

Reliant Transportation, Inc. PO Box 67009 Lincoln, NE 68506-7009				***	Load C	onfirmation	***			Page 1 1304497
Phone: 833-857-3803		Ema	Email tickets to: Tickets@Reliant-Transportation.com							
Carrier: Date:	ROYAL3 INC CHICAGO 08/30/2024		IL	IL 60638			Contact: JOEY Phone: 321-465-5667 Fax: Contact:			
Order	Orde Mile Pick Up Check Ca	s: 408 #: 212	.0	Trailer:	Van (DAT)	Commo Weight: Unload		FEED INGREDIENT 45000.0 7353	
	PU 1 Name: Address: Phone:		FORD WAREHOUSE 11940 CENTENNIAL RD LA VISTA NE 68128 402-592-5455 x220			Date & T Contact: Drvr Ld/L		08/30/2024 1530 08/30/2024 1530 MAIN No Touch		
	SO 2	Name: Address: Phone:	ROGE	NEW HC		72758	Date & T Contact: Drvr Ld/L		08/31/2024 0800 08/31/2024 1000 RECEIVING No Touch	-
Payment	Carrier Freight Pay: Total Carrier Pay:				\$900.00 \$900.00					
Instruction Special in	ons Istructions	here								

Joey Cimbaljevic Please Sign and Email back to:

Agreement

JBurke@Reliant-Transportation.com

Jim Burke



Whereas Carrier has agreed to: haul said load, to provide trucks and trailer that are in good, clean, sanitary condition, free of contaminates, and suitable for hauling assigned product.

Carrier is responsible to load and deliver as scheduled. Carrier is to immediately report any delays, weight discrepancies or other problems, All claims or shortages are the responsibility of the carrier.

The carrier named herein is responsible for communicating any and all information ensuring load is protected and is delivered in a timely manner. Rates on this sheet are inclusive of all fuel surcharges.

Fuel Surcharge rates are based upon weekly U.S. National Averages and are subject to change without prior notice.





BILL TO: RELIANT TRANSPORTATION INC 4411 SOUTH 86TH ST SUITE 101 LINCOLN, NE 68526 INVOICE DATE: 08/31/2024 INVOICE #: 1304497 TERMS: NET 30 DUE DATE: 10/01/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/30/2024		11940 CENTENNIAL RD, LA VISTA NE 68128 - 101 W NEW HOPE RD, ROGERS AR 72758			
		Freight Income	1	\$900.00	\$900.00

TOTAL

\$900.00

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

	STRAIGHT BIL ORIGINAL - NOT Based on the Uniform Straight Bill of		Shipper # Cust Order Terms Date	0080363008 COLLECT 2024-08-30
Pickup RAC o FORD STORAGI 940 CENTENNIAT AVISTA, NE 681:	WHSE #04	DEP INC 101 W. NEW HOPE RD ROGERS, AR 72758		
00-397-8581			Vehicle Number	Weight
14	1001015605 OPTI.FORM PD 4 IB NMFC CODE - 46400-02 NMFC CLASS - 70 CORBION# 179273805 PO# 7353 1001011700 VERDAD N6-30 CASES SECURE ORDERS OF PD4 ITH 2X4S	CMA- 1648 SEAL# 74262	:59	42434 Lbs 42434 Lbs
14	Total Units Loaded by:	SEAL intact Rodwey, Haye Rodwey, Haye 8/31/24		

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, the property described above, received in good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown below. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state regulatory agency, or maintained by the carrier. Rate individually determined and NOT subject to filed tariffs. No limitation of carrier liability applies to this shipment. Shipper hereby certifies that his is familiar with all the terms and conditions of the bill off lading and the said terms are hereby agreed to by the shipper and as he signs. This is to certify that the above-named materials are property classified, described, packaged, marked, and labeled, and are in proper condition for the transportation according to the applicable regulations of the Department of Transportation.

SHIPPER Signature BH		CARRIER Signature		
PRINT NAME	Date 8130 24	PRINT NAME		Date
BHUDDLE Cust 002560	PkUp FORD11940	Delv DEP101	2024-08-30	8:33:46

FLAVUREU

NO ARTIFICIAL COLORS OR FLAVORS