



INVOICE

BILL TO:

SCHNEIDER NATIONAL CARRIERS INC
3101 SOUTH PACKERLAND DRIVE
GREEN BAY, WI 54313

INVOICE DATE: 01/28/2025**INVOICE #:** R74524**TERMS:** NET 30**DUE DATE:** 02/28/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/24/2025		348 2nd St, Wilkes Barre, PA 18702-6900 - 929 Gessner Rd, Houston, TX 77024, USA			
		Freight Income	1	\$2,600.00	\$2,600.00

TOTAL

\$2,600.00

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

Sent at: 01/24/2025 11:44 CST

Download the FreightPower carrier app to provide tracking updates.

Schneider
FreightPower



Contact your Schneider Rep, Mark Ruby

Email: RubyJrM@schneider.com

Phone: +19203576935

Questions: Call at: +1 (855) 476-4786

Schneider's customers require that carriers provide electronic tracking (status updates) via API, EDI, ELD, or mobile app tracking. All loads without successfully accepted electronic tracking will be subject to rejected accessorial payment (including, but not limited to: labor, detention, layover charges, etc.). Receipts will be required for payment verification, even when electronic tracking was successfully accepted.

Rate Confirmation

Route # 4006459637

Mode: Truck

Size: FTL

Total Weight: 8375

Route Type: OTR

Distance: 1576 Miles

of Stops: 2

Origin

WILKES BARRE, PA 18702-6900

Destination

HOUSTON, TX 77024-2515

Date: 1/24/2025

Equipment: Van 53

Special reqs:

Expected Min Temp:

Expected Max Temp:

Temp Setting:

Carrier: ROYAL3 INC

MC#: 944686

DOT#: 2828543

SCAC#: ZFIH

Contact: Mateo

Phone: +16304857370

Email: dispatch@royal3inc.com

Total Rate: \$2,600.00 USD

Notes:

Route Refs:

Vendor Refs:

Stop 1 - Pick Up

INTERMETRO INDUSTRIES CORP
348 2ND ST,
WILKES BARRE, PA 18702-6900

Date/Time: 1/24/2025 07:00 - 16:00

Scheduling: Appointment

Loading Type: Live

Special Reqs:

Pallet Count: Work: No Touch	
MBOL #: CH354619 PO #: 5337 PU #: WDC# 12430354	
Pick Up Instructions: N/A	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
17	Pallet			No	MEDICAL CARTS	0 L x 0 W x 0 H ft	No	No					8,375 lb
Total HU: 17				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 8375 lb			

Stop 2 - Delivery	
MEMORIAL HOSPITAL CITY 929 GESSNER RD, HOUSTON, TX 77024-2515 Date/Time: 1/27/2025 08:00 Scheduling: Appointment Loading Type: Live Pallet Count: Work: No Touch	Special Reqs:
Delivery Instructions: jake - 337-368-6004.	
Facility Notes:	

Commodity Details													
Handling Unit		Pieces		Hazmat	Description	Dimensions	OD	Temp Control	Temp Setting	Pre-Cool To	Min° Temp	Max° Temp	Weight
Qty	Type	Qty	Type										
17	Pallet			No	MEDICAL CARTS	0 L x 0 W x 0 H ft	No	No					8,375 lb
Total HU: 17				Total Pcs: 0			Total Cmdty: 1			Total Wgt: 8375 lb			

Carrier Cost Date: 01/24/2025 11:44 CST
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Cost Type	Currency	Cost Per	Units	Total Cost
Flat Rate	USD	\$2,600.00	1	\$2,600.00
Total Cost				\$2,600.00

Additional Rate Information

Unless otherwise approved by Schneider, the above rate includes all stop-off charges, fuel surcharges, loading, unloading, etc. This rate cannot be changed, modified, or supplemented by reference to any other rates, rules, classification, schedule, or tariff without Schneider's written permission.

Any accessorial not listed above (including, but not limited to, labor, detention, layover charges, etc.) must be pre-approved by Schneider; failure to obtain pre-approval will result in non-payment. Driver detention times charges must be clearly noted on the bill of lading and may only be authorized on electronically tracked Shipments (Schneider's customers require electronic tracking for Shipment updates). Receipts must be provided for any third-party (e.g., lumper) charges. Supporting documentation must be provided or reimbursement may be denied.

Invoice & Documentation Requirements

All invoices and shipment documentation (including, without limitation, bill(s) of lading, clear delivery receipts, and supporting documentation for third-party charges) must be submitted to Schneider per tender instructions no later than ninety (90) days after delivery. FAILURE TO PROVIDE ALL SUCH DOCUMENTS (INCLUDING THE INVOICE) WITHIN SUCH NINETY (90) DAY PERIOD WILL RESULT IN NON-PAYMENT FOR SERVICES.

1 TENDER = 1 INVOICE

Please include the following information on the invoice:

1. Route Number - Route Number must be in the upper right hand corner of all invoices
2. Bill of Lading #, Piece Count, Weight, Shipper and Consignee Address including Postal Code.

Please include the following paperwork with the invoice and e-mail to Submit@invoice.schneider.com:

1. Customer Signed Bill of Lading / Proof of Delivery
2. Other pertinent paperwork to include lumper receipts, etc.
3. Must attach and send in this tender sheet/rate contract with invoice.

E-mail invoice and paperwork for payment to: submit@invoice.schneider.com

All Carrier payments are now processed through [TriumphPay.com](https://triumphpay.com)

Please register online in order to receive payments:

1. Go to <https://secure.triumphpay.com>
2. Register your company
3. Connect with Schneider Enterprise Resources
4. Add or change your payment information
5. Control your Money!
6. Must send Notice of Assignment/Release letters to schneider@noa.triumphpay.com



Get Paid Now!

Login to TriumphPay.com to take advantage of our
2 Business Day Quick Pay - 2% fee

Visit our website at <http://www.schneider.com> for up to date available freight

Additional Requirements

1. Schneider does not dispatch the driver. Carrier retains sole control and authority over the driver in all respects including, without limitation, dispatching, routes taken, reference numbers, and service expectations.

2. Carrier is required to adhere to all appointment times set by the Customer (and, if requested by the Customer, ensure that the driver has the necessary technology to provide (and agrees to provide) tracking of the Shipment via electronic tracking).
3. Brokerage of this Shipment by Carrier is prohibited. Any brokerage will void Schneider's obligation to pay Carrier.
4. Carrier's dispatch personnel must notify Schneider immediately of any Shipment related issues that will, or are reasonably likely to, cause Carrier to miss the scheduled pick-up or delivery appointment time. Carrier must contact Schneider (do not call the customer) at 855 476 4786 with any Shipment related concerns.
5. Carrier shall not break the seal, partial the Shipment, or move the Shipment via rail without written consent from Schneider. This will result in non-payment, a claim and/or legal action per the terms of the Master Transportation Agreement
6. Carrier will require the driver to scale Shipment prior to departing shipper. Carrier is responsible to ensure the Shipment is safe and of legal weight for transit.
7. If Carrier's cargo or automobile insurance policy contains a schedule of covered vehicles or equipment, Carrier will not transport this Shipment using a vehicle and/or equipment that is not listed as scheduled on Carrier's cargo insurance policy, and Carrier's cargo policy must not exclude from coverage any commodities or cargo transported in this Shipment.
8. If this Shipment involves travelling in the State of California, all equipment utilized by Carrier must meet California Air Resources Board Regulations including, without limitation, the Truck and Bus Rule, the Advanced Clean Fleets Rule, and the Heavy-Duty Inspection and Maintenance Rule. By accepting this tender, Carrier represents that it's equipment will comply with such requirements.

Agreement to be Bound

Carrier has read this entire Shipment tender. By accepting this Shipment Tender and transporting the Shipment (even without a signature on this Shipment Tender), Carrier agrees it is bound to, and agrees to comply with, all statements, special services, work assignments, terms and conditions, and other requirements contained herein. In addition to the terms contained in this Shipment Tender, this Shipment shall be governed by the terms and conditions of the Master Transportation Agreement between Broker and Carrier, which are deemed incorporated herein.

BILL OF LADING					BOL NO: CH354619 Carrier: Schneider Logistics Pickup Date: 01-24-2025	
Ship From					Origin Terminal	
InterMetro Industries Corporation 348 2nd St Wilkes-Barre, PA 18705 Jamie Zimmerman					P: F: <div style="text-align: center; background-color: #d3d3d3;">Destination Terminal</div> P: F:	
Ship To					References: PO Number: 5337 Pick Up Number: WDC# 12430354	
Memorial Hospital City 921 Gessner Rd LOADING DOCK Houston, TX 77024 JAKE HODGE 337-368-6004						
Freight Charges Bill To						
OptiFreight Logistics 7000 Cardinal Place Dublin, OH 43017						
Special Instructions: ***All accessorial charges bill to OptiFreight Logistics.*** 17 SKIDS - 8 @ 32x49x84, 6 @ 32x29x84, 1 @ 32x69x84, 1 @ 48x40x19, 1 @ 43x44x48 - 5,375# total***Include Liability Coverage \$65,791.55***DO NOT DOUBLE STACK // NO TOP FREIGHT // HANDLE WITH CARE***Dock to Dock***Del Appt Required: JAKE HODGE AT 337-368-6004- BLUE BIN PROJECT					Freight Terms Prepaid Collect 3rd Party X	
Accessorials:						
Quantity	Type	Weight	HM (X)	NMFC	Item Description <small>(Identification Number (UN or NA), Proper Shipping Name, Hazard Class, Packing Group, per 172.101, 172.202, 172.203)</small>	LTL Class
17.0	PLT	5375.0		81570 -3	CARTS/TRAYS AND ACCESSORIES (99 ctns) Dimensions:	125.0
17.0		5375.0			GRAND TOTALS:	
<small>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 _____."</small>						
Remit COD to:						
Collect _____ Prepaid _____ Customer check acceptable _____ COD Amount:						
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).						

Jamie Zimmerman 1/22/25

12430354