



INVOICE

BILL TO:

CANALE TRANSPORTATION SOLUTIONS LLC
40 MILER LANE
GREENVILLE, SC 29607

INVOICE DATE: 05/23/2025**INVOICE #:** B92317**TERMS:** NET 30**DUE DATE:** 06/23/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
05/22/2025		4218 PULLMAN RD, Amarillo, TX, 79118 - 1721 E SUGARCANE DR, Weslaco, TX, 78596			
		Freight Income	1	\$1,250.00	\$1,250.00

TOTAL

\$1,250.00

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 & Load Confirmation



40 Miler Lane
Greenville, SC 29607
Phone: (864) 707-1885
Fax: (864) 558-8090
dispatch@canaletransportation.com
accounting@canaletransportation.com
MC #043923 DOT #3039497

Dispatcher:	Philip C	LOAD #	40579
Phone #:	864-707-1885	Ship Date:	05/22/2025
Fax #:	864-558-8090	Today's Date:	05/21/2025
Email:	philip@canaletransportation.com		
W/O:	CF971		

Carrier	Phone #	Fax #	Equipment	Agreed Amount	Load Status
RIKI TRANSPORTATION INC.	708-303-5150		53' Van	\$1,250.00 USD	Covered

Shipper 1 Amarillo FCC Warehouse LP [High Plains] 4218 PULLMAN RD Amarillo, TX, 79118 Phone: 806-620-4962	Date: 05/22/2025 Time: Type: TL Quantity: 86 Weight: 41340 lbs	Purchase Order #: CF971 Major Intersection: 1.7 miles South of I-40 on Pullman Rd on West Side of road Shipping Hours: 0730-1600 FCFS Appointment: No Description: Baled Cotton
--	---	--

Consignee 1 CI LOGISTICS #7 1721 E SUGARCANE DR Weslaco, TX, 78596 Phone: 956-843-6011 x103	Date: 05/23/2025 Time: Type: TL Quantity: 86 Weight: 41340 lbs	Purchase Order #: CF971 Major Intersection: Receiving Hours: 0800-1600 M-F, Sat 0800-1 Appointment: Yes Description: Baled Cotton
--	---	--

Dispatch Notes:

Rate & Load Confirmation



40 Miler Lane
Greenville, SC 29607
Phone: (864) 707-1885
Fax: (864) 558-8090
dispatch@canalettransportation.com
accounting@canalettransportation.com
MC #043923 DOT #3039497

Dispatcher:	Philip C	LOAD #	40579
Phone #:	864-707-1885	Ship Date:	05/22/2025
Fax #:	864-558-8090	Today's Date:	05/21/2025
Email:	philip@canalettransportation.com		
W/O:	CF971		

TERMS AND CONDITIONS:

- Your invoice, bill of lading, proof of delivery, and this signed load confirmation are required for payment.
- This form, each BOL with receiver's name and signature must be sent within 72 hours of delivery to accounting@canalettransportation.com or faxed to 864-558-8090.
- A \$50.00 per day penalty will be deducted from the rate for each day late.
- A \$200.00 rate reduction will be applied for not submitting correct BOL to consignee(s) and signed BOL to CTS upon completion.

• Detention: 3 free hours, \$50.00 thereafter

- Flat Rate-ALL IN [Includes Fuel Surcharge and all other charges].
- Plus any hourly amount in line descriptions.

- Please sign and return to dispatch@canalettransportation.com or fax to 864-558-8090, thereby confirming that the driver has the necessary equipment and hours available for pickup and deliver this shipment on time.
- Note: Any charges other than the above rate must be declared at the time you become aware and the charge must be approved by our customer. No adjustment made after 4 hours following the Shipment delivery.
- Driver will inspect and verify shipment matches the BOL and that there is no visible damage.
- Driver will note shortages and/or damage on the BOL and have consignor sign beside the note. If damaged, take pictures.

Provide status updates as follows:

1. Arrival time at consignor (shipper).
2. Departure time at consignor: report pieces, weight, BOL number(s) and issues.
3. Arrival time at consignee.
4. Departure time at consignee [POD]

****Call us as soon as you know of any delay or service failures****

By signing this rate confirmation sheet and/or accepting the herein described shipment, the Carrier agrees to the Terms and Conditions for hauling this shipment.

Thank you for your services! We look forward to working with you!

- Canale Transportation Solutions, LLC

Mark:: CF971, **TMS ID:** 190411701

Carrier Pay: Full Truckload: \$1250.00, # of Units: , **TOTAL: \$1250.00 USD**

Accepted By: Steve Tatum **Date:** 05/21/2025 **Signature:** Steve Tatum

Driver Name: Henry Peralta **Cell #:** (561) 578-3085 **Truck #:** 602 **Trailer #:** H11545

TRK

* Farmers Cooperative Compress High Plains Amarillo, Tx

Clearance

Mark

Brand

Press

Shipper Allenberg

62208

CF971

UDO

Shippers S/O Number 316199

Clearance Date - 05/12/2025

Load Date - 05/12/2025

Block Loc

Set-Up Loc

Weighed By

Proofed By

Tariff Items

Instructions

2133418	2196917	7964114
458	918	139
2147903	919	175
905	926	190
906	927	194
907	930	206
908	932	230
911	940	232
917	941	237
930	942	252
931	946	262
958	950	264
970	6654871	276
972	909	284
973	7962465	296
977	784	297
978	969	298
979	7963974	306
980	979	308
981	995	316
989	7964000	327
2162017	012	343
2182220	013	383
2196846	018	390
850	023	402
858	024	7967031
859	035	
860	036	
880	041	
881	079	

Plant = 10 86

Remot

Yard

Hash Totals =

Count

Allenberg Truck Line Notified Ready to Load

Destination S/O = 62208

Consignee =

Date Loaded

Date

Name

Notice:

* Truck Receipt and Responsibilities Agreement *

I understand and agree to each of the following:

I and each passenger will stay inside the cab of my truck at all times until loading is complete;
we will at all times stay clear of forklifts and other trucks in operation on compress property.

I am solely responsible for safely securing and tarping, if necessary, the load on my truck
and only in an area designated by the compress.

I understand the compress will not furnish help or equipment of any kind to secure or tarp my load.

I and each passenger will observe all printed and spoken rules of the compress.

I agree to explain the above rules to each passenger.

I am solely responsible for the safety of each passenger while on compress property.

I understand that the failure of me or my passengers to follow the above rules may result in being
asked to leave compress property immediately. My initials show agreement

FCC is not Responsible for Reefer
damage when loading.

Farmers Compress is not
Responsible
For final Destination. Please
Check with your Dispatcher.

NO SMOKING

NO LITTERING

SAFETY 1ST

Van _____ Container _____ Flatbed _____ Tarp _____

Name of Truck/Container Line

Vehicle Id

Loaded By

Comment

Drivers Name (Please Print)