



INVOICE

BILL TO:

GLOBALTRANZ ENTERPRISES LLC
2700 COMMERCE ST STE 1500
DALLAS, TX 75226

INVOICE DATE: 12/20/2024**INVOICE #:** R70387**TERMS:** NET 30**DUE DATE:** 01/20/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/19/2024		660 Allied Industrial Blvd, Macon, GA 31206 - 660 Old Caroleen Rd, Forest City, NC 28043			
		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



CARRIER RATE
CONFIRMATION

Load Number: 30153148



GENERAL CONTACT

GTZ CONTACT: (888) 720-2739 v.ferrer@globaltranz.com

GTZ FAX:

CARRIER PAYMENTS:

INVOICE/POD/RATE CON submit to: TLINVOICES@globaltranz.com

NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

PO#:
REF#:
PRO#:
CARRIER QUOTE:

SERVICE: SERVICE TYPE: Full TRAILER TYPE: Van SIZE: 53	ACCESSORIAL(S):	COMMODITY: DESCRIPTION: WEIGHT: 44000 lbs PALLETS:36 PIECES:0
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CARRIER INFORMATION: CARRIER NAME: ROYAL3 INC LEGAL NAME:ZIGI FREIGHT INC MC#:944686 [AV595]	DISPATCHER: Kelly PHONE: (630) 485-7370x100 FAX: (630) 485-6980 EMAIL: kelly@royal3inc.com	DRIVER: Ricardo DRIVER PHONE: (786) 450-3791 TRAILER NUMBER:H03237
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IMPORTANT LOAD NOTES:

ORIGIN: FACILITY: Freudenberg Texbond STREET: 660 Allied Industrial Blvd. CITY/STATE/ZIP: Macon, GA 31206 FAX:	PICKUP DATE: 12-19-2024 REF #: HOURS: 08:00 - 15:00 CONTACT: Receiving PHONE: (478)781-8088	PICKUP #: APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
PICKUP NOTES:		

DESTINATION: FACILITY: B&W Fiberglass STREET: 660 Old Caroleen Rd CITY/STATE/ZIP: Forest City, NC 28043 FAX:	DELIVERY DATE: 12-20-2024 HOURS: 08:00 - 15:00 CONTACT: Jennifer Hoyle PHONE: (704)434-8005x110	REF #: DELIVERY#: APPOINTMENT REQUIRED: No APPOINTMENT MADE: No
DELIVERY NOTES:		



RATE INFORMATION:
BASE RATE:\$800.00
TOTAL RATE: \$800.00

GTZ SIGNATURE : Valentina Ferrer (888) 720-2739

CARRIER SIGNATURE :

Carrier understands and acknowledges that any instruction or information given to Carrier by Broker are merely for the Carrier's convenience and not to be construed as Brokers attempt to control the manner, method, or means by which Carrier or its employees performs the work hereunder. The Rate Confirmation Sheet is a legally binding agreement between Broker and Carrier. No signature is required to enforce provision of this agreement, rather both parties accept the terms and conditions contained herein upon Carrier's partial or full performance of the shipment. In the event of any conflict between the Agreement or the Carrier's Carrier Rate Confirmation, the Agreement shall govern and then any terms as set forth in this Carrier Rate Confirmation shall apply. Carrier must immediately notify Broker if shipper's instructions do NOT match the Rate Confirmation. Broker does not authorize hand written or verbal changes to the rate confirmation. If this rate confirmation does not accurately reflect the load terms, carrier must obtain a revised rate confirmation from Broker. Carrier's failure to provide equipment and/or services as agreed upon may result in additional line haul deductions.



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CONFIRMATION**

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To be eligible for Accessorials / Incidentals, Carrier must:

- Be checked in to shipper **OR** receiver by the appointment time.
- Submit all proof of detention, accessorial, incidentals within 24-48 hours of delivery.

Detention:

- Carrier must be on time for pickup/delivery.
- Detention accrual begins 2 hours after appointment time at shipper/receiver IF:
 - Carrier must notify Broker after **60** minutes of waiting.
 - Provide time stamped BOL within 48 hours of delivery.
- Detention Rate - **\$40/hr** after **2** hours. Max \$200 detention per stop.

Layover, Truck Order Not Used (TONU):

- Carrier must contact Broker to request
- Delays or cancellations must be confirmed by Broker
- Layovers: \$200 Dry Van or \$250 Running Reefers.
- TONU: \$200

Submitting Payments:

- Email Invoice, Rate Confirmation, Proof of Delivery & Receipts to TLinvoices@globaltranz.com
- 3% / 3-Day Quick Pay available upon request
- For Payments question contact aptrrequests@globaltranz.com or by calling 866-275-1407 ext. 72597

GLOBALTRANZ

Straight Bill of Lading - Short Form - Original - Not Negotiable

GTZ BOL NO : 30153148

Shipper
Address
Country
Contact Name
Phone Number
Contact Email
Fax Number

Freudenberg Texbond
660 Allied Industrial Blvd.
Macon, GA 31206
USA
Receiving
(478) 781-8088

Carrier : ROYAL3 INC
Shipment Date: 12/19/24
Carrier Pro#:
Ref # :
Carrier Quote # :
P/O # :
Customer BOL NO:



Consignee
Address
Country
Contact Name
Phone Number
Contact Email
Fax Number

B&W Fiberglass
660 Old Caroleen Rd
Forest City, NC 28043
USA
Jennifer Hoyle
(704) 434-8005x110

Third Party Billing Information:
All charges are prepaid to:
GlobalTranz
PO Box 6348
Scottsdale AZ 85261
Direct billing inquiries to : (866) 275-1407
GTZ BOL NO : 30153148

Comments/Special
Instructions:

Pickup Remarks :

Delivery Remarks :

Units	Pieces	IsHazard	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
36	0		empty bobbins	44000	0	0	0	0		false

The authorized signatories signing this document on behalf of its company consents and bind its company to the terms and conditions found on www.carrierrate.com.

Shipper Certification : I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.

Shipper's Signature: _____

Driver's Signature: _____

Date: 12/19/24

Trailer#: H03237

Date: 12/19/24

Trailer#: _____

Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.

Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall use the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Consignor's Signature: _____

Consignee Signature: _____

Company Name: _____

Print Name: _____

Date: _____

Permanent post-office address of the Shipper:

* Mark with "X" to designate material as defined in Title 49 CFR

