



## INVOICE

**BILL TO:**  
TOTAL QUALITY LOGISTICS LLC  
4289 IVY POINTE BLVD  
CINCINNATI, OH 45245

**INVOICE DATE:** 01/29/2025  
**INVOICE #:** R74917  
**TERMS:** NET 30  
**DUE DATE:** 03/01/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/28/2025		2240 Northmont Pkwy, Duluth, GA 30096, USA - 3331 80th Ave, Zeeland, MI 49464, USA			
		Freight Income	1	\$1,250.00	\$1,250.00

<b>TOTAL</b>
\$1,250.00

**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**



## TQL RATE CONFIRMATION FOR PO# 31020409

FIND YOUR NEXT LOAD BY VISITING  
[CARRIERDASHBOARD.TQL.COM](http://CARRIERDASHBOARD.TQL.COM)

TO ENSURE PROMPT PAYMENT, SUBMIT THIS RATE CONFIRMATION, COMPLETE BOL(S)/POD, RECEIPTS AND OTHER APPLICABLE PAPERWORK WITHIN 24 HOURS OF DELIVERY TO [CINVOICES@TQL.COM](mailto:CINVOICES@TQL.COM). FOR OTHER OPTIONS, SEE NEXT PAGE.

### TQL CONTACT INFO

Name	Phone	Email	Fax
Griffin Marr	800-580-3101 x38880	GMarr@TQL.com	0

### CARRIER CONTACT

Office Staffed 24/7

MC#/DOT#	Name	Phone	Terms	Fax
944686 / 2828543	ROYAL3 INC (il)	630-485-7370	28DAYS	630-845-7370

#### Address

COMPASS FUNDING SOLUTIONS PO BOX 205154 DALLAS, TX 75320-5154

Dispatcher	Driver	Truck #	Trailer #
sam	henry	757	w94929

### LOAD INFORMATION

Rate	Type	Unit	Quantity	Total
\$1,250.00	Line Haul	Flat	1	\$1,250.00

Rates that are based on weight or count will be calculated from the quantities loaded.

**Total: \$1,250.00 USD**

Mode	Trailer Type	Trailer Size	Linear Feet	Temperature	Pallet/Case Count	Hazmat	Load Requirements
FTL	Van	53 ft			0 pallets/0 cases	Non-Hazardous	
Special Temp Instructions						LxWxH	

Pick-up Location	Date	Time
Duluth, GA	1/28/2025	Appt 08:00 to 15:00

#### Commodities:

Pick Up #	Quantity	Unit	Commodity	Notes
1	1	Truckload	Non hazmat chemicals	

Delivery Location	Date	Time
Zeeland, MI	1/29/2025	Appt 08:00 to 15:00

### CARRIER RESPONSIBLE FOR

Unloading	None w/ valid unloading receipt	Pallet Exchange	None	Estimated Weight	42900
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**Note to  
Carrier**



T Q Y L



☐ If this box is checked, Carrier is required to mail original paperwork to TQL at the below address.

**CARRIER INVOICE #**

**FOR STANDARD MAIL**

TQL  
PO Box 799  
Milford, OH 45150

**OVERNIGHT INVOICING**

TQL  
1701 Edison Drive  
Milford, OH 45150

**QUICK PAY**

If your default payment terms are not Quick Pay and you would like Quick Pay on this load, please check one of the boxes below. Send your invoice to the Quick Pay email or fax listed below or via one of the document scanning options.

☐ 1 Day Quick Pay 5%

☐ 7 Day Quick Pay 3%

**METHODS TO SUBMIT PAPERWORK**

Submit completed and signed paperwork within 24 hours of delivery.

**EMAIL**

Quick Pay - [Quickpay@tql.com](mailto:Quickpay@tql.com)  
Standard - [cinvoices@tql.com](mailto:cinvoices@tql.com)

**DOCUMENT SCANNING**

[TQL Carrier Dashboard](#) - Send paperwork  
for FREE via our web and mobile app

**FAX**

Quick Pay - 513-688-8895  
Standard - 513-688-8782

**TRANSFLO Express** allows you to scan and send invoices  
and POD's to TQL for \$3.50 from participating truck stops.

TQL must approve all accessorial terms/charges in advance and in writing. Payment of detention is determined on a load-by-load basis. Unauthorized charges will not be paid. Detention payment does not begin for at least 3 hours unless otherwise agreed to in writing. To qualify for additional compensation, the Carrier MUST notify TQL at least 30 minutes before beginning detention time and when arriving-on-time/departing from all shippers/receivers (unless the shipper/receiver will notate check in/out times on the paperwork). TQL reserves the right to deny all additional charges unless communicated in advance writing and invoiced to TQL within 90 days of load completion. All demurrage, detention, and per diem charges must be communicated to TQL in writing within 30 days of load completion in order to validate and/or dispute with the steam ship line directly. TQL reserves the right to deny all demurrage, detention, and per diem charges communicated more than 30 days from invoice date. Carrier must file any disputes in regards to demurrage, detention, and per diem charges in writing with the billing party within 7 days from date of invoice.

### DEFEND AGAINST FRAUD AND THEFT BE WARY OF:

- Cash on delivery loads via Zelle, Cash App, Venmo, etc.
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- Receiving shipment paperwork with TQL's name on it when TQL did not contract you to haul the load

For more information on how to protect yourself against fraud and theft [CLICK HERE](#)

THIS IS AN AGREEMENT BETWEEN TQL AND CARRIER. CARRIER SHALL HAUL THE LOAD AT THE RATE ABOVE. CARRIER SHALL CALL TQL FOR LOAD INFORMATION. IF LOAD IS CHANGED OR CANCELED BY TQL, NO "TRUCK ORDER NOT USED" WILL BE PAID UNLESS TQL HAS PROVIDED THE CARRIER WITH LOAD DETAILS (PICK-UP NUMBER, SHIPPER NAME/ADDRESS AND DRIVER INFORMATION SHEET) AND APPROVED THE CARRIER TO BEGIN DRIVING TOWARDS THE PICK-UP LOCATION. THE SAFE, LEGAL AND PROPER OPERATION OF CARRIER SUPERSEDES ANY REQUEST, DEMAND, PREFERENCE, INSTRUCTION OR INFORMATION PROVIDED BY TQL OR ITS CUSTOMERS WITH RESPECT TO ANY SHIPMENT. IF ANY EMPLOYEE OF TQL OR ITS CUSTOMER REQUESTS, DEMANDS, OR INSTRUCTS CARRIER TO TAKE ANY ACTION THAT VIOLATES ANY LAW, CARRIER SHALL REFUSE TO TRANSPORT THE LOAD AND IMMEDIATELY CONTACT TQL BEFORE TAKING ANY FURTHER ACTION. CARRIER AGREES THAT WHEN IT CHOOSES TO TRANSPORT A LOAD IT DOES SO ON ITS OWN VOLITION, EXERCISING ITS OWN DISCRETION WITHOUT COERCION OR UNDUE INFLUENCE BY ANY INDIVIDUAL OR ENTITY. BY SIGNING THIS RATE CONFIRMATION AND/OR PERFORMING SERVICES FOR BROKER, CARRIER AFFIRMS THAT IT MAINTAINS KNOWLEDGE OF AND COMPLIANCE WITH ALL FEDERAL, STATE, AND LOCAL LAWS AND REGULATIONS, WHICH INCLUDES, BUT IS NOT LIMITED TO, ANY LAWS OR REGULATIONS RELATED TO CARB COMPLIANCE, THE CALIFORNIA TRANSPORT REFRIGERATION UNIT (TRU) OR AIRBORNE TOXIC CONTROL MEASURE (ATCM). CARRIER AFFIRMS THAT ALL OF ITS APPLICABLE EQUIPMENT TRAVELLING TO, FROM, OR WITHIN CALIFORNIA IS IN COMPLIANCE WITH CARB RULES AND REGULATIONS OR ANY OTHER SIMILAR REGULATIONS IN OTHER STATES WHEN TRAVELLING TO, FROM, OR WITHIN SUCH OTHER STATES. CARRIER FURTHER AFFIRMS THAT ALL EQUIPMENT IN ITS FLEET, INCLUDING ANY TRU EQUIPMENT, FURNISHED WILL BE IN COMPLIANCE WITH THE IN-USE REQUIREMENTS OF ALL OF CALIFORNIA'S TRU REGULATIONS AND, IF APPLICABLE, ANY ADDITIONAL REQUIREMENTS REQUIRED OF BROKER'S CUSTOMER. CARRIER WILL BE RESPONSIBLE FOR ANY AND ALL FINES ASSESSED AGAINST ANY PARTY FOR CARRIER'S FAILURE TO ADHERE, IN WHOLE OR IN PART, TO ANY REGULATION OR LAWS. THIS RATE CONFIRMATION IS INCLUSIVE OF ALL CHARGES.

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CARRIER AGREES TO THE DATA PROCESSING AGREEMENT ("DPA") FOUND AT [HTTPS://WWW.TQL.COM/CARRIER-DATA-PROCESSING-AGREEMENT](https://www.tql.com/carrier-data-processing-agreement) (OR A COPY WILL BE PROVIDED UPON WRITTEN REQUEST TO [COMPLIANCE@TQL.COM](mailto:COMPLIANCE@TQL.COM)), WHICH DPA IS INCORPORATED HEREIN BY REFERENCE.

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\_\_\_\_\_  
Carrier Representative Signature

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Name\* S/ **samm stanojevic**





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Carrier Representative Signature

\*By electronically signing below and acknowledging acceptance, I confirm I have the authority to act on behalf of, and bind the undersigned individual and/or entity and have agreed to the terms

Name\* S/ **samm stanojevic**



T Q Y L





# DRIVER/CARRIER INFORMATION SHEET TQL PO# 31020409

**Pickup Dates**  
1/28/25

**Delivery Dates**  
1/29/25

## TQL CONTACT INFO

Name	Phone	Email	Fax
Griffin Marr	800-580-3101 x38880	GMarr@TQL.com	0

## CARRIER CONTACT

Name	Dispatcher	Driver
ROYAL3 INC (il)	sam	henry

## LOAD INFORMATION

Mode	Trailer Type	Trailer Size	Temperature	Pallet/Case Count	Hazmat	Load Requirements
FTL	Van	53 ft		0 pallets/0 cases	Non-Hazardous	

Special Temp Instructions

## CARRIER RESPONSIBLE FOR

<b>Unloading</b>	None w/ valid unloading receipt	<b>Pallet Exchange</b>	None	<b>Estimated Weight</b>	42900
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## PICKUPS

Shed	City	State	Zip	PU#	Date	Time								
TR Chem Solutions	Duluth	GA	30096		1/28/2025	Appt 08:00 to 15:00								
<div>Information:</div> <div>2240 Northmont Pkwy Duluth GA 30096</div> <div>Commodities:</div> <table><thead><tr><th>Quantity</th><th>Unit</th><th>Commodity</th><th>Notes</th></tr></thead><tbody><tr><td>1</td><td>Truckload</td><td>Non hazmat chemicals</td><td></td></tr></tbody></table>							Quantity	Unit	Commodity	Notes	1	Truckload	Non hazmat chemicals	
Quantity	Unit	Commodity	Notes											
1	Truckload	Non hazmat chemicals												

## DROPS

Consignee	City	State	Zip	Delivery PO	Date	Time
QUEST CAR CARE PRODUCTS (ZEELAND, MI)	Zeeland	MI	49464		1/29/2025	Appt 08:00 to 15:00
<b>Information:</b> 3331 80th Ave Zeeland MI 49464 616-772-5100 Call Jason a couple hours before delivery. This is an unmanned warehouse.						





Note to  
Carrier

TQL PO# 31020409

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AGREEMENTS SIGNED BY THE CARRIER AND TQL. THIS AGREEMENT IS AN  
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1/29/25

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Special Temp Instructions

## CARRIER RESPONSIBLE FOR

Unloading	None w/ valid unloading receipt	Pallet Exchange	None	Estimated Weight	42900
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## PICKUPS

Shed	City	State	Zip	PU#	Date	Time								
TR Chem Solutions	Duluth	GA	30096		1/28/2025	Appt 08:00 to 15:00								
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## DROPS

Consignee	City	State	Zip	Delivery PO	Date	Time
QUEST CAR CARE PRODUCTS (ZEELAND, MI)	Zeeland	MI	49464		1/29/2025	Appt 08:00 to 15:00
<b>Information:</b> 3331 80th Ave Zeeland MI 49464 616-772-5100 Call Jason a couple hours before delivery. This is an unmanned warehouse.						



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2

1/28/24

# BILL OF LADING

Page 1

## SHIP FROM

Name: TR Chem Solutions  
Address: 2240 Northmont Pkwy  
City/State/Zip: Duluth, GA 30096  
SID#:

FOB: ☐

Bill of Lading Number: 31020409

BAR CODE SPACE

## SHIP TO

Name: Quest Car Care Product Location #: \_\_\_\_\_  
Address: 3331 80<sup>th</sup> Ave  
City/State/Zip: Zeeland, MI 49464  
CID#:

FOB: ☐

CARRIER NAME: TQL

Trailer number:

Seal number(s):

SCAC: TQYL

Pro number:

BAR CODE SPACE

## THIRD PARTY FREIGHT CHARGES BILL TO:

Name: TQL

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

*delivered*

Freight Charge Terms: (freight charges are prepaid unless marked otherwise)

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ 3<sup>rd</sup> Party \_\_\_\_\_

☐  
(check box)

Master Bill of Lading: with attached underlying Bills of Lading

## CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# UNITS	WEIGHT	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
423	18	42900	Y	N	Detergent Compound Solution
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL					

## CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. ( )	COMMODITY DESCRIPTION <small>Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(a) of NMFC Item 366</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC #	CLASS
	Pallet	18	Units	42900		Detergent Compound Solution		
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: ☐ Prepaid: ☐

Customer check acceptable: ☐

**NOTE Liability Limitation for loss or damage in 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, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Signature \_\_\_\_\_ Shipper

## SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the U.S. DOT.

*[Signature]* 1-28-24

## Trailer Loaded:

- ☐ By Shipper  
☐ By Driver

## Freight Counted:

- ☐ By Shipper  
☐ By Driver/pallets said to contain  
☐ By Driver/Pieces

## CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required documents. Carrier certifies emergency response information was made available and/or carrier has the U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

*Truck 757*  
*1-28-23*