



INVOICE

BILL TO:
CAPSTONE LOGISTICS
640 N LA SALLE DRIVE SUITE 555
CHICAGO, IL 60654

INVOICE DATE: 11/18/2024
INVOICE #: R66103
TERMS: NET 30
DUE DATE: 12/18/2024

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
11/18/2024		1701 North Court St, Montgomery, AL 36104 - 3027 Bearing Drive, Franklin, IN 46131			
		Freight Income	1	\$800.00	\$800.00

TOTAL
\$800.00

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



Legal Name: LoadDelivered Logistics, LLC
DBA Name: Capstone Logistics
640 N. LaSalle St., Suite 555, Chicago, IL 60654
847-509-0623 Fax 312-649-6657

*** Load Confirmation ***

NOTE: For credit information, please refer to the following:

MC #: 629379 DOT #: 2241050
DUNS #: 00-897-3396 Tax ID #: 45-0582140
Email paperwork for standard pay to carrierinvoices@capstonelogistics.com
Email paperwork for quickpay Comchek to CFM-quickpay@capstonelogistics.com
Email paperwork for quickpay ACH to CFM-qpACH@capstonelogistics.com
OS&D- Must be reported within 24 hours of occurrence.

0879827

Dispatch: Sara Gehrett
Phone: 312-662-5617
Email: sara.gehrett@capstonelogistics.com
Fax:

Carrier: ROYAL3 INC
CHICAGO IL 60638
Contact: Van
Phone: 630-485-7370
Date: 11/18/2024
Fax:

Order
Order: 0879827
Miles: 544.0
Temp:
BOL: 72065718
Cases: 22
Commodity: Dry Goods
Weight: 43999.0
Trailer: 53' Dry Van
Reference:
Pallets: 22
PU 1 Name: HFSC-Whitfield Foods
Address: 1101 North Court St
MONTGOMERY AL 36104
Date: 11/18/2024 0700
11/18/2024 1300

Reference number: KR 72065718
Reference number: PO BOL.A25298
Reference number: PO RMA.2024-18-1
Reference number: PU PQGI-BOL.A25
Reference number: ZZ A

SO 2 Name: Amcor Packing
Address: 3201 Bearing Drive
FRANKLIN IN 46131
Date: 11/19/2024 0700
11/19/2024 0700

Reference number: PO RMA.2024-18-1
Reference number: PU PQGI-BOL.A25

Payment
Carrier Freight Pay: \$800.00
Total Carrier Pay (Before COM check): \$800.00

Your undertaking of the transportation of the shipment above confirms that you agree to the following terms and instructions.

***SAFETY COMPLIANCE WARRANTY:** By accepting this shipment, carrier warrants and represents that the transportation it provides is and shall be in full compliance with all Federal and State rules, and regulations, including all Safety regulations promulgated by the Federal and State DOT's governing hours of service.

***ANY CONFLICT BETWEEN THESE INSTRUCTIONS AND ANY OTHER CONTRACT BETWEEN THE PARTIES HERETO SHALL BE RESOLVED IN FAVOR OF THESE INSTRUCTIONS.**

All accessorial charges must be reported within 48 hours of delivery and applicable paperwork must accompany your invoice or could be subject to non-payment

Valid unloading receipts must be provided within 48 hours of delivery or could be subject to non-payment

Approval for payment of detention is contingent upon the following eligibility requirements:

- 1) Carrier must report facility departure time and total detention hours within 24 hours of shipment delivery at the final facility.
- 2) Carrier must provide proof of the on-time arrival and departure in the form of a BOL, POD or other shipping document with arrival and departure times notated and signed by the facility within 48 hours of shipment delivery.

Legible copies of the BOL, POD, unloading receipt, and rate confirmation should be included with an invoice.

Paperwork not received within 90 days of delivery is subject to non-payment

*Except as otherwise agreed in writing, this rate includes all costs of transportation including but not limited to accessorial, fuel, tolls, unloading/loading, storage, detention, and layovers. Any deviation from these rates approved by Capstone Logistics in writing, and receipts or other proof of such costs and written approval must accompany your invoice.

*MacroPoint tracking is required for all orders. Carrier agrees that the driver has consented to receive text messages and calls from Capstone Logistics.

*Carrier must be in full compliance with the Food Safety Modernization Act (FSMA), if applicable.

*Reefer unit must have temp download and run in continuous mode. Trailers must not be more than 9 years old.

*Please call 312-662-4770 if the temperature on the BOL does not match the temperature listed above. Failure to notify Capstone Logistics and obtain reconciled temperature instructions prior to transport shall bar Carrier from asserting such differing temperature instructions as a defense to any loss, damage, or delay claim.

*Please call 312-662-4770 for dispatch.

*All Van/Container loads must be sealed at origin either by shipper or driver with a seal number noted on bill of lading. Seals must be broken by the consignee. Seals not be broken in transit without prior written approval of Load Delivered.

*If your transit requires you to operate in California, you must be compliant with all applicable CARB regulations and provide Capstone with any annual fleetwide attestation regarding such compliance.

MacroPoint Instructions

MacroPoint set up can be done through the following steps.

1. Click the link you receive via text to download the app
2. Search "MacroPoint for Truckers" in your app store

Additional Instructions

HFSC-Whitfield Foods - PEPSILNY: !!!!! !Driver must confirm PO/PU numbers on the BOL match with what is on the rate confirmation before departing from shipper !!!!!

!!!! YOU CANNOT BE PAID IF THE PAPERWORK DOES NOT MATCH !!!!!

_____ *Asta Mijad* _____

Agreement **Please sign and return to dispatch user**

Failure to provide all required documentation or approval will result in non-payment and/or delayed payment.

11/18

CARRIER'S NO 94723

CARRIER LDLC

RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading.

AT 1101 N. COURT ST. MONTGOMERY, ALABAMA 36104

FROM

SoGo Packaging LLC.

CONSIGNEE TO *Amco*

DESTINATION Franklin

STATE IN

COUNTY

DELIVERY ADDRESS *

(*) TO BE FILLED IN ONLY WHEN SHIPPER DESIRES AND GOVERNING TARIFFS PROVIDE FOR DELIVERY THEREAT.

ROUTE

DELIVERING CARRIER

CAR OR VEHICLE DETAILS

NO

NO PAGE

KIND OF PACKAGE, DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS

385	Plastic Top Frames
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Total weight

Seal # 30711644

39.788 lbs.

RNA# 2024-18-1

St St

Signature of Contractor _____

If charges are to be prepaid, write or stamp here, "To be Prepaid"

Received \$_____ to apply in
prepayment of the charges on the property described
below:

Agent or Cashier

PER _____
(The signature here acknowledges only the amount proposed.)

Charges Advanced \$

"If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is 'carrier's or shipper's 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 specifically stated by the shipper to be not exceeding

²The flow sensor used for this shipment conforms to the specifications set forth in the International Organization for Standardization (ISO) 9000.

governed by the interstate commerce commission.

SoGo Packaging LLC.

SHIPPER PER

AGENT PER

Permanent post office address of studies

P.O. BOX 791, MONTGOMERY, AL 36101-0791

(This Bill of Lading is to be signed by the shipper and agent of the carrier on the same date.)