



## INVOICE

**BILL TO:**  
COMPASS LOGISTICS LLC  
450 WEST 55TH ST  
COUNTRYSIDE, IL 60525

**INVOICE DATE:** 01/08/2025  
**INVOICE #:** R71929  
**TERMS:** NET 30  
**DUE DATE:** 02/08/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/06/2025		3777 Marion Drive, Las Vegas, NV 89115 - 9799 SW Freeman Court, Wilsonville, OR 97070			
		Freight Income	1	\$2,700.00	\$2,700.00

TOTAL
\$2,700.00

**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**



www.compasslogistics.net  
(800) 414-4480

Compass Logistics, LLC  
115 West 55th Street, Suite 401  
Clarendon Hills, IL 60514  
800-414-4480

Contact Brandon Stinson  
(630)948-0241  
b.stinson@compasslogistics.net

Carrier ROYAL 3 INC  
Attn Bill Carson  
Phone (630)485-7370

Van or Reefer	MR1 bol#NYTK25010007 MR3	MR2 PO: 01216866	996 Miles
Pick up	CFS Brands 3777 Marion Drive LAS VEGAS, NV 89115  PR1 PO: 01216866 <u>Pieces</u> 22 <u>Piece Type</u> PALLETS <u>Weight</u> 25,000 <u>Description</u> cookware	Earliest 01/06/25 08:00 Latest 01/06/25 16:00 Contact Phone	
Delivery	Houston's Inc- OR 9799 SW Freeman Court WILSONVILLE, OR 97070  DR1 PO: 01216866	Earliest 01/08/25 07:00 Latest 01/08/25 07:00 Contact Phone	DR2

## Special Instructions

Rate Detail	Quoted Amount	2,700.00	
	Total:	<b>\$2,700.00</b>	Carrier Initials: _____

All invoices must include a signed delivery receipt and be sent to: [accountspayable@compasslogistics.net](mailto:accountspayable@compasslogistics.net)  
Refer to the Load Number on your invoice: **66488**

Compass Logistics, LLC  
115 West 55th Street, Suite 401  
Clarendon Hills, IL 60514  
PH# 800-414-4480 FAX# 800-283-7726

The terms and conditions of this rate confirmation are subject to and made pursuant to a written Broker-Carrier Agreement.

## PLEASE NOTE:

1. Carrier must notify Compass Logistics of any delays 60 minutes prior to detention starting.
2. Detention requests requires a signed BOL/POD with the IN/OUT time, with prior written notice to Compass Logistics of delay.
3. Compass Logistics must be notified of all lumpers - Receipts must be provided within 48 hrs of delivery.
4. All comchecks are a \$10 Fee.
5. Charges may apply for late pick-ups and deliveries.
6. It is the driver's responsibility to ensure that the load is safe, secure and legal for transport.
7. Prior to departure from the shipper, driver shall confirm with Compass Logistics the correct freight was loaded.
8. All trailers must be clean, empty and odor free.
9. Any deviation from dispatch instructions must be called in immediately.
10. Re-brokering, assignment, or interlining of this shipment will void Compass's obligation to pay your freight.
11. Compass pays invoices within 28 days of Compass's receipt of Carrier's invoice and all necessary supporting documents.
12. All invoices must be sent to the address above and include a SIGNED DELIVERY RECEIPT, BOL, and ORDER #. Failure to

For internal use only	Order# 103694
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submit invoices and supporting documents in the manner requested will delay payment.

13. SCANNED LEGIBLE PODS are required as part of our billing process. PHOTOS of PODS will not suffice.

14. All accessorial charges set forth in Schedule A of the Broker-Carrier Agreement shall supersede any such charges set forth herein.

The undersigned has the authority to execute this Rate Confirmation and acknowledges it is correct and accepts the above referenced shipment on behalf of Broker and pursuant to a written Broker-Carrier Agreement. It is agreed that the charges indicated above include all costs and fees in connection with the shipment as described. Carrier understands that a minimum of \$100,000.00 in cargo insurance is required unless otherwise noted in the Broker-Carrier Agreement. Invoicing by Carrier and payment by the Broker, constitutes acceptance of this Rate Confirmation and signatures hereto create a binding contract for carriage shipment.

Carrier Signature: Mateo Utvic Date: \_\_\_\_\_

219 0438  
219 3801

Date January 6, 2025

**BILL OF LADING – NOT NEGOTIABLE**

<b>SHIP FROM</b>  <b>CFS BRANDS</b> <b>3777 Marion Drive</b> <b>Las Vegas, NV 89115</b> <b>Phone: 702-751-0042</b> <b>Maggie</b>		<b>bol#NYTK25010007</b>  <b>PO: 01216866</b>
<b>SHIP TO</b>  <b>1772985- ST HOUSTON'S INC-OR</b> <b>9799 SW FREEMAN COURT</b> <b>WILSONVILLE OR, 97070</b> <b>TEL:503-582-2401</b>		<b>Carrier Name: kayla</b> Trailer number: Serial number(s): <i>ULINE 56032488</i>
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>  <b>Kayla Logistics Corp</b> <b>150-16 132nd Avenue</b> <b>Jamaica, NY 11434</b> <b>Office: 347-535-1150</b>		<b>SCAC:</b>
<b>CARRIERS MUST CALL HOUSTONS RECEIVING AT 503-582-2401 48 HOURS IN ADVANCE OF DELIVERY FOR APPOINTMENT.</b>		<b>Freight Charge Terms</b> (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.

CUSTOMER ORDER INFORMATION				
<b>**1 X 53 FT TRUCKLOAD**</b>	<b># of Cartons</b>	<b># of Pallets</b>	<b>Weight</b>	<b>Additional Shipper Information</b>
<b>Grand Total:</b>		22	25,000 lbs..	<b>Class 125</b>

CARRIER INFORMATION										
Handling Unit		Package						LTL Only		
Qty	Type	Qty	Type	Weight	HM (X)	Commodity Description			NMFC No.	Class
	Ctns	22	Plt	25,000 lbs..	no	Cookware reference to this item, RVNX \$3.00 per pound, NMFC#:059420-03 class 125				
						cookware			<b>059420-03</b>	<b>125</b>

**NO CHARGES ARE TO BE APPLIED OR BILLED TO CONSIGNEE. ALL ACCESORIALS, DETENTION CHARGES, INSIDE DELIVERY, SERVICE DELAYS AND RETURNS, MUST BE APPROVED BY KAYLA LOGISTICS AT 347-535-1150 AT TIME OF DELIVERY**

**COD Amount: \$** \_\_\_\_\_  
 Fee terms: Collect ☐ Prepaid ☐ Customer check acceptable ☐

Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ per \_\_\_\_\_."

Note: Liability limitation for loss or damage in this shipment may be applicable. See 49 USC § 14706(c)(1)(A) and (B).			
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.		The carrier shall not make delivery of this shipment without payment of charges and all other lawful fees. <b>Shipper Signature</b> _____	
<b>Shipper Signature/Date</b> <i>Jessica Davis</i> 1/6/2025 This is to certify that the above named materials are properly classified, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DEPARTMENT OF TRANSPORTATION	<b>Trailer Loaded:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver	<b>Freight Counted:</b> <input type="checkbox"/> By shipper <input type="checkbox"/> By driver/pallets said to contain <input type="checkbox"/> By driver/pieces	<b>Carrier Signature/Pickup Date</b>  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.

219 0438  
219 2801

Date January 6, 2025

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<b>SHIP FROM</b>				<b>bol#NYTK25010007</b>			
CFS BRANDS 3777 Marion Drive Las Vegas, NV 89115 Phone: 702-751-0042 Maggie				PO: 01216866			
<b>SHIP TO</b>				<b>Delivery Acknowledged Before Inspected</b>			
1772985- ST HOUSTON'S INC-OR 9799 SW FREEMAN COURT WILSONVILLE OR, 97070 TEL:503-582-2401				Carrier Name: Kayla Trailer number: Serial number(s): <i>ULINE 56032488</i> <i>22 pallets</i>			
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>				SCAC: <i>Israel Ortiz</i> <i>01-08-25</i>			
Kayla Logistics Corp 150-16 132nd Avenue Jamaica, NY 11434 Office: 347-535-1150							
CARRIERS MUST CALL HOUSTONS RECEIVING AT 503-582-2401 48 HOURS IN ADVANCE OF DELIVERY FOR APPOINTMENT.				Freight Charge Terms (Freight charges are prepaid unless marked otherwise): Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/> <input type="checkbox"/> Master bill of lading with attached underlying bills of lading.			
<b>CUSTOMER ORDER INFORMATION</b>							
<b>**1 X 53 FT TRUCKLOAD**</b>				<b># of Cartons</b>	<b># of Pallets</b>	<b>Weight</b>	<b>Additional Shipper Information</b>
<b>Grand Total:</b>					22	25,000 lbs..	<b>Class 125</b>
<b>CARRIER INFORMATION</b>							
<b>Handling Unit</b>		<b>Package</b>					<b>LTL Only</b>
Qty	Type	Qty	Type	Weight	HM (X)	<b>Commodity Description</b> Cookware reference to this item, RVNX \$3.00 per pound, NMFC#:059420-03 class 125	NMFC No. Class
	Ctns	22	Plt	25,000 lbs..	no	cookware	059420-03 125
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Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."							
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				<b>Carrier Signature/Pickup Date</b> 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.			