



INVOICE

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

INVOICE DATE: 02/25/2025
INVOICE #: R78793
TERMS: NET 30
DUE DATE: 03/25/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/24/2025		2622 9th Avenue, Watervliet, NY 12189 - 571 Hollow Road, Phoenixville, PA 19460			
		Freight Income	1	\$710.00	\$710.00

TOTAL
\$710.00

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

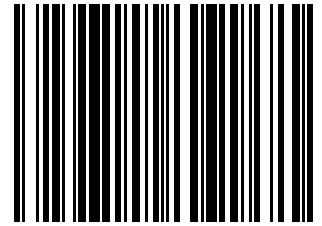
Email: logistics@spotinc.com

Standard

Carrier Rate Confirmation

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

S2826636



SHIPMENT DETAILS

Carrier: **ROYAL3 INC C17780**

Shipment #	# of Pick ups	# of Deliveries	Origin	Destination	Team Required
S2826636	1	1	Watervliet, NY 12189	Phoenixville, PA 19460	No

Miles	Weight*	Pickup Date & Time	Delivery Date & Time
238.60	30605.96	2/24/2025 14:00:00	2/25/2025 6:00:00

*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

D2765334: DRY & CLEAN TRAILER REQUIRED - must have straps

References

PO - 6053786

BOL/LOAD - 3536074

RATE DETAILS

Description	Type	Units	Method	Rate	Total
Line Haul	Flat	1.00	Flat	\$593.09	\$593.09
Fuel Surcharge	PerMile	238.60	PerMile	\$0.49	\$116.91
					\$710.00

FREIGHT DETAILS

Equipment Requirements	Dry (Van)	Shipment Requirements	Trailer Picture
	Straps		
	No Roll Up Doors		

Stop #1	MORCON TISSUE 2622 9th Avenue Watervliet, NY 12189					
Pickup:	2/24/2025 14:00:00					
Load Style:	Live					
Distance:	0					
Order :	D2765334					
Directions:						
Carrier						
Instructions:						
Driver Instructions:						

Total Weight*	Packaging (Count)	Stackable?	Description	Cargo Classification	Commodity Code	Product Code
30605.96	Skid (28)	No	Paper products			

Stop #2	Sheppard Redistribution (OAKS) 571 Hollow Road Phoenixville, PA 19460					
Dropoff:	2/25/2025 6:00:00					
Load Style:	Live					
Distance:	238.6					
Order :	D2765334					
Directions:						
Carrier						
Instructions:						
Driver Instructions:						

Total Weight*	Packaging (Count)	Stackable?	Description	Cargo Classification	Commodity Code	Product Code
30605.96	Skid (28)	No	Paper products			

*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.

IMPORTANT NOTES- THIS FREIGHT IS NOT TO BE CONSOLIDATED WITH ANY OTHER FREIGHT WITHOUT WRITTEN PERMISSION FROM SPOT FREIGHT, INC ("SPOT"). THE PROVIDED RATE IS FOR EXCLUSIVE USE OF EQUIPMENT ONLY. FINES MAY APPLY.

Tracking: All shipments must be on automated tracking prior to loading and throughout transit. NO EXCEPTIONS. Any load that is not on automated tracking is not eligible for accessorial compensation of any kind (detention, layover, out of route miles, stop charge, TONU, etc.) Carrier will also be charged a non-compliance fee, a minimum of \$150, for not accepting tracking.

Sealed Loads: If driver breaks seal without permission, does not properly apply the seal or fails to notify Spot that a seal was not provided, Carrier agrees to pay claimant for full value of the freight. Carrier is responsible for freight charges to return rejected product to re-consigned location specified by Spot. Carrier will also be responsible for any consequential damages, production downtime or other claims related to broken seals, failure to seal load, late delivery, or other service failures.

Just In Time Freight: Late loads risk production issues including, and not limited to, late delivery fines, production downtime claims and rejected loads. Carrier is responsible for returning load in the instance of a rejected load. Spot reserves the right to repower trailer in the event of a breakdown, accident, HOS issues or if the driver is behind on scheduled delivery time.

Standard Pay Process: Email spotbilling@spotinc.com with shipment number in subject line with required paperwork or upload to [MySpot Carrier](#) for standard payment. [Click here](#) for details and further information.

Quick Pay Process: If you are interested in Quick Pay, please [click here](#) for details.

Lumper Reimbursement Process: Receipts must be sent to spotbilling@spotinc.com or uploaded to [MySpot Carrier](#) within two business days of delivery unless stated otherwise in the special instructions on your Rate Confirmation. For further details please [click here](#).

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: Mateo Utvic



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

Date: 2/24/2025

BILL OF LADING

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CARRIER INFORMATION

CARRIER INFORMATION							LTL ONLY	
HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	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(e) of NMFC Item 360</small>	NMFC	CLASS
QTY	TYPE	QTY	TYPE					
1	Stackable Plts	60	Case	1,098		W12350 Morsoft White Hardwound Towel (60) Lot#: WO301		
3	Stackable Plts	180	Case	3,528		W6800 Morsoft White Hardwound Towel (60) Lot#: WO393		
3	Stackable Plts	180	Case	3,528		W6800 Morsoft White Hardwound Towel (60) Lot#: WO425		
1	Stackable Plts	45	Case	843.75		SCH610 Society Hill TAD towel, 6 rolls per case 550ft 10 Lot#: PA-TAD-HB-000-0		
12	Stackable Plts	540	Case	10,125		SCH610 Society Hill TAD towel, 6 rolls per case 550ft 10 Lot#: WO399		
28		1,615		30,582.75	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.

SHIPPER SIGNATURE / DATE

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

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 placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent. Property described above is received in good order, except as noted.

Date: 2/24/2025

BILL OF LADING

SHIP FROM Name: Morcon Inc. c/o Stone Management - Watervliet Address: 2622 9th Ave City/State/Zip: Watervliet, NY 12189 Vendor #: _____ SID #: _____		Bill of Lading #: 00000000000016056 
SHIP TO Name: Sheppard Redistribution (Oaks) Address: 571 Hollow Road City/State/Zip: Phoenixville, PA 19460 Phone: _____ CID #: _____		Carrier Name: SPOT INC Trailer #: 242130 Seal #: 0027020 Sheppard Enterprises Date: 2/25/25 Pieces: 1615 ALL SHIPMENTS SUBJECT TO RECOUNT UPON PUT AWAY Signature: <i>[Signature]</i>
THIRD PARTY FREIGHT CHARGES BILL TO Name: _____ Address: _____ City/State/Zip: _____ Phone: _____		SCAC: <i>SPK</i> Pronumber: <i>1615</i> Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid: _____ Collect: _____ 3rd Party: X
SPECIAL INSTRUCTIONS 		

CUSTOMER ORDER INFORMATION					ADDITIONAL SHIPPER INFORMATION
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET Yes / No		
REF#: SO713 PO#: 6053786	1,615	30,582.75			
GRAND TOTAL	1,615	30,582.75			

CARRIER INFORMATION											
HANDLING UNIT		PACKAGE							LTL ONLY		
QTY	TYPE	QTY	TYPE	WEIGHT	H.M. (X)	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(e) of NMFC Item 360</small>				NMFC	CLASS
1	Stackable Pkts	60	Case	1,440		400WY-60 Hardwound Towel (60) Lot#: ACI-17066					
2	Stackable Pkts	120	Case	2,880		400WY-60 Hardwound Towel (60) Lot#: ACI-1100					
1	Stackable Pkts	70	Case	840		5050VN-70 No Description Available Lot#: 5050VN-BON-OV					
4	Stackable Pkts	360	Case	6,300		VT1106-90 Multi-fold Towel 1 Ply Lot#: PTS-16999-3					

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 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.			
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in the proper condition for transportation according to the applicable regulations of the Department of Transportation		Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/ pallets said to contain <input type="checkbox"/> By Driver/Pieces	
		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. Property described above is received in good order, except as noted.	