



INVOICE

BILL TO:

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

INVOICE DATE: 12/20/2024**INVOICE #:** R70405**TERMS:** NET 30**DUE DATE:** 01/20/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/19/2024		4655 Patterson Ave, Suite B, Grand Rapids, MI 49512 - 7498 E 46th Place, Tulsa, OK 74145			
		Freight Income	1	\$2,400.00	\$2,400.00

TOTAL

\$2,400.00

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: 30164975



GENERAL CONTACT
GTZ CONTACT: (909) 553-5755 ctucker@fullcoveragefreight.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:	ACCESSORIAL(S):	COMMODITY:
SERVICE TYPE: Full TRAILER TYPE: Van SIZE: 53		DESCRIPTION: HOT TUBS - MISC WEIGHT: 15000 lbs PALLET(S): 17 PIECES: 17

CARRIER INFORMATION:		
CARRIER NAME: ROYAL3 INC LEGAL NAME: ZIGI FREIGHT INC MC#: 944686 [AV595]	DISPATCHER: Asta PHONE: (630) 485-7370x108 FAX: (630) 485-6980 EMAIL: asta@royal3inc.com	DRIVER: TITUS DRIVER PHONE: (225) 939-7120 TRAILER NUMBER: 289474

IMPORTANT LOAD NOTES:
- CARRIER MUST SCHEDULE PICK UP AND DELIVERY APPTS IN ADVANCE.

ORIGIN:		
FACILITY: NORDIC STREET: 4655 PATTERSON AVE, SUITE B CITY/STATE/ZIP: Grand Rapids, MI 49512 FAX:	PICKUP DATE: 12-19-2024 REF #: HOURS: 08:00 - 16:00 CONTACT: TERRY - 616-291-5618 PICKUP #:	APPOINTMENT REQUIRED: Yes APPOINTMENT MADE: No
PICKUP NOTES:	PHONE: (616) 291-5618	

DESTINATION:		
FACILITY: GALAXY HOME RECREATION STREET: 7498 E 46TH PLACE CITY/STATE/ZIP: Tulsa, OK 74145 FAX:	DELIVERY DATE: 12-20-2024 HOURS: 08:00 - 16:00 CONTACT: MATT - 918-813-0384 DELIVERY #:	APPOINTMENT REQUIRED: Yes APPOINTMENT MADE: No
DELIVERY NOTES:	PHONE: (918) 813-0384	



RATE INFORMATION:
BASE RATE: \$2,400.00
TOTAL RATE: \$2,400.00

GTZ SIGNATURE : Chris Tucker (50049) (909) 553-5755

CARRIER SIGNATURE : Asta Mijao

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.



**CARRIER RATE
CONFIRMATION**

Load Number: 30164975



GENERAL CONTACT

GTZ CONTACT: (909) 553-5755 ctucker@fullcoveragefreight.com

GTZ FAX:

CARRIER PAYMENTS:

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

NOA and PAYMENT INQUIRIES: APTLREQUESTS@globaltranz.com

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 aptlrequests@globaltranz.com or by calling 866-275-1407 ext. 72597

GLOBALTRANZ

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

GTZ BOL NO : 30164975

Shipper	NORDIC	Carrier :ALD TRANSPORTATION INC
Address	4655 PATTERSON AVE SUITE B Grand Rapids, MI 49512	Shipment Date:12/19/24
Country	USA	Carrier Pro# :
Contact Name	TERRY - 616-291-5618	Ref # :
Phone Number	(616) 291-5618	Carrier Quote # :
Contact Email		P/O # :
Fax Number		Customer BOL NO:



Seal: 2960673

Consignee	GALAXY HOME RECREATION	Third Party Billing Information:
Address	7498 E 46TH PLACE Tulsa, OK 74145	All charges are prepaid to:
Country	USA	GlobalTranz
Contact Name	MATT - 918-813-0384	PO Box 6348
Phone Number	(918) 813-0384	Scottsdale AZ 85261
Contact Email		Direct billing inquiries to : (866) 275-1407
Fax Number		GTZ BOL NO : 30164975

Comments/Special Instructions: - CARRIER MUST SCHEDULE PICK UP AND DELIVERY APPTS IN ADVANCE.

Pickup Remarks : 1 Extra Box - 22642

Delivery Remarks :

Pallets	Pieces	IsHazmat	Description	Weight	FreightClass	Length	Width	Height	NMFC	Stackable
17	17		HOT TUBS - MISC.	15000	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: 

Date: 12/19/24 Trailer#: _____

Driver's Signature: _____

Date: _____ 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 sign 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: 

Print Name: Damon Lopez

Company Name: _____

Date: 12/20/24

Permanent post-office address of the Shipper:

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

