



INVOICE

BILL TO:
SPOT FREIGHT INC
141 S MERIDIAN ST STE 200
INDIANAPOLIS, IN 46225

INVOICE DATE: 01/13/2025
INVOICE #: R72382
TERMS: NET 30
DUE DATE: 02/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/10/2025		4194 Cameron Road, Caledonia, NY 14423 - 30602 Goya Road, Brookshire, TX 77423			
		Freight Income	1	\$3,200.00	\$3,200.00

TOTAL
\$3,200.00

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



251 NORTH ILLINOIS STREET
SUITE 1200
INDIANAPOLIS, IN 46204
PH #: 866-971-SPOT (7768)
FAX #: 317-635-6357

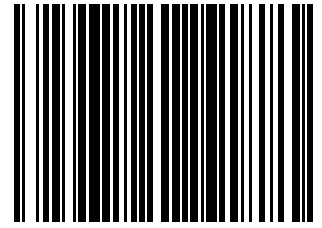
Email: logistics@spotinc.com

Standard

Carrier Rate Confirmation

CARRIER TO CHECK IN WITH AND OBTAIN LOAD
REQUIREMENTS FROM SPOT FREIGHT 866-971-7768
OPTION # 1

S2730486



SHIPMENT DETAILS

Carrier: **ROYAL3 INC C17780**

Shipment #	# of Pick ups	# of Deliveries	Origin	Destination	Team Required
S2730486	1	1	Caledonia, NY 14423	Brookshire, TX 77423	No

Miles	Weight*	Pickup Date & Time	Delivery Date & Time
1577.30	45000.00	1/10/2025 8:00:00 - 1/10/2025 15:00:00	1/13/2025 7:00:00

*This is an approximate weight. Spot Freight will not be held liable if the actual weight does not match the weight on the rate confirmation.

Special Instructions

References

PO - 798154

**SP Reference Number -
1026910**

RATE DETAILS

Description	Type	Units	Method	Rate	Total
Line Haul	Flat	1.00	Flat	\$2,458.67	\$2,458.67
Fuel Surcharge	PerMile	1,577.30	PerMile	\$0.47	\$741.33
					\$3,200.00

FREIGHT DETAILS

Equipment Requirements	Dry (Van)	Shipment Requirements	
	Straps		

Accessorial Policy: All requests for accessorial must be submitted via [MySpot Carrier](#), with a clear, legible copy of the BOL/POD within 24 hours of delivery (unless otherwise specified in the Special Instructions) for more information, [click here](#) and then click on Standard Accessorial Policy.

BY ACCEPTING THIS SHIPMENT FOR TRANSPORTATION, REGARDLESS OF WHETHER SIGNED BELOW, CARRIER AGREES THAT THE [STANDARD TERMS AND CONDITIONS](#) AND THE PROVISIONS ABOVE APPLY ON THIS AND ANY SUBSEQUENT SHIPMENTS TENDERED TO IT BY SPOT FREIGHT (UNLESS A MORE RECENT VERSION OF THESE TERMS AND CONDITIONS IS SUBSEQUENTLY PROVIDED TO CARRIER BY SPOT FREIGHT).

Carrier Name: _____ Date: _____

By its Authorized Agent: _____



Please visit myspotcarrier.com to update information on this shipment.

