



INVOICE

BILL TO:
GILTNER LOGISTICS INC
834 FALLS AVE SUITE 1220
TWIN FALLS, ID 83301

INVOICE DATE: 04/04/2025
INVOICE #: B84901
TERMS: NET 30
DUE DATE: 05/04/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
04/04/2025		726 Cassville White Rd NW, Cartersville, GA 30121, USA - 2393 Park Center Dr, Mebane, NC 27302, USA			
		Freight Income	1	\$200.00	\$200.00

TOTAL
\$200.00

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



GILTNER LOGISTICS, INC.
DOCS@GILTNER.COM
PO BOX 5129
TWIN FALLS ID 83303

PRO # 1292096

Rate Confirmation

04/04/25 13:52:08 (EST)

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HEATHER BRADFORD
(423) 475-6325
(208) 914-7181 (f)
chattdispatch@giltner.com

BRZ
(708) 303-5150 (p) Att: JOHN

MC #	86875	Truck #
DOT	3119062	Trailer #
Driver	JOHNATHAN	Cell # (786) 312-3845

Size & Type: 53' VAN
Pieces: 121

Description: DRY ITEM
Weight: 3428

Miles: 393

CHARGES		DISPATCH NOTES
LINE HAUL RATE TRUCK ORDERED & NOT USED	200.00	MUST HAVE CLEAN DRY ODORFREE 53FT FOOD GRADE DRY VAN. NO REEFER TRAILERS UNLESS APPROVED BY GILTNER DISPATCH. MUST CONFIRM SEAL ON TLR MATCHES SEAL ON BOL. ONLY THE SHIPPER AND RECEIVER ARE TO BREAK SEALS. MUST HAVE 2 LOADLOCKS. MACROPOINT TRACKING IS REQUIRED FOR DETENTION PAY. IF BOL TEMP INSTRUCTIONS DIFFER THAN WHATS ON THE RATE CON YOU MUST CALL GILTNER IMMEDIATELY.
TOTAL RATE	200.00	

PICK 1

CFS-CARTERSVILLE GA
726 CASSVILLE WHITE RO
CARTERSVILLE GA 30121
Hours : 0700-1600
the Operating Hours to be 7 00 AM to 5 30 PM and the Receivi
ng Hours Monday ? Sa turday 0500-1730. Receiving@cfa-supply.
com to schedule an appointment

Appointment 04/04/25
Appt Notes: ASAP 0700-1600
Pieces: 121
Weight: 3428
Seal # 708-852-5530
Ref # 493006

STOP 1

CFS-MEBANE NC
2393 PARK CENTER DRIVE
MEBANE NC 27302
Hours : 0830-1600
All appointments should be requested through receiving@cfa-s
upply.com . Mon ? Fr i. 8 30AM to 4PM. Please include Destin
ation in subject line when emailing recei ving.For all deliv

Appointment 04/05/25 @ 08:00
Pieces: 121
Weight: 3428
Seal # 708-852-5530
Ref # 493006

****ALL PAPERWORK INCLUDING RECEIPTS AND BOLS ARE REQUIRED TO BE SENT IN TO CHATTDISPATCH@GILTNER.COM WITHIN 48 HOURS OF FINAL DELIVERY DATE/TIME IN ORDER TO BE REIMBURSED FOR ANY ACCESSORIAL, DETENTION OR LAYOVER PAYMENTS.*****

****MACROPOINT MUST BE ACCEPTED ON THIS SHIPMENT PRIOR TO LOADING. FAILURE TO ACCEPT MACROPOINT WILL RESULT IN A \$200 FINE AT TIME OF SETTLEMENT!****

This confirmation governs the shipment/freight movement referenced above as of the date specified and hereby amends, is incorporated by reference, and becomes part of that certain BROKER-CARRIER agreement executed between BROKER and CARRIER. Carrier agrees to sign and return confirmation via fax. Carrier shall be in agreement with rates listed on rate agreement and that any change in the rate agreement between BROKER and CARRIER must have subsequent rate agreement issued by BROKER and signed by CARRIER. Rates include all charges including fuel surcharge. A minimum charge of one hundred dollars shall apply to all missed appointments. No detention will be paid at PU or DEL without 'IN AND OUT TIMES' marked on the bills by SHIPPER or CONSIGNEE and prior approval by BROKER. If this shipment is double brokered, the agreement is VOID. 'PLEASE

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 2625040425129209690
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO #1292096

must appear on all Invoices



GILTNER LOGISTICS, INC.
DOCS@GILTNER.COM
PO BOX 5129
TWIN FALLS ID 83303

PRO # 1292096

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HEATHER BRADFORD
(423) 475-6325
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chattdispatch@giltner.com

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BRZ
(708) 303-5150 (p) Att: JOHN

MC #	86875	Truck #
DOT	3119062	Trailer #
Driver	JOHNATHAN	Cell # (786) 312-3845

FAX SIGNED CONFIRMATION TO FAX NUMBER LISTED IN UPPER RIGHT HAND CORNER OF PAGE**

****NO QUICKPAY WILL BE ISSUED UNTIL AFTER YOU ARE A REGULAR CARRIER AND HAVE HAULED THESE LOADS FOR LONGER THAN ONE MONTH****

****MACROPOINT IS REQUIRED FOR ALL LOADS OR A \$200 FINE CAN AND WILL BE ASSESSED**
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Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 26250404125209698
Sertifi Electronic Signature

Send Carrier Bills to the Address Above

PRO #1292096

must appear on all Invoices

E-Signed : 04/04/2025 12:53 PM CDT

John Djordjevic

john@rtbrz.com
IP: 50.76.79.115

Sertifi Electronic Signature
DocID: 20250404125209696