Max Trains Logistics, LLC PO Box 11537 Jackson, TN 38308 Quinn Anderson Phone: (731) 222-5052 Page 1 Fax: (731) 222-5115 Email: qanderson@maxtrans.us

Carrier:	Roya	3 Inc						Contact:	ANJA DJURIC	
	Chicago 08/21/24			IL 6	0638	Ph		Phone:	(630) 485-7370	
Date:							Fax:		(630) 485-6980	
Order	Orde Mile		51060 477.0	08				Commodity: Weight:	Aluminum Coils	
	Order Type: VAN BOL:		VAN				Trailer: Reference:	Van (DAT)		
	PU 1	Nam	e:	Granges	Americas	s Inc.		Date:	08/22/24 0700	-
		Addr	ess:	400 Bill B				_	08/22/24 1900	
				HUNTING		ΤN	38344	Contact:		
		Phon	ie:	(731) 222	-5079			Driver Lo	bad: No driver loading or ur	nload
	SO 2	Nam	e:	Handi				Date:	08/23/24 0700	-
		Addr	ess:	915 S Ch	addick				08/23/24 1530	
				WHEELIN	١G	IL	60090	Contact:	na	
		Phon	ne:	(847) 520	-1000			Driver Lo	oad: No driver loading or ur	nload
Paymen	t (Carrier	Freigh	t Pay:	\$1.	,100.0	0			
	Total Carrier Pay:					100.0	-	additonal charges ca	n be invoiced without written appr	roval)

*** Proof of Delivery MUST be emailed or faxed to the broker within 24 hours of delivery.***

Instructions

Granges Americas Inc. - GRANFRTN: Trailers must be free of debris, damage, or odor.

Granges Americas Inc. - GRANFRTN: Please pull into the staging area and follow instructions on the sign. Notify broker if waiting over 2 hours.

Granges Americas Inc. - No dropping trailers in an unsecured location.

Asta Mijad

Please Sign:

Driver Name: Driver Cell: Driver Email: Tractor #: Trailer #: Comment / ETA:

Mail invoice & required paperwork to: PO Box 11537 Jackson, TN 38308 Carrier Settlements: (731) 222-5073 payables @maxtrans.us For Quick Pay: guickpay@maxtrans.us





BILL TO: MAX TRANS LOGISTICS LLC 219 US HIGHWAY 45 W HUMBOLDT, TN 38343 INVOICE DATE: 08/23/2024 INVOICE #: 5106008 TERMS: NET 30 DUE DATE: 09/23/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/22/2024		400 Bill Brooks Drive, Huntingdon, TN 38344 - 915 S Chaddick, Wheeling, IL 60090			
		Freight Income	1	\$1,100.00	\$1,100.00

TOTAL	
\$1,100.00	

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

EIVED, subject t	ILL OF LADING - SHORT to the classifications and tariffs in e	FROM - OniGinate in	his Bill of Lading,		CARRIER NO. SHIPPER'S NO.	28097
M: G	GRÄNGES					
superty described b	pelow, in apparent good order, except as noter	d (contents and condition of contents of pr	ackages unknown), marked, consign the contract), agrees to carry to be	ed, and destined as indicated b usual place of delivery at said	alow, which said carrier (the word a demination, if on its route, otherwise demination, if on its route, otherwise demination of any time of the same state of the	array being
other carrier on the or any of said pro- on the date hereof	below in apparent good order, except as noted the contract as meaning any person or corporat as make to each destination. It is mutually appr copych, that every service to be performed for if this as rail or a nail-weater shipment, or (2) in the as that he is is milliar with all the terms and terms and conditions are hereby agreed to by the sh	ed, as to each carrier of all or any or reunder shall be subject to all the terms e applicable motor carrier classification or tar e applicable motor carrier classification or tar	said property over all or any po- and conditions of the Uniform Do iff if this is a motor carrier shipment.	on of said roles to believing similarity for the said roles of the said of the	and as to each purp Freight Care at forth (1) in Uniform Freight Care tariff which governs the transport	states of the
pper hereby certifies ment, and the said terr IUTING	i that he is larmar hereby agreed to by the sh	ipper and accepted for himself and his assign	SALES ORD	DER NO.		
	TRANS LOGISTICS					
			SIGNED TO ESTINATION: HFA CO	RPORATION		
				OUTH CHADDIC	CK	
			WHEELT	ING, IL,6009	0-6035	
				MO, 10,0	PAGE 1	OF 1
	BUYER'S ORDER NUMBER					DATE SHIPPED
OMP. PART C	CARRIER	CAR INITIALS AND NO.	SEALS			
	MXNG D OF DESCRIPTION OF ART	TICLES, SPECIAL MARKS AND EXCE		EIGHT RATE PER CN		
D. PKGS PACK	KAGE	M,NOI,not paper	(SUBJECT TO	O CORRECTION) 100 LBS. CC	If charges are to be prepaid here, "To be Prepaid." ORIGIN - P	aid, write or stamp
					Union	NB1111
REQUEST	ED DELIVERY DATE	4:08/23/2024	LD # 49	APP # 236		
	DECELUTING NO				Received \$	
	RECEIVING NOT					
PLEASE	REQUEST AND DELI NAPERVILLE: F	IVER BY APPOINT HANDISOUTHRECV@		OM	Agent or Cashi	ler
	WHEELING: REC	CEIVING2@HANDI-	-FOIL.COM		(The signature here acknow amount prepaid.)	vledges only the
A DOCK			STATES OF STREET	TAIN	This certifies that the descr weight of shipment shown here	ription and gross
the second se		ORDER TO UNLOA	D		subject to verification by Weighing & Inspection Bureau	y the Southern au.
	TOTALS:	abio River			The fibre boxes used for conform to the specification the box maker's certificate t	or this shipment ons set forth on thereon, and all
18	T	RECHIVE	42,1	74 LB	other requirements of the go Classification. Shipper's imprint in lieu of	governing Freight of stamp; not a
					part of bill of lading approved b Commerce Commission.	by the Interstate
		AUG 23 2024	IZ I	35	PLANT NUME	BER
		Handi-Bouth Witestime II	DH	VC.	MANIFEST NO:	
					AGENT REP	
Gränger	Americas, Inc., Shipper	Granges Amer	The Inc		DATE	
THE OWNER WHEN THE PARTY NAMED	American	I DOT HERE	A DESCRIPTION OF TAXABLE PARTY.		DATE	