



## INVOICE

**BILL TO:**

KIRSCH TRANSPORTATION SERVICES INC  
1102 DOUGLAS STREET  
OMAHA, NE 68102

**INVOICE DATE:** 12/23/2024**INVOICE #:** R70399**TERMS:** NET 30**DUE DATE:** 01/23/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/19/2024		1323 N Main St, Mt Pleasant, TN 38474 - 7701 Commerce Blvd, Panama City, FL 32404			
		Freight Income	1	\$1,600.00	\$1,600.00

**TOTAL**

\$1,600.00

**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**



**Attention: If the following are not completed, FREIGHT INVOICE WILL NOT BE PAID**

Carrier agrees that Carrier (including any driver employed, retained or otherwise engaged by Carrier) will comply with all applicable laws and regulations of the DOT, FMCSA and other authorities in the transportation of freight subject to this Rate Confirmation.

**\*\*Remit To Instructions:** Within 24 hours of delivery, please email a legible Proof of Delivery, Rate Confirmation and Invoice to [invoice@kirschtrans.com](mailto:invoice@kirschtrans.com) to begin payment processing, or subject to \$100 deduction.

**Carrier is responsible for sending Proof of Delivery directly to Kirsch Transportation; this is applicable to carriers who utilize a factoring company.**

1. For sealed loads, seal numbers and "Seal Intact" notation must appear on Bill of Lading.
2. If tarp required, keep load **dry and clean**.
3. Communications with Kirsch Transportation will be conducted by Carrier's dispatch or other designated department. Carrier acknowledges that Kirsch Transportation will not accept, respond to or engage in communications with any Carrier driver.
4. Quick Pay Processing:

We offer two Quick Pay options:

10 day at a 3% fee

24 hour at a 5% fee

Invoice, Rate Confirmation, and all pages of the signed Bill of Lading and any other pertinent paperwork must be legible and sent to [invoice@kirschtrans.com](mailto:invoice@kirschtrans.com). You must clearly note which quick pay option you would like on your invoice.

Invoices not noted will default to our normal 30-day payment terms. Kirsch Transportation Services, Inc. reserves the right to refuse quick pay processing in the event of incomplete or illegible paperwork and can require that original paperwork be mailed to our office for processing.

5. Macropoint tracking is required on all loads or subject to deduction.

6. For payment status updates, please email [Paymentstatus@KirschTrans.com](mailto:Paymentstatus@KirschTrans.com).

This rate has been mutually agreed upon by Carrier and Kirsch Transportation and includes all stop-off charges, fuel surcharges, loading and unloading charges and other applicable charges. This rate cannot be changed, modified or supplemented by reference to any other rates, rules, classification, schedule or tariff. Carrier shall be liable for full loss resulting from loss, damage, injury or delay.

Carrier acknowledges and understands this Rate Confirmation is a valid and binding contract by and between Carrier and Kirsch Transportation.

Kirsch Transportation understands this Rate Confirmation has been approved and executed for or on behalf of Carrier by an authorized officer, director or other agent or representative of Carrier. Carrier and Kirsch Transportation mutually agree that the terms and conditions of this Rate Confirmation are governed by the Broker-Carrier Agreement by and between Carrier and Kirsch Transportation. In the event any of the provisions of this Rate Confirmation conflict with those of such Broker-Carrier Agreement, the terms of this Rate Confirmation will control only as to the freight specified herein and extent of any such conflict.

Customer product must not be moved or transloaded without written authorization from Kirsch. Carrier agrees to exclusive trailer use on this load, no outside product may be added to the trailer without written authorization from Kirsch.

Names on the side of Carrier trailer must be marked with Carrier logo/signage or have nothing. No large customer trailers such as Amazon may pick-up or deliver product to our customers without written authorization. Failure to follow this rule may result in delivery being rejected.

Kirsch Transportation Services, Inc.

1102 Douglas St.

Omaha, NE 68102

(877) 341-9611

[www.kirschtrans.com](http://www.kirschtrans.com)



Kirsch Transportation Services, Inc.  
Omaha, NE 68102  
1102 Douglas St



**KIRSCH**  
TRANSPORTATION SERVICES, INC.

Order #: 0560272

Kirsch Representative:  
Seth Little  
531-213-2199

Carrier: ROYAL3 INC  
CHICAGO IL 60638  
Date: 12/19/2024

Contact: Joey  
Phone: 630-256-8162  
Fax: 630-485-6980

Order  
Order: 0560272  
Miles: 441.0  
Temp:  
BOL M000007019  
Pickup #: 542274605

Commodity: Retail  
Weight: 7800.0  
Trailer: 53ft Van  
Reference:  
Tarp Required:

**PU 1** Name: Sonoco Protective Solutions Date: 12/19/2024 0800  
Address: 1323 N Main St 12/19/2024 2300  
MT PLEASANT TN 38474 Contact: Main - FCFS  
Phone: 931-379-3263 Drvr Ld/Unld: No driver loading or unload  
Reference Number: BM M000007019  
Reference Number: KD Future Use  
Reference Number: KD Future Use  
Reference Number: ZZ 542274605

**SO 2** Name: Trane Date: 12/20/2024 0800  
Address: 7701 Commerce Blvd 12/20/2024 0800  
PANAMA CITY FL 32404 Contact: REC - BY APPT  
Phone: 850-769-6683 Drvr Ld/Unld: No driver loading or unload  
Reference Number: ZZ 542274605

Payment  
Carrier Freight Pay: \$1,600.00  
Total Carrier Pay: \$1,600.00

Equip Req'd:	Must be 53' TRL	Quantity:	1	53FT
Equip Req'd:	No Reefer	Quantity:	1	NORF

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**Instructions**

Sonoco Protective Solutions - INGEDANC: MACROPOINT IS REQUIRED BY CUSTOMER FROM SHIPPER TO RECEIVER. FAILURE TO COMPLY WILL RESULT IN \$100 DEDUCTION

**\*\*Driver is responsible for confirming their paperwork given by shipper matches rate confirmation. BOL#, PO#, and city/state must match. There are times city/state will be different, but carrier must email BOL to Kirsch to have Kirsch verify to continue with load before leaving shipper. Failure to get written approval will result in carrier not being paid for any accessorials or line haul of the load and responsible for returning product back to shipper without pay. All accessorial paperwork must be submitted with 24hr of occurrence.**

**\*The weight listed on rate confirmation is an estimate provided by the customer. If actual load weight is higher or lower than estimated weight but truck and trailer are legal, then no additional pay will be added to the load. Driver must be able to haul up to 45,000 for a VAN and 48,000 for open deck.**

**\*\*Carrier is NOT to change pickup or delivery appointment. This MUST be done by Kirsch. If appointment is changed without Kirsch's knowledge it will result in a minimum \$250 deduction on rate.**

**\*\*If appointments are missed & needs rescheduled, NO layover will be paid**

**\*\*BY SIGNING THIS RATE CONFIRMATION AND HAULING THIS LOAD YOU ARE AGREEING TO ALL GUIDELINES LISTED ABOVE!\*\***

Please contact Kirsch on any load /unload or transit issues.  
Thank you and drive safe.

Ernest

745

964-376-1022

543877

*Joey Cimbaleric*



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☒ (X) Accept

☐ ( ) Decline

SHIPPER NO. 00736855

SOLD TO  
INGERSOLL RAND  
P.O. BOX 200

DAVIDSON NC 28036-9721  
United States

CARRIER NO. XXXX  
CARRIER NAME XXXX  
THIRD PARTY ☐ COLLECT ☐ XX PREPAID ☐

PORT OF PANAMA CITY DIST CTR  
PANAMA CITY FL 32404

If the decision moves between two points by chance by weeks, the law requires that the bill of lading shall state whether it is "charter" or "shipper's receipt."

Agent or Cashier	Per
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ACCIDENT, 1981

101

AGENT, THE

Per \_\_\_\_\_  
(The signatory here acknowledges  
only the amount prepaid)  
Charges Accepted



Straight bill of lading form Original not Negotiable

Bill of Lading Number  
M000007019Freight Terms  
THIRD PARTYPickup Stop: 1/1 Shipper:  
SONOCO  
1323 NORTH MAIN STREET, HRS  
0700 - 2300 M-F  
MT. PLEASANT, TN 38474For freight payment, send bill to:  
Trane Technologies C/O US Bank Dept  
TRA P.O. Box 3001 Naperville, IL 60566-  
7001Planned Ship Date  
19-DEC-24

## Delivery Stop Information

Stop  
2AADVANTAGE  
RELOCATION PORT  
7701 COMMERCE BLVD  
PANAMA CITY, FL 32405,  
USA

PCS: 13

WGT: 7800

SCAC Code:

KIAT - KIRSCH  
TRANSPORTATION  
SERVICES, INC

Trailer Number:

W94940

Seal Code:

PRO Number:

TRIP Number:

M000007019

Tour ID:

Tour Sequence#:

Oversized Dim:

Special Instruction:

Emergency Contact:

Reg. No.

QTY	TYPE	HM	DESCRIPTION	WEIGHT	NMFC
13	PALLET_N O_STACK		AIR CONDITIONING OR HEATING PARTS, SUBASSEMBLIES OR MATERIAL	7800	300.0

COD Amount 0

Remit COD to shipper

COD Fee paid by consignee

PCS: 13

WGT: 7800

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

## SHIPPER CERTIFICATION/DATE

I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled, and are in all respects in proper condition for transport by rail, highway, water according to applicable international and national government regulations.

*Jan Mathew* 12-19-24  
(Signature) (Date)

## Trailer Loaded Freight Counted

☒ By Shipper ☒ By Shipper  
☐ By Driver ☐ By Driver /  
Pallets said  
to contain  
☐ By Driver/pieces

## CARRIER SIGNATURE/ PICKUP DATE &amp; TIME

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

*[Signature]* 12-19-24  
(Signature) (Date)