



INVOICE

BILL TO:

RTC
2000 CRAWFORD PLACE NUMBER 900
MT LAUREL, NJ 08054

INVOICE DATE: 12/03/2024**INVOICE #:** R67708**TERMS:** NET 30**DUE DATE:** 01/03/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/02/2024		1257 Gillingham Rd, Neenah, WI 54956, USA - 5490 W Roosevelt Rd, Chicago, IL 60644, USA			
		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**

To: Royal3 Inc. -ICC No. 0944686
Fax Attn: MILO

Fax (888)294-7030 Vc (630)485-7370

APPOINTMENTS - Times are scheduled by Rehmann Transportation Corp.

**** ALL Accessorials must be preapproved. ****

**ALL ACCESSORIAL PAPERWORK MUST BE FAXED TO 1-888-965-2010 WITHIN 24 HOURS.
FAILURE TO DO SO WILL RESULT IN NON-PAYMENT.**

YOU MUST CALL 1-856-924-5200 TO OBTAIN AN AUTHORIZATION NO.

***NO ADVANCES* ALL Comchecks will have a \$17 charge added including Lumpers
Carrier to provide driver(s) to affect agreed schedule according to
DOT SAFETY REGULATIONS**

**NO Brokers: by signing this amendment to contract you agree to utilize
YOUR equipment. If this load is brokered out you agree to forfeit payment.**

BILLING REQUIREMENTS: for Accounting Questions: 856-787-9729

- 1.) Original Bill of Lading/Delivery Receipt.
- 2.) Rate confirmation sheet.
- 3.) Carrier Invoice.
- 4.) ALL ACCESSORIAL PAPERWORK MUST BE TURNED IN WITHIN 24 HOURS
FAILURE TO DO SO WILL RESULT IN NON-PAYMENT.
- 5.) Copy of Operating Authority.
- 6.) Complete IRS form W-9.
- 7.) Signed contract.
- 8.) Original certificate of liability & cargo insurance - (must be sent
from your insurance agent and listing Rehmann Transportation Corp.
as Additional Insured).

This Rate Confirmation will be added to the Contract Carrier Agreement

Send invoice and supporting documents to: ap@rtcttransportation.com
or mail to: Rehmann Transportation Corp., PO Box 1028, Mt Laurel, NJ 08054

To Secure Order Driver must call **1-856-924-5200**
BETWEEN 7:30-10:00 AM (EASTERN TIME) ON DAY OF PICKUP.

Addendum to Contract

Load Number: 200 061631 (This number must appear on all paperwork)

Pick-up(s):

Neenah WI 54956

Appt: 12/02/24 11:00-12:30

Consignee(s):

Chicago IL 60644

Appt: 12/03/24 10:00AM

<u>#/Pcs</u>	<u>Commodity</u>	<u>Weight</u>	<u>Equipment</u>	<u>Amount</u>
	Paper	42,000	VAN ONLY	800.00

MUST PU AND DEL ON TIME

Carrier agrees not to solicit customers according to contract.

Authorized Signature: Milo Morrison Date: 12-2-2024
Royal3 Inc. -ICC No. 0944686


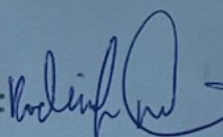
Please SIGN and FAX back to 1-888-965-2010 Attn: CODY



BILL OF LADING

Date Printed: 12/01/2024

Date Loaded: 12/02/2024

SHIP FROM		Shipment Number: 201936000			
Name:	MENASHA Preprint NEENAH PLANT				
Street:	1257 GILLINGHAM RD				
City/State/Zip:	NEENAH, WI 54956-3903				
SHIP TO		Carrier Name:	CUST PICK-UP FREIGHT CARRIER		
Name:	SABERT CORPORATION	Trailer Number:	W94922		
Street:	5490 W ROOSEVELT RD	Seal Number:	2489052		
City/State/Zip:	CHICAGO, IL 60644-1467	SCAC:	ZZZA		
THIRD PARTY FREIGHT BILL TO		Pro Number:			
Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <input type="checkbox"/>					
SPECIAL INSTRUCTIONS					
DELIVERY INFORMATION					
Delivery # Purchase Order #	Material / Certification	Units	Weight	NMFC	Class
8120929620 1638847-0010	1000289735 / - Received By:  Date: 12/3/24 Appointment Time: 10AM Time In: 9:20 Time Out: 10:00	12	41402	29785	77.5
GRAND TOTAL:		12 HU	41402 LB		
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.		CARRIER SIGNATURE/PICKUP DATE 