



**MAGNA TRANSPORT SOLUTIONS LLC**  
**333 W. WACKER DR STE 1860**  
**CHICAGO, IL 60606**  
**PH# 312-724-6101 FAX# 312-626-2496**

Carrier: ROYAL3 INC

Attn: MARISA

Phone: (630)485-7370 103 Fax:

Equip. Declared Value

Miles Order Number(s)

443

164824

**Pick up:** EMORY DRY ICE----ATLANTA  
 5245 WESTGATE DRIVE

ATLANTA, GA 30336

PU # RETURN TOTES - 164824

<u>Piece Type</u>	<u>Qty.</u>	<u>Weight</u>	<u>Description</u>
		25000	

**Earliest Time:** 09/12/2024 10:00**Latest Time:** 09/12/2024 16:00**Phone:** (770)595-3033**Contact:** BRIAN

**Delivery:** EMORY DRY ICE - BROOKHAVEN  
 2046 EAST MANUFACTURERS BLVD

BROOKHAVEN, MS 39601

DEL # RETURN TOTES - 164824

<u>Piece Type</u>	<u>Qty.</u>	<u>Weight</u>	<u>Description</u>

**Earliest Time:** 09/12/2024 08:00**Latest Time:** 09/12/2024 23:00**Phone:****Contact:****Special Instructions:**

PO # RETURN TOTES - 163322

BOL # EMORY ATL

<b>Rate Detail:</b>	QUOTE	\$900.00	Refer to the finished Load Number on your invoice: <b>380718</b>
	<b>Total:</b>	<b>\$900.00</b>	



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<b>Carrier:</b> ROYAL3 INC	<b>Equip.</b>	<b>Declared Value</b>	<b>Miles</b>	<b>Order Number(s)</b>
<b>Attn:</b> MARISA			443	164824
<b>Phone:</b> (630)485-7370 103	<b>Fax:</b>			

**ALL INVOICES MUST INCLUDE A SIGNED DELIVERY RECEIPT AND BE SENT TO:**

MAGNA TRANSPORT SOLUTIONS LLC  
 333 W. WACKER DR STE 1860  
 CHICAGO, IL 60606  
 PH# 312-724-6101 FAX# 312-626-2496  
 PLEASE ALSO EMAIL TO: [ACCOUNTING@MAGNATRANS.COM](mailto:ACCOUNTING@MAGNATRANS.COM)

**ADDITIONAL TERMS AND CONDITIONS**

\*Carrier agrees to meet the "PICK UP" & "DELIVERY" as scheduled on rate confirmation. Magna Transport Solutions ("MTS") reserves the right to impose a fine and assess actual costs incurred for Carrier's failure to timely pick up and deliver as scheduled.

\*By accepting dispatch, Carrier acknowledges that driver can perform services in compliance with all hours of service and FMCSA regulations.

\*MTS HAS 24 HR DISPATCH 365 DAYS A YEAR: (312) 724-6101 or (800) 724-6751.

\*Carrier or driver must immediately call MTS when driver is loaded at PICK UP location and off loaded at DROP OFF location.

\*Carrier agrees to comply with all applicable federal and state laws, including the Homeland Security Act of 2002 and the Patriot Act together with any other instructions provided by MTS or its customer regarding load security. Carrier is held 100% liable for all costs and all expenses if "seals" are broken by unauthorized personnel.

\*Dispatch or driver is expected to call each day between 0800-1500 for tracking and position updates on shipments. Dispatch is expected to email a copy of the POD to: [helpdesk@magnatrans.com](mailto:helpdesk@magnatrans.com), as soon as possible upon delivery.

\*Driver is responsible for load count and product condition. Any damages and/or loss to product must be reported IMMEDIATELY OR WILL RESULT IN FINE!!!

\*Driver must have a minimum of 2 load locks & 2 straps.

\*Accessorial charges must be preapproved by MTS prior to being incurred. Receipts must be turned in with original BOLs and billing within 48 hours in order to be reimbursed. Failure to submit receipts with original billing will result in no reimbursement.

\*MTS reserves the right to terminate the Broker-Carrier Agreement and pay the underlying motor carrier if this tender is re-brokered.

\*Detention will be paid after 2 hours at PICK UP and DROP OFF locations (with "IN"/"OUT" times properly marked on bills) at \$35/hour. In order to receive detention compensation, MTS MUST be notified 30 minutes prior to going into detention AND at the end of detention. NO EXCEPTIONS!!!

\*ANY MOBILE PHONE NUMBER OF DRIVER PROVIDED BY CARRIER, AND ANY COMMUNICATION FROM DRIVER, IS CONSENT THAT MTS AND/OR THEIR RESPECTIVE REPRESENTATIVES MAY CONTACT DRIVER AT SUCH PHONE NUMBER BY PHONE OR TEXT MESSAGE AND COMMUNICATE WITH SUCH DRIVER.

\*Carrier is expected to bill the rates and charges set forth in this Rate Confirmation Sheet for Carrier's transportation and related charges within 30 days after date of delivery. MTS may refuse, and Carrier expressly waives all right of recourse against the shipper, receiver or MTS, for Carrier's issued or updated invoices received 90 days or more after the delivery date.

<b><u>Contact(s)</u></b>	<b><u>Phone</u></b>	<b><u>Fax</u></b>	<b><u>Email</u></b>
Matt Schroeder	(312)724-5861	(312)626-2946	<a href="mailto:mschroeder@magnatrans.com">mschroeder@magnatrans.com</a>

**MUST FILL OUT AND SIGN:**



**MAGNA TRANSPORT SOLUTIONS LLC**  
**333 W. WACKER DR STE 1860**  
**CHICAGO, IL 60606**  
**PH# 312-724-6101 FAX# 312-626-2496**

**Carrier:** ROYAL3 INC

**Attn:** MARISA

**Phone:** (630)485-7370 103 **Fax:**

**Equip. Declared Value**

**Miles Order Number(s)**

443

164824

DRIVER FIRST & LAST NAME:

TRUCK #:

TRAILER #:

CELL PHONE #:

Please sign and email or fax agreement of load tender within 30 minutes of receipt. By accepting the above shipment from Magna Transport Solutions, LLC, Carrier agrees to the terms, rates and charges set forth in this Rate Confirmation Sheet and the terms and conditions of the Broker-Carrier Agreement.

CARRIER SIGNATURE :



## INVOICE

**BILL TO:**

MAGNA TRANSPORT SOLUTIONS LLC  
333 WEST WACKER DRIVE SUITE 1860  
CHICAGO, IL 60606

**INVOICE DATE:** 09/13/2024**INVOICE #:** 164824**TERMS:** NET 30**DUE DATE:** 10/13/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
09/12/2024		5245 WESTGATE DRIVE, ATLANTA, GA 30336 - 2046 EAST MANUFACTURERS BLVD, BROOKHAVEN, MS 39601			
		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 BILL OF LADING - SHORT FORM

DATE: 09/12/24		CARRIER'S NAME ROYAL3 INC		TRAILER/CAR NUMBER 716	SHIPMENT IDENTIFICATION NO. 164824
CONSIGNEE: EMORY DRY ICE - BROOKHAVEN 2046 EAST MANUFACTURERS BLVD BROOKHAVEN, MS 39601 CONTACT: Phone:		FOR PAYMENT SEND BILL TO: MAGNA TRANSPORT SOLUTIONS LLC 333 W. WACKER DR STE 1860 CHICAGO, IL 60606 Phone: 312-724-6101 Fax: 312-626-2496		SO NUMBER EMORY ATL	
SHIPPER: EMORY DRY ICE---ATLANTA 5245 WESTGATE DRIVE ATLANTA, GA 30336 CONTACT: BRIAN Phone: (770)595-3033		BILL REF # RETURN TOTES - 163322		FREIGHT CHARGES ARE PREPAID UNLESS OTHERWISE MARKED CHECK ONE: PREPAID <input type="checkbox"/> COLLECT <input type="checkbox"/> THIRD PARTY COLLECT <input type="checkbox"/>	
Pieces <del>88</del> 74	Cargo Type Totes	HM	Kinds of Packaging, Description of Articles Special Marks and Exceptions Empty Dry Ice Bins / Totes	Weight 25,000.00	Class
SPECIAL INSTRUCTIONS: Legal 1 Here		TOTAL WEIGHT: 25,000		COD AMT: \$ Legal 2 Here	
Legal 3 Here		Signature of Consignor		C.O.D. FEE PREPAID <input type="checkbox"/> \$ COLLECT <input type="checkbox"/> \$ TOTAL CHARGES \$	
SHIPPER: EMORY DRY ICE---ATLANTA PER: <i>[Signature]</i>		DATE: 9/12/2024		CARRIER: ROYAL3 INC PER: <i>[Signature]</i> DATE: 9/12/2024	