



Bill to:
PRIORITY 1 INC
PO BOX 398,
Little Rock,
AR,
72206

Invoice Date: 01/22/2024
Invoice #: 60016671803
Terms: NET 30
Due Date: 02/22/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/19/2024		5385 PATTERSON AVE, Grand Rapids, MI 49512 - 9350 NW 31ST AVE, Miami, FL 33142			
			1	\$4,200.00	\$4,200.00

TOTAL
\$4,200.00

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

Carrier Load Tender

Reference: 60106671803 (BOL)

Carrier: ROYAL3 INC. (944686)

Tender: 01/18/2024 18:08

Contact: Joey (JOEY@ROYAL3INC.COM)

Contact: Marta Zukule

Phone: 3214655667

Phone: (501) 487-3245

Fax:

Email: Marta.Zukule@priority1.com

Main Line: 501-372-3925

Bill To: Priority 1 Inc. (P.O. Box 398) North Little Rock, AR 72115

Equipment: 53' Dry Van ,

Service Type: Full

Stop 1 Pick

Friday, January 19, 2024 13:00 Appointment			Total Weight: 40000.00 lb		Total Quantity: 26	
WASH (5385 PATTERSON AVE) Grand Rapids, MI 49512						
Contact: Phone:						
Packaging: 26 Pieces(s)	Total Weight: 40,000 lbs	Dimensions: " x " x "	Linear Feet: 53	Description: WASHERS		
Carrier Notes:						
Special Instructions:						

Stop 2 Drop

Monday, January 22, 2024 09:00 Appointment		Total Weight:		0 lb	Total Quantity:	
WASH (3950 NW 31ST AVE) Miami, FL 33142						
Contact: Phone:						
Carrier Notes:						
Special Instructions:						

Freight Terms

Charge Details				
Description	Rate		Quantity	Charge
Line Haul	4200.00	Flat Rate	1	\$4,200.00 USD
			Total:	\$4,200.00 USD

Freight Terms: \$4,200.00 USD Third Party (lb)

References

Carrier Instructions

Carrier or driver is required to call Priority1 when loaded and emptied or load is subject to a \$50 penalty. Detention time starts 2 hours after the driver is on site, or if the driver is early any detention will start 2 hours after the scheduled pickup/delivery time stated on the rate confirmation. Driver must notify us of arrival at shipper/receiver. Detention is paid at \$35 per hour after the 2 free hours. If the load/shipment is double brokered, this agreement is void and the carrier will not receive payment.

Thank you for doing business with Priority 1.

DRIVERS NAME: _____

TRUCK #: _____

TRAILER #: _____

DRIVER CELL#: _____

DISPATCHER / PRIORITY 1

Joey Cimbalevic

CARRIER SIGNATURE

All invoices & PODs are to be sent to Priority 1 within 72 hours of delivery. Please email invoice and POD to: tlap@priority1.com. Please provide Priority 1's reference number on your invoice.

BOL NO: 60106671803

BILL OF LADING

Carrier: ROYAL3 INC., 944686

Shipper

Pickup Date: 01/19/2024

WASH

5385 PATTERSON AVE
Grand Rapids, MI 49512

Origin Terminal

Grand Rapids, MI 49512

Phone: P:

Destination Terminal

Miami, FL 33142

Phone: P:

Consignee

WASH

3950 NW 31ST AVE
Miami, FL 33142

3rd Party Bill To

Priority 1 Inc.

P.O. Box 398
North Little Rock, AR 72115
P: +1 (501) 371-9814

Special instructions:

Freight Terms: ☐ Prepaid ☐ Collect ☒ 3rd Party

Units	Type	Weight	Dimensions	HM	Item Description
26	Pieces	40,000 lbs			WASHERS
26		40,000 lbs			Grand Totals

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 ____."

Remit COD to:

Collect _____ Prepaid _____ Customer check acceptable _____ COD Amount: \$

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC 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.

Trailer Loaded:

____ by Shipper
____ by Driver

Freight Counted:

____ by Shipper
____ by Driver

The Carrier shall not make delivery of this shipment without payment of and all other lawful charges.

Shipper: _____

Shipper Signature / Date 1/19/24

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 Department of Transportation.

Shipper: *Brian Bul*

Time In: _____ Time Out: _____

Consignee 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 Department of Transportation.

Consignee: *John Smith* 1/22/24

Time In: 9:06 Time Out: 9:43

Carrier Signature / Date

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in vehicle. Property described above is received in good order, except as noted.

Carrier: _____