All Pro Freight Systems Inc.

1006 Crocker Road, Westlake OH 44145 PH# 800-837-5779 FAX # 440-934-2255 LOAD AND RATE CONFIRMATION

CARRIER: CARRIER CODE:	ROYAL3, INC. ROYCHI		ORDER# 8522 *MUST APPEAR	15 R ON ALL BILLING*	
PHONE# FAX#	(630)485-7370 (630)485-6980	DAIH. DC922947024	ATTN: Bill	LETS. O	
LOAD DATE: 09/12/24 DEL DATE: 09/13/24		P/U#: BG833847024 -: -	WE	LETS: 0 IGHT: 25000 JIP TYPE: 53 Van Only	
Load At: OHIO LOGISTICS / PR BUSINESS ENTERPRI 2319 WOODSTREAM	SES	TIME: 9/12/202 9/12/202 EST PCS: 0	4 11:00:00 AM 4 11:00:00 AM	**DRIVER MUST CALL ALLPRO FOR DISPATCH**	
BOWLING GREEN,OH/ 43402		EST VEIGHT: COMMODITY:		DISTATCH	
Deliver To: RGH ENTERPRISES 1360 MADELINE LANE SUITE 500 - ELGIN,IL/ 60120		TIME: 9/13/2024 7:00:00 AM 9/13/2024 8:00:00 AM EST PCS: 0 EST WEIGHT: 25000 COMMODITY: UNKNOWN		**DRIVER MUST CALL ALLPRO FOR DISPATCH**	
Stop Totals: Total PCS:0		Total Weight:25	000		
<i>Please Note: -</i> <u>Pay Summary:</u> FLAT RATE:	\$ 700.00		_	TOTAL PAY	
FUEL SURCHARGE: OTHER	\$.00 \$.00			<u>\$ 700.00</u>	
CARRIER SIGNATU	RE:	Bill Ci	arson	DATE: 9/11/2024	

Please sign and send back attention: <u>-</u>. All accessorial charges must be pre-approved and billed with receipt and POD. In order for additional loading or unloading charges to be paid, shipper or consignee must notate them on bill of lading. Any problems, reschedules or other issues must be handled through our office. Driver/dispatchers are **NOT** to call shippers/receivers. **POD's not submitted within 24 hours will be subject to a 5% rate deduction.**

PAYMENT: REQUIRES A FULL LEGIBLE COPY OF THE COMPLETELY SIGNED ORIGINAL BOL / DELIVERY RECEIPT AND RATE CONFIRMATION. ANY LUMPER RECEIPTS MUST BE SUBMITTED PRIOR TO THE DRIVER'S DEPARTURE OR THEY WILL NOT BE REIMBURSED. PLEASE EMAIL ALL DOCUMENTS TO: <u>BILLING@ALLPROFREIGHT.COM</u>. MUST REFERENCE ORDER#: <u>852215</u> ON ALL CORRESPONDENCE.

Charges as shown represent all applicable charges. No other amount will be paid. Any additional charges must be authorized by All Pro at the time they are incurred. A new confirmation reflecting any additional charges will be sent for authorized charges only. Pay will not be authorized for any load that is double brokered. A fine equal to 25% of the total pay above or an amount covering any fees assessed to All Pro by our customer, whichever is greater, will be deducted from any load where an unreported service failure has occurred or an unauthorized change has been made.





BILL TO: All Pro Freight Systems Inc. 1200 CHESTER INDUSTRIAL PKWY Avon, OH 44011 INVOICE DATE: 09/13/2024 INVOICE #: 85215 TERMS: NET 30 DUE DATE: 10/13/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/12/2024		2319 Woodstream Dr., Bowling Green, OH 43402 - 1360 Madeline Ln, Elgin, IL 60124, USA			
		Freight Income	1	\$700.00	\$700.00

TOTAL

\$700.00

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

	BILL OF LADING - BG833847024 Carrier: XXX Pickup Date: 94/2024	Driver PRO LABEL
	Origin 412 A44 OHIO LOGISTICS 2319 WOODSTREAM DRIVE Bowling Green, OH, 43402 SHIPPING Pickup Hours:08:00 AM - 05:00 PM Driver must reference the BG# and delivery City, State	Origin Termīnal
	Pickup Hours US:00 AM - 05:00 PM Driver must reinfence the bow and denery Cut, State upon pick up Destination CARDINAL HEALTH AT HOME 1360 MADELINE LANE, STE 500	Destination Terminal References
	ELGIN, IL, 60124 Shipping, (330) 963-6998 Hours: 08:00 AM - 05:00 PM CARDINAL HEALTH AT HOME 3rd Party Freight Charges Bill To	BOL: BG833847024 Customer Reference: 1018170247 PO Number: 1018170247 Sales Order #: 44596
	Special Instructions: Trailer wa5335 Dear 12052802	Service Level: Standard
LABEL USE AN INDELIBLE, PERMANENT INK MARKER, NGL THAT WILL NOT FADE IN DIRECT SUNLIDATE		m Description LTL State Diapers 110.0
LE INSPECTION LABEL NO. 67129249 TM YEAR 24 TMS VEHICLES ANNULLI VEHICLE INSPECTION REPORT IS TOTOR CARRIER O CHERE ENTRY FIGURE IN COMPACT IN THE INFORMATION OF COMPACT IN FIGURE IN THE INFORMATION OF COMPACT IN FIGURE IN COMPACT IN THE INFORMATION OF COMPACT IN FIGURE IN THE INFORMATION OF COMPACT IN FIGURE IN THE INFORMATION OF COMPACT IN THE INF	Totals: 30 H/Us 20543 Pounds perperper	On 30 Mandling Units Vestor of the property as follows: "The agreed or declared value of the
	Remit COD to: Customer check acceptioner may be applicable. See 49 Collect Prepaid Customer check acceptioner may be applicable. See 49 NOTE: Liability Limitation for loss or damage in this applicable acception and the set of the second set of th	PU.S.C. 14706(C)(1)(A) and (B). tit the carrier shall nor make delivery of this the carrier shall nor make delivery of the carrier the carrier shall nor make the carrier shall nor make the carrier the carrier shall nor make the carrier shall nor make the carrier the carrier shall nor make the carrier shall nor make the carrier the carrier shall nor make the carrier shall nor make the carrier shall nor make the carrier the carrier shall nor make the carrier shall nor make the carrier shall nor make the carrier the carrier shall nor make the carrier shall
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