



## INVOICE

**BILL TO:**

GREATWIDE AMERICAN TRANS-FREIGHT  
2150 CABOT BLVD WEST  
LANGHORNE, PA 19047

**INVOICE DATE:** 02/24/2025**INVOICE #:** R78220**TERMS:** NET 30**DUE DATE:** 03/24/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/20/2025		11600 Philadelphia Ave, Mira Loma, CA 91752 - 11441 N.W. 107 Street, Miami, FL 33178			
		Freight Income	1	\$5,000.00	\$5,000.00

**TOTAL**

\$5,000.00

**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**

Greatwide American TransFreight, LLC  
BROKERAGE SERVICES  
CONTRACT CARRIER AGREEMENT  
<http://www.ATFGW.com>  
**Dispatched by:OLIVIA**

**Pro :G4149649-S**  
**Customer Ref:15558336**

Carrier:ROYAL 3 INC  
6850 W 63RD ST  
Chicago,IL. 60638

Carrier Contact: Samm  
Tel: (630) 485-7370  
Fax:  
Email:samm@royal3inc.com

PU/SO	Stop Address	Phone	Contact	Date Time	PU/Del #
PU	E. Mishan & Sons 11600 Philadelphia Ave Mira Loma, CA 91752			Appt Set: 2/20/2025 2:00:00 PM	15558336
SO	PriceSmart Dry-Medley 11441 N.W. 107 Street Miami, FL 33178			Appt Set: 2/24/2025 11:00:00 AM	APT# 1337152 (PO 15558336)

**Line Items:**

Description	PCS	Weight	PO	Supplier	P/U Location	Del location
15558336	52	31304	15558336		E. Mishan & Sons	PriceSmart Dry-Medley
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	Totals 52	31304				

**Driver Info:**

Driver: HENRY, LERONE ANDRE Cell: (813) 445-2185 Truck: 757 Trailer: W94929

**Load Type:** TL      **Trailer Type:** Van

**Agreement**

**Carrier Pay:** \$5000.00

**Special Instructions**

\*\*\*\*BOL/POD MUST be emailed to [imaging@atfgw.com](mailto:imaging@atfgw.com) within 24 hours after delivery to Consignee. Driver must verify piece count and weight on the Bill of lading matches this tender at each stop. Failure to report any variance could result in a reduction of revenue paid on this order. Macropoint tracking is required. Providing an invalid cell number for Macropoint, or disabling tracking prior to completing delivery will result in a rate reduction of \$200.

Submit Carrier Invoice, Signed Proof of Delivery, Original Bill of Lading and a copy of the rate agreement  
Carrier shall not sub-contract, broker or arrange for any third party transportation. We must be notified immediately of any problems such as delays, OS&D, detention, diversion, reconsignment or refusals. No payment will be made to carriers on detention, truck order not used, or damaged claims until we are paid. When Loading and/or unloading, any back charges or service failure claims will be deducted from your freight bill.

SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**Bill to:**

Greatwide American TransFreight, LLC  
2150 Cabot Blvd. W  
Langhorne,PA.19047  
(616) 272 3014

Greatwide American TransFreight, LLC  
BROKERAGE SERVICES  
CONTRACT CARRIER AGREEMENT  
<http://www.ATFGW.com>  
**Dispatched by:OLIVIA**

**Pro :G4149649-S**  
**Customer Ref:15558336**

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**Fax back to:(313) 748-1183**

**Bill to:**  
Greatwide American TransFreight, LLC  
2150 Cabot Blvd. W  
Langhorne,PA.19047  
(616) 272 3014

**E. MISHAN & SONS**

813-445-2185

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Pick Ticket#: 2705552

Date: 02/20/2025 @ 2:40 PM

**BILL OF LADING**

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**SHIP FROM**

Name: Emson C/O DCG Fulfillment  
Address: 11600 Philadelphia Ave,  
City/State/Zip: Mira Loma, CA 91752  
SID#

Bill of Lading Number: 3500365

FOB: ☐

Dept#: XDEPT

REF#: SH55846

**SHIP TO**

Name: PRICESMART INC. MIAMI  
DISTRIBUTION  
Address: 11441 NW 107TH STREET  
City/State/Zip: MIAMI, FL 33178  
CID# Vendor#: 39752

CARRIER NAME: *freemove*Trailer Number: *W94929*Seal Number(s): *8308813*SCAC: *ATL*

Pro Number:

Attach Pack-List with Shipment.

Consignee LEAD CTN contains

ADDITIONAL Pack-List.

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

Prepaid ☐Collect ☒3rd Party ☐
☐ Master Bill of Lading with attached underlying  
(check box) Bills of Lading
**THIRD PARTY FREIGHT CHARGES BILL TO**

Name: *1337152*  
Address:  
City/State/Zip:

SPECIAL INSTRUCTIONS

**CUSTOMER ORDER INFORMATION**

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
PO# 15558336	52	31,304 LBS	<input checked="" type="radio"/> Y <input type="radio"/> N	
			<input type="radio"/> Y <input type="radio"/> N	
			<input type="radio"/> Y <input type="radio"/> N	
			<input type="radio"/> Y <input type="radio"/> N	
			<input type="radio"/> Y <input type="radio"/> N	
GRAND TOTAL	52	31,304 LBS		

APPT TIME 2 PM  
IN 2:00  
OUT 3:50  
DRIVERS INT *LT*

**CARRIER INFORMATION**

HANDLING UNIT	PACKAGE	WEIGHT	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY
QTY	TYPE	QTY	TYPE		NMFC# CLASS
52	CTN		LBS	6278MU-54 G STONE BGE SP NESTI	70
52 PLS	52			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.

03 05 25--03 12 25

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.

*Carpeted 2/20*

Trailer Loaded

Freight Counted

☒ By Shipper☐ By Shipper☐ By Driver☒ 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 U.S. DOT emergency response guidebook or equivalent documentation in the vehicle.

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

Powered by YCS

Appt: Time In

Time Out

Created: 02-19-25 16:38 v6.3

*Pay 913 encl. Truck 757*