

INVOICE

BILL TO:
WAGNER LOGISTICS
1201 E 12TH AVE
NORTH KANSAS CITY, MO 64116

INVOICE DATE: 04/24/2025 INVOICE #: R87616 TERMS: NET 30 DUE DATE: 05/24/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
04/22/2025		2501 E 165th St, Hammond, IN 46320, USA - 3120 Leeman Ferry Rd SW, Huntsville, AL 35801, USA			
		Freight Income	1	\$1,300.00	\$1,300.00

TOTAL	
\$1,300.00	

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



Rate Confirmation

Load ID: LD2	87429 Please sigr	n and return immediate	ely or accept via Email			
Da	ate: 04/22/2025					
BILL	TO (MAILING ADDRESS)	Contact Information				
BILL TO NAME:	Wagner Logistics	FOR CLIENT: Wagner Logistics				
CONTACT:		CONTACT NAME:	Tina Meek			
ADDRESS:	1201 E. 12 th Ave.	PHONE NUMBER: 8164741110				
CITY, STATE, ZIP:	North Kansas City, MO 64116	REPLY FAX NUMBER:	8168428377			
E-MAIL ADDRESS:	carrierpayables1946@wagnerlogistics.com	E-MAIL ADDRESS:	tina.meek@wagnerlogistics.com			
ALL invoices to Wagner I	ogistics must reference Load ID #		·			
	LD287429					
		Settlement				
	DD, and load tender by mail or email per BILL TO d and correct freight bill with signed POD. Wagner L					
	Carr	ier Instructions				
cannot be double brokere for signing the shipper's E	curn a signed copy of this document to fax# 816-84: ed. You must call Wagner immediately if your driver Bill of Lading. Carrier agrees to notify Wagner Logis r, will result in non-payment of said charges.	or equipment cannot service this mov	e on stated dates & times. Driver is responsible			
Special Instructions:	Trailer Must Be Clean, Dry, & Odor Free v	vith No Holes and No Missing R	ivets			
	Rate Con	firmation Agreement				
limited to, third party colle	greement is binding between Wagner Logistics and ection companies, factoring companies, or accounts ments between the same or other parties.					
	Additional	Services Requested				
	Carrier Information	Freight Bill Summary				
Carrier Name/SCAC	Royal3 Inc / 944686	Picks/Total Stops	1/2			
Contact Name	DAN	Total Mileage	520.0			
Phone Number	630-485-7370	Total Pieces	21.0 unknown			
Fax Number		Total Weight	44.310			

	Carrier Information	Freight Bill Summary				
Carrier Name/SCAC	Royal3 Inc / 944686	Picks/Total Stops	1/2			
Contact Name	DAN	Total Mileage	520.0			
Phone Number	630-485-7370	Total Pieces	21.0 unknown			
Fax Number		Total Weight	44,310			
Equipment	Truck, Van (TV)					
Hazmat Load:	No					
Pickup						
Earliest Pickup Date/Ti	me: 04/22/2025 16:00	Latest Pickup Date/Time: 04/22/2025 16:00				
Name	Sylvamo	Pickup Number: 7000510366				
Address	2501 165TH ST					
Address						
City, State, Zip	HAMMOND, IN 46320-2932					
Drop						
Earliest Drop Date/Time			3/2025 14:00			
Name	STRICKLAND PAPER HUNTSVILLE	Appointment Number:				
Address	3120 LEEMAN FERRY RD SW					
Address	LUNTO (ULE AL OFOOT FOOT					
City, State, Zip HUNTSVILLE, AL 35801-5325						
Special Instructions:						
		Total Rate	\$1,300.00			
		Total Line Haul	\$1,300.00			

SIGNATURE: DATE:	



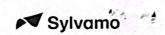
Instructions for Sending Email Invoices

Invoices should be sent to carrierpayables1946@wagnerlogistics.com

- 1) Send one PDF per invoice to include carrier invoice, PODs, rate confirmation sheet and any and all receipts eligible for reimbursement
- 2) You can send up to five attachments in one email
- 3) Name your PDF with your invoice # and our LD#
- 4) Invoices can be sent daily, as billed
- 5) Invoice date in our system will be the date email is received and paid thirty days of this date
- 6) NOA's and all documents must be sent with the invoice and POD to update; do not email separately
- 7) For received confirmation, use the received receipt in your email settings

This email is for invoices only

To avoid payment delays please follow these instructions and do not send duplicate emails



Date: 04/22/2025 BILL OF LA							ADING Page 1 of 1			
SHIPPER NAME: Sylvamo						BOL Nu	BOL Number: 03686370005103668			
Midwest RDC 2501 E 165TH ST HAMMOND IN 46320-2932 SID #: 9011 FOB: () SHIP TO STRICKLAND PAPER HUNTSVILLE 3120 LEEMAN FERRY RD SW						(402)03686370005103668 CARRIER NAME: WAGNER LOGISTICS Trailer number: WGII p526c127				
HUN'	TSVILLE	AL 3580	1-5325	5			Seal Number(s): 4310767			
Location #: CID#: 537719 FOB: (X) THIRD PARTY FREIGHT CHARGES BILL TO							SCAC: WGII Shipment: 7000510366 Pro number:			
SYLV	'AMO I: MATCI	L DAY								
6077 MEMI	PRIMAC PHIS TN	38119	VAY		¥		Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid (X) Collect () 3rd Party (X)			
RECEIV	ING HOURS 977.;PO#194	JCTIONS: 3 ARE: 10AM-2 4706;	2PM, APP	OINTMENT;REQU	IRED, PH	ONE:	()	Master Bill of Lading: underlying Bills of La		hed
CUST	OMER OF	RDER NUM	BER			RDER INFORMATION T(LB) PALLET/SKID ADDITIONAL SHIPPER IN			FO	
19470		COLIT TO III	JEN			ATT A STATE OF	Y	XERO WHITE BOX 11" SY		
15470	,0			840		44310		XERO WHITE BOX 11 31		
				A Company of the Comp						
5									1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
GRAI	ND TOT	AL 7	20 77	840	44	4,310				
HANDLI	NG UNIT	PACKA	CE	CA	RRIERI	NFOR	MATION	Carly State of the St.	LTI	ONLY
QTY	TYPE	QTY	TYPE	GROSS WT(LB)	Н.М. (X)	COMMODITY DESCRIPTION		SCRIPTION		CLASS
21	Р	840	CTN	44,310	The second second	PRINTING PAPER				
		end of the							40 V.D.	
		And I	Sec.						20	
									1	
21	216	840		44,310		GRAND TOTAL				
						COD Amount: \$ Fee Terms: Collect () Prepaid () Customer check acceptable: ()				
Customer Lead Date 24APR Signature 24APR					Shipp	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges and shall have no recourse against consignor for unpaid freight charges. Shipper Signature				
SHIPPER SIGNATURE / DATE This is to certify that the above named materials are in proper condition for transportation according to the applicable regulations of the U.S. DOT.					Carrier	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.				
Page	1.01.1	otal Bill of I	ading D	2000		Propert		ved in good order, except as noted.	e wee B	Oli