



INVOICE

BILL TO:
GREENLINE LOGISTICS
5100 POPLAR AVE SUITE 502
MEMPHIS, TN 38137

INVOICE DATE: 01/27/2025
INVOICE #: R74491
TERMS: NET 30
DUE DATE: 02/27/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/24/2025		1881 W Seltice Way, Post Falls, ID 83854 - 5500 Stateline Road, Southaven, MS 38671			
		Freight Income	1	\$4,400.00	\$4,400.00

TOTAL
\$4,400.00

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



Rate Confirmation

Reference: 32033

Carrier: Royal3 Inc

01/22/2025 13:00

Origin:	POST FALLS WAREHOUSE 1881 W SELTICE WAY POST FALLS, ID 83854 phone: fax: email: Comments:
Pickup:	Appointment: 01/24/2025 08:00 - 01/24/2025 12:00
Destination:	BUCK'S BARGAIN CENTER 550A STATELINE ROAD Southaven, MS 38671 phone: fax: email: Comments:
Delivery:	Appointment: 01/27/2025 08:00 - 01/27/2025 14:30
Bill To:	Greenline Logistics PO Box 18134 Memphis, TN 38181 Greenline phone: 901-306-3313 fax: email: invoice@shipgreenline.com

Comments

Driver is responsible for ensuring the load is properly secured with load bars and/or straps, and sealed.

If Temp Control load:

- Pre-cool trailer prior to arrival at shipper
- Driver should check BOL to ensure temp listed on the BOL matches temp listed in the Item Description section below. If BOL temp does not match Item Description below, contact Greenline prior to accepting shipment

Equipment

Van - 53 ft (V)

Services

Items

Item ID	HM	Description	Weight	Class	NMFC	Dimensions
GENERAL MECHANDISE		GENERAL MECHANDISE	38000.0	85.0		

References

Reference Type	Reference Value
PO Number	1.17.2025 POST FALLS BUCKS
PRO	32033-1

Stop 1 (pickup)

Appointment: 01/24/2025 08:00 - 01/24/2025 12:00	Appointment Number:
POST FALLS WAREHOUSE, 1881 W SELTICE WAY, POST FALLS, ID 83854	
Phone: Fax:	
38,000 lb	28.0 PLT

Stop 2 (drop)

Appointment: 01/27/2025 08:00 - 01/27/2025 14:30	Appointment Number:
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Rate Confirmation

Reference: 32033

Carrier: Royal3 Inc

01/22/2025 13:00

BUCK'S BARGAIN CENTER, 550A STATELINE ROAD, Southaven, MS 38671		
Phone: Fax:		
	38,000 lb	28.0 PLT

Contact Greenline if you encounter any delays. In the event of possible detention, you must notify Greenline 30 minutes before detention begins. ALL ACCESSORIAL FEES MUST BE REPORTED WITHIN 24 HRS OF DELIVERY, RECEIPTS MUST BE PROVIDED. Invoices MUST reference Greenline's Load Number. Upon delivery send signed POD, Lumper receipts, and any other documents showing Over Short or Damages to invoice@shipgreenline.com.

Freight Terms

Charge Details

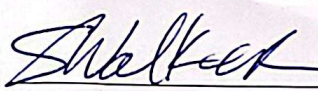

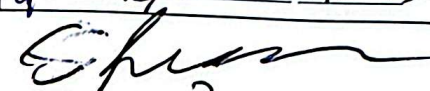
Description		Rate	Quantity	Charge
Linehaul	3572.0	Flat Rate		\$3572.0
Discount	0.0	Flat Rate		\$0.0
Fuel Surcharge	0.4	Per Mile	2070.0	\$828.0
			Total:	\$4400.0

Freight Terms: 4400.0, Third Party (38000.0 lb) (2070.0 miles)

Special Instructions

PICKUP: POST FALLS, ID 1/24 FCFS BETWEEN 1000 - 1300 DELIVERY: SOUTHAVEN, MS 1/27 FCFS BETWEEN 0800 - 1430

Greenline Logistics, Inc. tenders the shipment described to the Carrier on behalf of the above-named Shipper. Acceptance of this order for service constitutes confirmation by the Carrier that the Carrier possesses the proper legal authority to transport the shipment and that the carrier has insurance as required by law. The rate and/or charge quoted by the Carrier and shown herein is confirmed by Carrier to be the rate and/or charge which will apply to this shipment. By accepting this shipment at the rate quoted, the carrier agrees to hold harmless the Shipper, Greenline Logistics, Inc. and the Consignee from any additional charges related to this shipment for any reason whatsoever, unless authorized in writing by Greenline Logistics, Inc. Further, payment to Greenline Logistics, Inc. by Shipper or Consignee constitutes payment to the Carrier.

Date: 24 Jan 2025		BILL OF LADING		Page 1	
SHIP FROM Name: POST FALLS WAREHOUSE Address: 1881 W SELTICE WAY City/State/Zip: POST FALLS, ID 83854 Contact: Phone:			Bill of Lading Number: 32033 Equipment: Van - 53 ft (V), Services:		
SHIP TO Name: BUCK'S BARGAIN CENTER Address: 550A STATELINE ROAD City/State/Zip: Southaven, MS 38671 Contact: Phone:			CARRIER NAME: Royal3 Inc SCAC: ZFIH Pro Number: 32033-1 Trailer Number: Seal Number(s): PO Number: 1.17.2025 POST FALLS BUCKS Must Arrive On Date:		
THIRD PARTY FREIGHT CHARGES BILL TO: Name: Greenline Logistics Address: PO Box 18134 City/State/Zip: Memphis, TN 38181			Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid Collect 3rd Party X		
Special Instructions: PICKUP: POST FALLS, ID 1/24 FCFS BETWEEN 1000 - 1300 DELIVERY: SOUTHAVEN, MS 1/27 FCFS BETWEEN 0800 - 1430			<input type="checkbox"/> (check box) Master Bill of Lading: with attached Underlying Bills of Lading		
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADDITIONAL SHIPPER INFO
GENERAL MECHANISE		28.0	38000.0	Y N	
GRAND TOTAL		28.0	38000.0		
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)
		28.0	PLT	38000.0	
0.0		28.0		38000.0	
				GENERAL MECHANISE,	
				GRAND TOTAL	
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 _____."				COD Amount: \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage is this shipment may be applicable. See 49 U.S.C. 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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.				The above product was loaded and in good condition  Shipper Signature/01/22/2025	
CARRIER SIGNATURE / PICKUP DATE 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.		Trailer Loaded: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain <input type="checkbox"/> By Driver/Pieces	
 1/24/25  Steve Reasoner		Seal # 33233728		CONSIGNEE SIGNATURE / DELIVERY DATE Property described above is received in good order, except as noted.	

Steve Reasoner

Driver

33233728

TIME IN - 10:00 AM
TIME OUT - 2:00 PM