

**Bill to:**

Grandrock Freight CO.

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,
,

Invoice Date: 01/31/2024

Invoice #: PRO # 14329

Terms: NET 30

Due Date: 03/02/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/26/2024		456 Nordhoff Pl, Englewood NJ 07631 - 5600 Carmichael Rd, Montgomery AL 36117			
			1	\$2,400.00	\$2,400.00

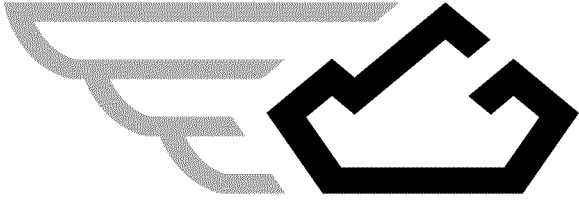
TOTAL
\$2,400.00

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**



GRANDROCK FREIGHT CO.
611 COMMERCE ST
STE 2609
NASHVILLE TN 37203

PRO # 14329

Rate Confirmation

01/29/24 10:58:28 (EST)

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CHANCE YOUNG
(615) 985-8823
(334) 399-0477 (c) (334) 399-0477 (c)
chance@grandrock-fc.com

C
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ROYAL3 INC
(630) 566-1434 (p)
(630) 485-6980 (f)
MC # 944686 Truck #
DOT 2828543 Trailer #
Driver Cell #

Size & Type: 12' BOX TRUCK
Pieces: 9

Description: TILE FLOORING
Weight: 25000

Miles: 1012

CHARGES		DISPATCH NOTES
LINE HAUL RATE	2400.00	9 PALLETS///48X48X40 2800 LBS PER PALLET
TOTAL RATE	2400.00	

PICK 1

SKY FLOORING
456 NORDHOFF PL
ENGLEWOOD NJ 07631
Phone/Contact: LAYLA

Appointment 01/26/24 @ 08:00
Appt Notes: FCFS 0800-1230
Ref # 1975

STOP 1

ARDEN POINTE
5600 CARMICHAEL RD
MONTGOMERY AL 36117

Appointment 01/29/24
Appt Notes: FCFS 0800-1500

MACROPOINT TRACKING is MANDATORY

2% Fee if macropoint is dropped at any point during the load

PoDs are required same day of delivery

Send Invoices to accounting@grandrock-fc.com

Carrier Signature Joey Cimbaljevic

Date 1 / 29 / 2024
M D

Send Carrier Bills to the Address Above

PRO # 14329 must appear on all Invoices

Bill Of Lading - Short Form - Not Negotiable		BOL Number: 14329	
Ship From		Pro # : 14329	
SKY FLOORING 456 NORDHOFF PL ENGLEWOOD NJ 07631 LAYLA		Ship Date : 01/26/24 Cust Ref # : 1975 PU Ref # : 1975 Del Ref # : Del Appt : 01/29/24 Carrier : Carrier Pro# :	
Ship To		References	
ARDEN POINTE 5600 CARMICHAEL RD MONTGOMERY AL 36117			
Bill To			
GRANDROCK FC 611 COMMERCE STREET NASHVILLE TN 37203			
Special Instructions:		Freight Terms: Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party XXX	
QTY	PKG	Wgt	HM
9		25000	
Item Description		DIMS	Cls
			NMFC #

<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 <input type="checkbox"/> Prepaid <input type="checkbox"/> Check Acceptable <input type="checkbox"/></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: <u>[Signature]</u></p>	<p>Carrier Signature / Date</p>
<p>Shipper Signature / Date</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>Carrier: <u>[Signature]</u> Date: _____</p>
<p>Signature of Shipper: <u>[Signature]</u> 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: <u>[Signature]</u> Date: 1/31</p>	