

**Bill To Information**

Please send invoices and backup information to:

Email: ap@avenuelogistics.com

**Sent By:** Austen Collins**Email** acollins@avenuelogistics.com**Phone** (773) 943-6252**Fax****Office** KANSAS CITY OFFICE**Rate/Route Confirmation for ROYAL3 INC \$600.00**

Shipment Details					
<b>Shipment #</b>	70664372	<b>BOL #</b>	37129792	<b>Carrier Miles</b>	173.41
		<b>Pallet Count</b>	0	<b>Temperature</b>	-
<b>Cust Ref/PO #</b>	NB33357142 /010051010276	<b>Eq Type</b>	53' Van or Reefer		
<b>Todays Date</b>	10/14/2024 13:49	<b>Eq ID</b>	0		
<b>Description of Merch:</b>	Bottled Water 2736.00 CASE @ 43141.00 Pounds				

Carrier Details			
<b>Carrier</b>	ROYAL3 INC	<b>Driver Name</b>	Jack Jarakovic Ext. 106
<b>MC</b>	944686	<b>Dispatch Phone</b>	(630) 485-7370
<b>DOT #</b>	2828543	<b>Fax</b>	
<b>SCAC</b>	ZFIH	<b>Carrier Ref</b>	

Stop Details						
Stop	Type	Pcs/Type/Wt	Address	Appt Date	Appt Time	PU/Deliv #
1	Pickup	2736 CASE 43141 lbs	NIAGARA 2222 FLORENCE HARLLEE BLVD FLORENCE, SC, 29506 PN: (843) 758-6103	10/14/24	14:00 - 23:13	NB33357142
			MUST BE ABLE TO SCALE LISTED WEIGHT, MUST CONFIRM TRAILER IS SEALED PRIOR TO DEPARTING SHIPPER.			
2	Delivery	2736 CASE 43141 lbs	COSTCO 1025 WOODRUFF ROAD GREENVILLE, SC, 29607 PN: (111) 111-1111	10/15/24	04:30	37129792
			MUST BE ABLE TO SCALE LISTED WEIGHT, MUST CONFIRM TRAILER IS SEALED PRIOR TO DEPARTING SHIPPER.			

Shipment Line Items		
<b>Total Pcs:</b> 2736 CASE	<b>Total Pallets:</b>	<b>Total Weight:</b> 43141 lbs

Carrier Rate Agreement						
Item #	Charge Description	Unit Price	Unit Type	Unit Quantity	Rate	Note
1	Line Haul	\$600.00	Flat Rate	1	\$600.00	
				<b>Total:</b>	<b>\$600.00</b>	

**ROYAL3 INC**  
6850 W 63RD STREET, CHICAGO, IL (If this is not your information, notify dispatch immediately)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Terms of Agreement	
1. _____	
2. PLEASE HAVE DRIVER CALL 773-945-0999	
3. Carrier must advise 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.	
4. The rate includes fuel surcharge, and no other rates or charges, including carrier tariffs, shall apply. By signing this Contract for Transportation or accepting the load, the carrier agrees to the Motor Carrier Agreement terms.	
5. CARRIER confirms insurance coverage of at least \$1,000,000 in auto and general liability, and \$100,000 in cargo coverage.	
6. Compensation may be withheld for double-brokering, rail movement, freight consolidation, or non-fulfillment of services.	
7. Trailer Seals: Apply a seal and note its number on the bill of lading before leaving the shipper. Seals can only be broken with Avenue Logistics Management's written approval. Delivering without the intact seal may lead to a claim.	
8. Travel directions from Avenue Logistics are informational. Carriers must ensure lawful and safe operation of vehicles and contents, complying with all laws and regulations.	
9. _____	
10. BILLING INSTRUCTIONS: Email- ap@avenuelogistics.com Documentation Required- Invoice and POD. If applicable, Lumper Receipt, Scale Ticket, Escort Receipt, Detention Slip or IN/OUT times on POD. Direct Line: 773-945-1006 Fax: 312-661-9150	



## INVOICE

**BILL TO:**  
AVENUE LOGISTICS LLC  
325 W OHIO STREET 3RD FLOOR  
CHICAGO, IL 60654

**INVOICE DATE:** 10/15/2024  
**INVOICE #:** R61360  
**TERMS:** NET 30  
**DUE DATE:** 11/15/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
10/14/2024		2222 Florence Harlee Blvd, Florence, SC, 29506 - 1025 Woodruff Road, Greenville, SC, 29607			
		Freight Income	1	\$600.00	\$600.00

<b>TOTAL</b>
\$600.00

**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 - Not negotiable

**BILL OF LADING**

Date: 10/14/24 8:15 PM

SHIP FROM

Name: CAR  
Address: 2222 Florence Hanley Blvd.  
City/State/Zip: Florence, SC 29506  
SID#: 57600572 FOB: ☐

Bill of Lading Number: 37129792  
Master Bill of Lading Number: 57600572  
Customer PO#: 010051010276  
Reference #:   
Delivery #: 37129792  
Shipment #: 57600572

SHIP TO

Name: COSTCO WHOLESALE  
Location #: 1021 WOODSUFF ROAD  
Address: GREENVILLE, SC 29607  
City/State/Zip: GREENVILLE, SC 29607  
CIC#: FOB: ☐

Carrier Name: AVENUE LOGISTICS LLC  
Address: 325 W OHIO ST 3RD FL  
City/State/Zip: CHICAGO IL 60654  
SCAC: AVGW Pro number: W94951  
Trailer number: 16945311  
Seal Number

Freight Charge (Weight charges are prepaid unless noted otherwise)  
Term: Prepaid ☐ Collect ☐ 3rd Party ☐ Customer Pick Up ☐

POD INSTRUCTIONS: Carrier FAX (909) 494-4456 Or Email To: Orders@niagarabottling.com

**Customer Order Information**

Qty	Bottles Order Shipped	Cases Shipped	Pallets Shipped	SKU	Customer Item ID	Item Description	UPC Code	Weight
48	228	48	1	KRKTGSPDMGPS	931484	1GP DM KIRKLAND 6P. BRCK 48 GP	096619931484	2523 lbs
48	3840	48	1	KRKSQZSDPMN	906165	8Z DM KIRKLAND 30P N.48 GP	096619966378	2178 lbs
816	32640	816	17	KRNSLAPDMGP IN	782796	10SL DM KIRKLAND 40P N.48 GP	096619979212	38442 lbs
<b>Totals</b>								<b>43143 lbs</b>

Receiving Stamp:

All overages, under and damage issues/refunds must be populated on this document and communicated via FAX confirmation of POD to ( )

**CARRIER**

CARRIER SIGNATURE/PICKUP DATE

If the shipment is to be delivered to the consignee without recourse on the carrier's part, the carrier shall sign the following statement:  
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Carrier Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Property described above is received in good order, except as noted.

COO Amount: \$ \_\_\_\_\_

NMFC # CLASS 0

LTL ONLY

Driver Name: \_\_\_\_\_ Driver Initials: \_\_\_\_\_  
NBL Initials: \_\_\_\_\_

Facility Check Out

App Time: 10/14/24 11:00  
Check In Time: 10/14/24 5:31 PM  
Check Out Time: 10/14/24 8:15 PM  
Delivery Time: 10/15/24 2:00 AM

Carrier certifies emergency response information was made available to and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

**CARRIER INSTRUCTIONS**

Driver: Should you encounter any delays preventing the on time delivery of this shipment, please dial 800-230-4488 for assistance.

COSTCO WHOLESALE  
1021 WOODRUFF RD  
GREENVILLE , SC 29607  
(864) 297-2591

LOCATION: 1005 GREENVILLE  
APPT DATE/TIME: 10/15/24 05:00  
CARRIER: NIAGARA

CHECKIN: 10/15/24 03:55  
RCVG START: 10/15/24 04:22  
RCVG END: 10/15/24 04:22  
CHECKOUT: 10/15/24 04:22

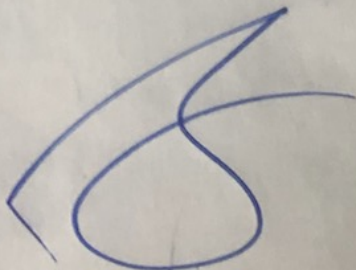
DEPT #: 14 VEND #: 36651 90  
VEND NAME: NIAGARA BOTTLING LLC

PO #: 10051010276 QTY(S): 19 Plt  
BOL: 57600572

TEMP:

LOG LINE: ~~34876-05~~

RECEIVER: Stacy Robinson



1st

SIGNATURE

2nd Page 1