



INVOICE

BILL TO:
FREIGHTSOLVER
130 EAST MAIN STREET
NEW ALBANY, IN 47150

INVOICE DATE: 05/08/2025
INVOICE #: R89839
TERMS: NET 30
DUE DATE: 06/08/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/07/2025		5285 Edgewater Dr, Allendale, MI 49401, USA - 470 Benton Industrial Rd, Camden, TN 38320, 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: 25758

Mode: truckload

Carrier Rate: \$1,300.00

Pickup Location: ALLENDALE, MI

Pickup Date: 05/07/2025

Pickup Time: 06:00-15:30 EST

Carrier: ROYAL3 INC

MC #: 944686

Phone: 630-485-7370

Email: asta@royal3inc.com

Delivery Location: CAMDEN, TN

Delivery Date: 05/08/2025

Delivery Time: 07:00-15:00 CST

Notes:

53 VAN LOAD. SHIPPING HRS 6AM-3:30PM EST. RECEIVING HRS 7AM-3PM CST.

- UNLOADING CHARGES MUST BE REPORTED IMMEDIATELY.
- The Rate listed above contains all "accessorial" and or fuel surcharges.
- Carrier will be accountable to Shipper/Receiver for any damages and/or shortages incurred while in carriers control/custody.
- FreightSolver may exercise rate reduction for late pickup/delivery if not notified in advance.
- It is agreed that any re-brokering, assigning or interlining of this load will result in non-payment to the carrier.
- Minimum of \$100,000.00 cargo insurance is required by Carrier unless otherwise noted.
- Detention Policy: No detention will be paid for missed appointments. In instances where no appointment is required, your driver must notify us when he/she arrives at the facility. Calling to notify after arrival will not make the arrival time retroactive and time will begin at the time of notification. We will make every effort to avoid detention for your drivers but we must be notified when they arrive.

At time of delivery, please email the signed Bill of Lading to **docs@freightsolverinc.com**

FreightSOLVER inc
130 E. MAIN ST
New Albany, IN 47150
Phone#: (812)-258-6333

For payment status - go to nclworldwide.com - password: lookup

By your electronic signature below you (ROYAL3 INC) certify your employee () does in fact have the adequate amount of hours available to move this shipment on behalf of the shipper/receiver in the time frame desired and noted above

Reno Runck

ASTA MIJAC

FreightSolver Representative Signature

Carrier Representative Signature

STRAIGHT BILL
OF LADING
ORIGINAL - NOT NEGOTIABLE

Bill of Lading #: **2505072575899**
Ship Date: **05-07-25**
Payment Terms: **Third Party**

To/Consignee:
JONES PLASTIC CAMDEN
470 BENTON INDUSTRIAL RD
CAMDEN, TN 38320
Contact: AMY THOMAS 731-584-1398

From/Shipper:
POLYMER PROTECTIVE PACKAGING
5285 EDGEWATER DR
ALLENDALE, MI 49401
Contact: MICHELL MAREK 616-887-0382

Bill To:
FreightSOLVER TL
130 E Main St
New Albany, IN 47150

Pickup Time: 06:00-15:30 EST
Carrier: ROYAL3 INC
MC #: 944686
DOT #: 2828543

PO Number: 426858

# Pallets	HM(1)	Description of Articles - Packages	Weight
20		FOAM POUCH	3645

Special Instructions:

53 VAN LOAD. SHIPPING HRS 6AM-3:30PM EST. RECEIVING
HRS 7AM-3PM CST.

Michell Marek 5-8-25

RECEIVED, subject to the "COMMON CARRIER RATE AGREEMENT" or the CONTRACT between the Shipper and the Carrier in effect on the date of the shipment, the property described above, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as shown above. This Bill of Lading is not subject to any tariffs or classifications whether individually determined or filed with any federal or state regulatory agency except as specifically agreed to in writing by the shipper and the carrier.

(1) Mark with "X" to designate Hazardous Materials as defined in the Department of Transportation Regulations governing the transportation of hazardous materials. The use of this column is an optional method for identifying hazardous materials on the bills of lading per Section 172.204(a)(1)(iii) of Title 49, Code of Federal Regulations. Also, when shipping hazardous materials, the shipper's certification statement prescribed in Section 172.204(a) of the Federal Regulations must be indicated on the bill of lading, unless a specific exception from this requirement is provided in the Regulations for a particular material.

FOR CHEMICAL EMERGENCY NOTIFY CHEMTREC 1-800-424-9300

COD \$:0.00

COD FEE:

Shipper's Certification: (if any required) _____

Shipper Per _____
Date Entered _____

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 Department of Transportation.

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor) _____

Freight Counted ☐ By Shipper ☐ By Driver
Trailer Loaded ☐ By Shipper ☐ By Driver
By Driver/pieces ☐ By Driver
By Driver/pallets said to contain

Where the rate is dependant on the 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 _____"

Trailer Number:

Seal Number(s):

If transportation is arranged through a broker, Carrier designates broker as its agent for the collection of freight charges. When charges are paid to broker, Carrier agrees not to hold shipper or consignee responsible for said charges.

Shipper: *Carol Mares*
Date: *5/7/25*

Carrier: _____
Date: _____