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LOAD CONFIRMATION

24/7 DRIVER SUPPORT (855) 786-3246

Report All Issues, Delays and Additional Charges Immediately to 24/7 Driver Support
Electronic Tracking Must Be Provided Throughout Transit

Call the Driver Support line and ask for Load Number 59017356

ORDER 59017356

CARRIER	ROYAL3 INC	***ORDER NUMBER(S) MUST APPEAR ON ALL BILLING***
Echo Rep	Todd Durham	MODE: TL
Rep Phone	224-251-6510	
Rep Email	Todd.Durham@echo.com	TRAILER TYPE: Van 53' TRAILER #:
Distance	1064.42 Miles	Equipment Notes:
Note: FOOD GRADE 10 YRS OR NEWER TRAILER / LOAD MUST BE ELECTRONICALLY TRACKED---		

Pursuant to our verbal agreement of 8/23/2024 between Echo Global Logistics, hereafter referred to as ECHO, and ROYAL3 INC, MC944686/DOT2828543, hereafter referred to as CARRIER. Both parties agree that Broker's load number 59017356, moving on 08/24/2024 from FORT SMITH, AR to LATROBE, PA (number of stops shown below) will move at the following rate:

Service for Load # 59017356	Amount	Rate	Extended
Line Haul	1.00	\$2,100.00	\$2,100.00
		Total	\$2,100.00

PAY SUMMARY	
Line Haul	\$2,100.00
Total:	\$2,100.00

BY MEANS OF EITHER SIGNING THIS LOAD CONFIRMATION OR ITS PROVISION OF SERVICE, CARRIER ACKNOWLEDGES AND AGREES THAT IT WILL TRANSPORT THE LOAD SUBJECT TO THE TERMS AND CONDITIONS OF ITS CARRIER AGREEMENT (THE "AGREEMENT") WITH ECHO AND THAT IT AGREES TO COMPLY WITH THE TERMS OF THIS LOAD CONFIRMATION. CARRIER AGREES THAT THE SHIPPER AND CONSIGNEE ARE EACH A THIRD-PARTY BENEFICIARY OF THE AGREEMENT AND THE TERMS OF THIS LOAD CONFIRMATION.

1. Echo tenders this Load as a broker only and Carrier accepts this Load as the motor carrier responsible for its transportation. This Load Confirmation governs the rate for this Load as of the date specified and hereby amends and is incorporated by reference and becomes part of the Agreement. Carrier represents and warrants that it agrees to the rate herein, said mutually agreed upon rates are reasonable and compensatory, that the freight would not have been tendered to Carrier at higher rates, and that no shipments handled under such rates will subsequently be subject to a later claim of undercharges.
2. All travel directions provided by Echo are for informational purposes only. It is Carrier's sole responsibility to lawfully and safely operate all vehicles and their contents over any road, highway, bridge and/or route in strict compliance with all applicable laws, rules and regulations. Carrier shall provide electronic tracking throughout transit of the Load. Carrier must immediately advise Echo if any delivery schedules, specifications, instructions, or requirements cannot be legally accomplished or if the avoidance of any fines, penalties or deductions would require or result in the violation of any laws or regulations. Carrier agrees to be CARB compliant when traveling to, from or through California and shall indemnify Echo and its customers from any loss or damage resulting from Carrier's failure to so comply.
3. Only the Carrier identified in this Load Confirmation is authorized to transport this shipment. Compensation may be withheld if this Load is double-brokered, moved by rail, consolidated with any other freight or if the agreed terms hereunder are not satisfied. Carrier agrees, and authorizes its factoring company, if any, to reimburse Echo for all amounts paid on this Load if it is transported by any carrier other than the Carrier identified herein. Carrier waives

all rights to payment from the shipper and/or consignee.

4. Carrier hereby confirms current and valid insurance coverage without exclusions in conflict with this Load, in amounts no less than the following: one million dollars (\$1,000,000) auto liability coverage, one million dollars (\$1,000,000) general liability coverage, \$100,000.00 cargo coverage, and workers compensation as required by law. If carrier's insurance policy contains a schedule of covered vehicles, Carrier will only transport this shipment using a vehicle that is listed as a scheduled vehicle on their insurance policy. Carrier further confirms that its cargo insurance covers the Item(s) listed below without exclusion.
5. Carrier confirms that the driver assigned to this load is licensed, qualified and has available hours of service sufficient to pick up, transport and deliver this Load as required hereunder. Driver is responsible for an accurate count of crates, pallets/skids, and pieces.
6. Trailer seals must be applied, with the seal number noted on the bill of lading, prior to departure from the shipper. A seal may not be broken with prior written approval from Echo management. Failure to deliver at the designated consignee with the proper seal intact will result in a claim for full value of the Load.

Pickup	
GPI SPARTAN FORT SMITH	PKU# 3791284, 3791284
6815 JENNY LIND RD	Earliest: 08/24/2024 13:00
FORT SMITH AR 72908	Latest: 08/24/2024 13:00
0000000000	Weight: 41860
: 0	Pallets: 26
Item: Paper Packaging Material	

Pickup INSTRUCTIONS	
Shipping Contact speplinski@citybrewery.com / 608-785-4447 DELIVERYDATE / REFERENCE DELIVERY PO / MUST SCHEDULE APPT TIME IF NO PRE-SET APPT / RECEI VING HOURS MON-FRI 24 HOURS NO APPT NE 1014.0 M-F 07 00-23 00Sat, Sun 07 00-17 00LOAD LOCKS OR STRAPS REQUIRED Please call or email shipping for an appointment Pickup contact for rolls - whse.FtSmith @graphicpkg.com Pickup contact for Finished Goods -joshua.brigrance@graphicpkg.com	

Drop	
CITY BREWING CO LLC	DELV# C10145, 3791284
100 33RD ST	Earliest: 08/26/2024 11:00
LATROBE PA 15650	Latest: 08/26/2024 11:00
0000000000	Weight: 41860
: 0	Pallets: 26
Item: Paper Packaging Material	

Drop INSTRUCTIONS	
Shipping Contact speplinski@citybrewery.com / 608-785-4447 DELIVERYDATE / REFERENCE DELIVERY PO / MUST SCHEDULE APPT TIME IF NO PRE-SET APPT / RECEI VING HOURS MON-FRI 24 HOURS NO APPT NE 1014.0	

INVOICE PAYMENT REQUIREMENTS:

- SIGNED BOL / SIGNED DELIVERY RECEIPT / SIGNED RATE CONFIRMATION SHEET.
- LOAD / UNLOAD / LUMPER RECEIPTS MUST ACCOMPANY INVOICING OR THEY WILL NOT BE PAID.
- MUST REFERENCE LOAD # ON ALL CORRESPONDENCES.
- ALL ACCESSORIAL CHARGES MUST BE PRE-APPROVED & BILLED WITH RECEIPT & POD.

SUBMIT INVOICE TO:

EMAIL
APTRUCKLOAD@ECHO.COM
PHONE: (312) 824-6483



INSTAPAY
INSTAPAY@ECHO.COM
InstaPay Payment - 1.9% Fee*
IP Fax: (312) 784-2380
*Subject to terms and conditions as outlined in the Echo carrier packet

SIGNATURE: Kelly Ivanovic

DATE: _____



INVOICE

BILL TO:

ECHO GLOBAL LOGISTICS INC
600 WEST CHICAGO AVENUE, SUITE 830
CHICAGO, IL 60610

INVOICE DATE: 09/05/2024**INVOICE #:** 59017356**TERMS:** NET 30**DUE DATE:** 10/05/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
08/24/2024		6815 Jenny Lind Rd, Fort Smith, AR 72908, USA - 100 33rd St, Latrobe, PA 15650, USA			
		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**



Straight Bill of Lading

BOL # S0338858

Carrier Command Transportation Pro Number

Ship Date 8/24/2024

Received, Subject to the classification and lawfully filed tariffs in effect on the date of issue of this original Bill of Lading

Client Order Information

Qty	Unit	HM Item	Description BATCH NO.	NMFC Code Inv Status	Class Weight	Grs Wgt
7,000	EACH		0428061200			1,610.00 LBS
7,000	EACH		0428061221			1,610.00 LBS
7,000	EACH		0428061231			1,610.00 LBS
7,000	EACH		0428061253			1,610.00 LBS
7,000	EACH		0428061258			1,610.00 LBS

Carrier Freight Information

Qty	Unit	HM Description	NMFC Code	Class	Grs Wgt
182,000	EACH	NMFC Code			41,860 LB

182,000 Total Pieces Pallet In: _____ Pallet Out: _____ Pallet Wgt: _____ Total Grs Wgt 41,860

IN

OUT

City Brewery Latrobe

RECEIVED SUBJECT TO BREWERY
COUNT AND INSPECTION.

RECEIVED B. Bateman

DATE RECEIVED 8-26-24

AUG 26 '24 AMB:02

Received in Good Order: Driver's Signature _____

Date: _____

ATTN: TRUCKER Your Signature will acknowledge receipt of the correct description, (size and grade) AND total amount of pieces. THIS WAREHOUSE will NOT be responsible if shipment of incorrect product is made.

Subject to Section 7 of conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement.

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

* If the shipment moves between two ports by carrier by water, the law requires that the bill of lading shall state whether it is "Carrier or Shippers weight."

NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property.

The agreed or declared value of the property is hereby stated by the shipper to be not exceeding \$ _____

The description and weight indicated on the Bill of Lading are correct, subject to verification by governing TCFB and/or WWIB Agreements.

+ The fiber boxes used for this shipment conform to the specifications set forth in the box maker's certificate thereon, and all other requirements of Rule 41 of Consolidated Freight Classification or applicable rules in NMFC

+ Shipper's imprint in lieu of stamp, not a part of Bill of Lading approved by the Interstate Commerce Commission.

Charges are to be prepaid only if stated here.

Received \$ _____ to apply in prepayment of the charges on the property described hereon.

Per _____

(Acknowledging prepaid amt.)

(Signature of Consignor) _____

per _____

GRAPHIC PACKAGING INC.
1500 RIVEREDGE PARKWAY NW,
7TH FLOOR
ATLANTA, GA 30328

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.

Permanent Post-Office Address of Shippers

Shipper, Per _____

Agent _____

Per _____