

Load Confirmation

0537497

Carrier: Royal3 INC
CHICAGO IL 60638
Date: 08/30/2024

Contact: Dispatch
Phone: 630-485-7370
Fax: 630-485-6980

Order
Order: 0537497
Miles: 1170.0
Temp:

Commodity: Labels
Weight: 35000.0
Trailer: Van or Reefer (DAT)

PU 1 Name: Fort Dearborn - Fort Worth
Address: 4601 Pylon Street
FORT WORTH TX 76106

Date: **08/31/2024 1200**
Contact:
Driver Load: No driver loading or unload

SO 2 Name: warehouse
Address: MAXTON NC 28364

Date: **09/03/2024 1000**
Contact:
Driver Load: No driver loading or unload

Payment
Carrier Freight Pay: \$2,000.00
Macropoint/Online Tracking 100.00
Total Carrier Pay: \$2,100.00

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.

Fort Dearborn - Fort Worth - FORTFOTX: ****Driver must always stay attached to trailer****Trailer can not be dropped without prior LINQ APPROVAL ****

DRIVER MUST SIGN INTO MARCO PONTDRIVER MUST SIGN INTO MACRO**

MUST HAVE IN AND OUT TIMES ON BOLS FOR DETENTION TO BE REVIEWED**

The trailer must be sealed at all times. Only the receiver is authorized to cut the seal. Once it's been removed, the receiver MUST document that the seal was intact on the Bill of Lading/ Proof of delivery. Driver is responsible for making sure that verbiage "Seal was Intact" is written on the Bill of Lading/ Proof of Delivery prior to departing the receiver. Failure to do so, may result in a cargo claim.

BILL TO:
DFW LinQ Transport Inc
2004 L Don Dodson Dr
Bedford, TX 76021
972-522-1500

Attention: **Trenton Payne**
972-522-1500



INVOICE

BILL TO:

DFH TRANSPORTATION SERVICES LLC
3330 N. BEACH ST.
HALTOM CITY, TX 76111

INVOICE DATE: 09/03/2024**INVOICE #:** 0537497**TERMS:** NET 30**DUE DATE:** 10/03/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/31/2024		4601 Pylon Street, FORT WORTH, TX 76106 - MAXTON, NC 28364			
		Freight Income	1	\$2,100.00	\$2,100.00

TOTAL

\$2,100.00

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

Printed Date: 08/31/2024

BILL OF LADING - ME

Page 1

SHIP FROM

Shipment Number: 889881633

Name: MULTI-COLOR CORPORATION - FORT WORTH
Address: 4601 PYLON STREET

City/State/Zip: FORT WORTH, TX 76104

9/03/2024

G1

ENTRY / EXIT PERMIT
CAMPBELL SOUP SUPPLY CO., LLC
CSSC - Maxton, NC

GATE - IN INFORMATION

TIME: 8:24:23 GUARD ID: 0C223675
DRIVER: ELIJAH
CARRIER: ROYAL
SEAL: 999999 WEIGHT: 62160
REMARKS:

CONTAINER RECEIVING

GATE - OUT GUARD ID:
AUTHORIZED BY: *Terry Locklear*
OVER/UNDER WGT. AUTH.:
SANITATION INSPECTION COMPLETED:

02980150

SHUTTLE#
TO DOCK:

FRM DOCK:

DOCK#:

#PALETS:

BOL#:

4506528039

E&E#:

02980150

TRLR#:

736

DROP - LOT

PAD#

CARRIER INFORMATION

HANDLING		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
15.0	PLT	1.0	CTN	29836.0 LB		Printed Labels	153500-2	55
15.0		1.0		29836.0 LB		GRAND TOTAL		

CUSTOMER ORDER INFORMATION

CUSTOMER PO #	CUSTOMER ORDER #	# PKGS	WEIGHT	PALLET / SLIP	Additional Shipper Info
4506528039		1.0	29836.0 LB		Printed Labels
GRAND TOTAL		1.0	29836.0 LB		

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 _____

COD Amount: \$

Fee Terms: Collect ☐ Prepaid ☐Customer Check Acceptable ☐

NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. § 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.

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

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named contents are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Trailer Loaded:

☐ By Shipper
☐ By Driver

Freight Counted:

☐ By Shipper
☐ By Driver/Pallets
☐ By Driver/Pieces

CARRIER SIGNATURE / DATE

Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidelines or equivalent documentation in the vehicle.

08/31/2024

Terry Locklear
9-3-24

SHIP FROM

Name: MULTI-COLOR CORPORATION - FORT WORTH
Address: 4601 PYLON STREET

City/State/Zip: FORT WORTH, TX 76106

Contact: Unknown

Phone: 555-555-1212

Shipment Number: 889881633



CARRIER NAME: LINQ TRANSPORT

Trailer Number:

Seal Number(s):

SHIP TO

Name: CAMPBELL SOUP SUPPLY CO., LLC (H)

Address: 2120 N C HWY. 71 NORTH

City/State/Zip: MAXTON, NC 28364

Delivery Date: 09/03/2024

Contact: Unknown

Phone: 555-555-1212

SCAC: LQAB

Pro Number: seal# 0022400

Freight Charge Terms:

(Freight charges are prepaid unless marked otherwise)

Prepaid: Prepaid Add: X Collect: 3rd Party:

BILL TO

Name: Multicolor Corporation

Address: c/o Uber Freight US LLC

PO Box 425

City/State/Zip: Lowell, AR 72745

Master Bill of Lading: with attached underlying Bills of Lading

DO NOT BREAK SHIPPER SEAL/NO TRANS-LOADING: CARGO CLAIM MAY RESULT

Special Instructions: Must deliver 9/3, PO# 4506528039

Shipper Notes:

References:

Consignee Notes:

Special Services:

CARRIER INFORMATION

HANDLING		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
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The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

Trailer Loaded:

☐ By Shipper☐ By Driver

Freight Counted:

☐ By Shipper☐ By Driver/Pallets☐ By Driver/Pieces

CARRIER SIGNATURE / DATE

Carrier acknowledges receipt of packages and related documents. Carrier will file emergency response information with applicable state or local law enforcement or transportation emergency response guidelines or equivalent documentation in the event of an emergency.

08/31/2024

Terry Lockard

9-3-24