



INVOICE

BILL TO:
JARRETT LOGISTICS SYSTEMS
1347 N MAIN STREET
ORRVILLE, OH 44667

INVOICE DATE: 04/14/2025
INVOICE #: R85945
TERMS: NET 30
DUE DATE: 05/14/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
04/11/2025		975 Cottonwood Ave, Hartland, WI 53029 - 4795 Commercial Plz, Winston-Salem, NC 27104			
		Freight Income	1	\$2,000.00	\$2,000.00

TOTAL
\$2,000.00

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

Carrier Rate Agreement

Exclusive Use Only

Email: jts_brokers@gojarrett.com

Phone: (866) 654-1106

Pickup Date 4/11/2025

8:00 AM to 3:30 PM

Required Delivery Date 4/14/2025

12:00 AM to 12:00 AM

Effective 04/11/2025

Carrier Royal3 Inc

Total Cost \$2,000.00

Carrier Phone 630-485-7370

Contract # 005020986

JLS	Reference#	Shipper	Consignee	Handling Units	Weight	Mode
5020986	BOL#: 5020986, Customer PO#: 964694, SO:	DORNER MFG 975 COTTONWOOD AVE HARTLAND, WI 53029	Dewey's Bakery Inc dba Salem Baking Co 4795 Commercial Plz Winston-Salem, NC 27104	3	3165	Truckload
Comments:						

Carrier Rate Confirmation incorporates the agreement between Jarrett and the service provider. Current Terms and Conditions can be found at <https://www.gojarrett.com/carrier-terms-conditions> and governs the movement of the above-referenced freight.

FREIGHT BILLS SHOULD BE EMAILED TO: Accounting@gojarrett.com with signed Rate Agreement and signed Bill of Lading as proof of Delivery.

Carrier: Royal3 Inc

Logistics Provider: Jarrett Logistics Systems

By:

By: Jake Snyder

Title:

Title: Assistant Logistics
Coordinator II

Date:

Date: 04/11/2025

Signature:



Signature:



Straight Bill of Lading - Short Form Original - Not Negotiable

BOL# 005020986

SHIPPER NAME:	
Name:	DORNER MFG
Address:	975 COTTONWOOD AVE
City/ST/Zip/Country:	HARTLAND, WI 53029
Contact/Email/Phone #:	Aaron Thompson, aaron.thompson@cmco.com, (262) 369 -1219

CARRIER INFORMATION:	
Name:	Royal3 Inc
Pro #:	
Freight charges are: Prepaid	

CONSIGNEE NAME:	
Name:	Dewey's Bakery Inc dba Salem Baking Co
Address:	4795 Commercial Plz
City/ST/Zip/Country:	Winston-Salem, NC 27104
Phone #:	

SEND FREIGHT BILL TO:	
Name:	Columbus McKinnon C/o Jarrett Logistics Systems
Address:	1347 N. Main Street
City/ST/Zip:	Orrville, OH 44667

ORDER INFORMATION:			
Ship Date:	04/11/2025	Required Delivery Date:	04/14/2025
Customer PO#	964694	Must Arrive By:	
		Delivery Before:	

COMMODITY INFORMATION:									
Units	Handling Type	PKG CNT	PKG	HM	STK	Commodity Description	NMFC	Weight (lbs)	Class
1	Skids	0				Conveyors or parts, exceeding 92 inches but less than 192 inches, PCF 15-30 (169" x 72" x 48")	120700-14	1500	77.5
1	Skids	0				Conveyors or parts, exceeding 192 inches but less than 288 inches, PCF 15-30 (169" x 72" x 41")	120700-09	1200	85
1	Skids	0				Conveyors or parts, exceeding 192 inches but less than 288 inches, PCF 15-30 (73" x 42" x 42")	120700-09	465	85
3		0						3165	

Carrier Notes

NOTE (1) Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$_____ per _____.

NOTE (2) Liability Limitation for loss or damage on this shipment may be applicable, See 49 U.S.C § 14706(c)(1)(A) and (B).

NOTE (3) 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 sec. 2(e) and Note 2 of NMFC 250100.

CARRIER CERTIFICATION:

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or the Department of Transportation emergency response guidebook or equivalent document was in the vehicle.

Per _____
Date _____ No. of Packages _____

SHIPPER CERTIFICATION:

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

Per _____
Date _____

For Freight Collect Shipments:

If this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign with the following statement:
The carrier may decline to make delivery of this shipment without payment of the freight and all other lawful charges.

RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the shipper and Jarrett Logistics and between the carrier and Jarrett Logistics, or, if such contracts do not exist, the motor carriers terms and conditions, which are available from the motor carrier upon request, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above.

Shipper, per JOHN DEBATO MARIN Carrier, per JEFF
04/14/25

Place Pro Label Here