFRIGERATED LOAD WHEN REQUESTED. FAILURE TO PROVIDE A DOWNLOAD WILL RESULT IN A CLAIM WHERE THE CARRIER IS RESPONSIBLE FOR THE COST OF THE PRODUCT. CARRIER MUST BE ELD COMPLIANT OR PROOF OF EXEMPTION - CHECK CALLS MUST BE MADE DAILY BEFORE 1030 - DRIVER MUST CALL THE NUMBER ON THE TOP OF PAGE FOR DISPATCH - \$100.00 FEE FOR IMPROPER BOL -HOURS ARE MONDAY-FRIDAY 0730-1600 OTRFS CHARGES \$10 PER EFS CODE ISSUED. NO DOUBLE BROKERING. PLEASE SEND INVOICE AND POD TO ACCOUNTING@OTRFS.COM

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 26240626090096502
Sertifi Electronic Signature

Send Carrier Bills to the Address Above

PRO # 21066

must appear on all Invoices

E-Signed : 06/26/2024 09:02 AM CDT

Phil Vukovic

phil@royal3inc.com
IP: 50.76.79.115

Sertifi Electronic Signature
DocID: 20240626090036602

Bill Of Lading - Short Form - Not Negotiable		BOL Number: 21066	
Ship From		Pro # : 21066	
NEUTRAL POSTURE WAREHO 230 E 15TH STREET BRYAN TX 77803 979-778-0502		Ship Date : 06/26/24 Cust Ref # : 363423 PU Ref # : 363423 Del Ref # : DONNA Del Appt : 06/27/24 08:00 Carrier : ROYAL3 INC Carrier Pro# : JULIO	
Ship To		References	
W6YJ USALRCCTR FT NOVOS BLDG 1212 18TH STREET DOOR 1-4 FORT NOVOS EL 36362 334-255-9504/ 334-545-4372		ORDER: 363423 PO: PMN-J-J781S-4P TCN: W31NWR40950001XXX SEAL# 1978019	
Bill To		Delivery Hours: 07:45 to 15:00 Dock 2	
OTR FREIGHT SOLUTIONS INC PO BOX 5960 SCOTTSDALE AZ 85261			
Special Instructions: 9 PALLETS 72X40X62 4,959LBS Donna.l.carter.ctr@army.mil Phone: 334-255-9504/ 334-545-4372		Freight Terms: Prepaid XXX Collect ___ 3rd Party ___	
QTY	PKG	Wgt	Item Description
9	PALLETS	4959	NSN- DESK AND CHAIR SET 7110-01-668-1142

<p>*Mark with an X to designate hazardous materials as defined in title 49 of the code of Federal Regulations.</p> <p>Haz Mat emergency Contact #</p>	
<p>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 not to exceed _____ per _____"</p>	<p>COD Amount: \$ _____</p> <p>Fee Terms: Collect _____, Prepaid _____, Check Acceptable _____</p>
<p>Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 14706(c)(1)(A) and (B)</p>	
<p>For Freight Collect Shipments:</p>	
<p>If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.</p>	<p>Trailer Loaded: _____ Freight Counted: _____</p> <p>By Shipper By Shipper</p> <p>By Driver By Driver</p>
<p>Signature of Consignor: _____</p>	<p>Carrier Signature / Date</p>
<p>Shipper Signature / Date <i>Isly FG 6-26-24</i></p>	<p>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.</p>
<p>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.</p>	
<p>Signature of Shipper: <i>Isly FG</i> Date <i>6-26-24</i></p>	<p>Carrier: _____ Date: _____</p>
<p>Consignee/Receiver Signature / Date</p>	
<p>This is to certify that the above named materials were received in apparent good order (except as noted).</p>	
<p>Signature of Consignee: _____ Date: _____</p>	

W6YJ USALRCTR FT Novosel

Donna.l.carter.ctr@army.mil Phone: 334-255-9504/ 334-545-4372

Delivery Hours: 07:45 to 15:00 Dock 2

***ORDER NUMBER#* 363349**

***TCN:* W31NWR40950001XXX 13 AZZZ**

***PURCHASE ORDER#* PMN-J-J781S-4P**

***ITEM ID:* 7110-01-668-1147**

***ITEM DESC:* ITEM DESC: WORKSTATION SUB-ASSCK LEGS,CHERRY TOP,**

UPHOLSTEREDSEAT AND BACK, BLACKFABRIC

***QTY:* 2-NSN SETS PER PALLET**

***TOTAL NSN SETS :* 18**

***TOTAL PALLETS:* 9-PALLETS**

FIRST PASS

GSA FORM 3186A

ORDER FOR SUPPLIES
OR SERVICES1. GSA
USE
ONLY24096 SENT TO VENDOR
PJSK2. DATE OF ORDER
04/05/20243. ORDER NUMBER
PMN-J-J781S-4P
47QSSC24F6JMP

4. FROM General Services Administration

GSA FAS 3QAD
100 S INDEPENDENCE MALL WEST
PHILADELPHIA PA 19106

IMPORTANT - A copy of this order or the information in item 10 below MUST accompany shipment.

5. INSPECTION/ACCEPTANCE
☒ A. DESTI-
NATION ☒ B. ORIGIN
BY REGION ☒ C. ACCEPT-
ANCE BY (days
after
delivery)
7
6. MODIFICATION
NUMBER
0

7. FOB 8. GBL NUMBER

☒ A. DESTINATION ☐ B. ORIGIN
☐ C. INSIDE DELIVERY ☒ D. TAILGATE
DELIVERY11. TO CONTRACTOR ☐ (Remittance address differs)EYTGAM8GGLJ3 EYTGAM8GGLJ3
NEUTRAL POSTURE, INC
3904 N TEXAS AVE
BRYAN, TX 778030555
US

STORE

Mark
For PROJ PRI RDD
13TRNSP
CNTRL
NO W31NWR40950001XXX TAC A2ZZ
(INCLUDE REQUISITION NUMBER(S) AS SHOWN IN ITEM 12)

12. REQUISITION NO., ITEM/STOCK NO. AND DESCRIPTION

15. COST

13. QUANTITY

14. UNIT

A. UNIT PRICE

B. AMOUNT

35,723.16

1,984.62

EA

18

ITEM ID: 7110016681142

1

REQ NO: W31NWR40950001

ITEM DESC: WORKSTATION SUB-ASSCK LEGS, CHERRY TOP,
UPHOLSTERED SEAT AND BACK, BLACK FABRIC.

SUPP ITEM:

TOTAL WEIGHT: 5850.000 TOTAL CUBE: 32.22

ADVICE CODE:

Do Not Ship Parcel Post.

TO SUBMIT AN ELECTRONIC INVOICE:

1. ESTABLISH A LOGIN GOV ACCOUNT.

2. REGISTER WITH FEDPAY AT FEDPAY.GSA.GOV

16. DISCOUNT TERMS

00.000%-00 00.000%-00 NET-30

17. QUANTITY VARIATION ALLOWED

00/00

18. DISCOUNT

TOTALS

35,723.16

19. AFTER SHIPMENT, SUBMIT INVOICE(S)
ELECTRONICALLY IN ACCORDANCE WITH
TRADING PARTNER AGREEMENT, OR MAIL TOCONDITIONS: YOU MUST ABIDE BY THE TERMS AND CONDITIONS REFERENCED IN THE CONTRACT NUMBER SHOWN
ABOVE IN ITEM 11.GSA ACCOUNTS PAYABLE BRANCH
P.O. BOX 419018
KANSAS CITY MO 6414120. FOR INFORMATION (OTHER THAN PAYMENT
INQUIRIES) CALL:Seth King
215-446-5060

21. SIGNATURE (CONTRACTING/PURCHASING OFFICER)

Seth King

CONTACT KC-FEDPAY.FINANCE@GSA.GOV
WITH PAYMENT INQUIRIES OR TO RECEIVE 10
DAY PAYMENT TERMS

22. DPAS RATING

M

23. MSDS
REQD

N

24. POP
NOT
REQUIRED

25. PAGES

1 of 1

W6YJ USALRCTR FT Novosel

Donna.l.carter.ctr@army.mil Phone: 334-255-9504/ 334-545-4372

Delivery Hours: 07:45 to 15:00 Dock 2

ORDER NUMBER# 363349

TCN: W31NWR40950001XXX 13 AZZZ

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OTR FREIGHT SOLUTIONS INC PO BOX 5960 SCOTTSDALE AZ 85261			
Special Instructions:		Freight Terms:	
9 PALLETS 72X40X62 4,959LBS Donna.l.carter.ctr@army.mil Phone: 334-255-9504/ 334-545-4372		Prepaid XXX Collect ___ 3rd Party ___	
QTY	PKG	Wgt	HM
9	PALLETS	4959	
Item Description		DIMS	Cls
NSN- DESK AND CHAIR SET 7110-01-668-1142			NMFC #

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For Freight Collect Shipments:	
If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement. The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.	Trailer Loaded: _____ By Shipper _____ By Shipper _____ By Driver _____ By Driver _____
Signature of Consignor: _____	Carrier Signature / Date _____
Shipper Signature / Date <i>Isly FG 6-26-24</i>	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.
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.	Carrier: _____ Date: _____
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275,24