



INVOICE

BILL TO:

LANDSTAR RANGER INC
13410 SUTTON PARK DRIVE SOUTH
JACKSONVILLE, FL 32224

INVOICE DATE: 06/09/2025**INVOICE #:** B94426**TERMS:** NET 30**DUE DATE:** 07/09/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/05/2025		1090 Hunters Xing, Alcoa, TN 37701-1849 - 2526 Elvis Presley Blvd, Memphis, TN 38106, USA			
		Freight Income	1	\$1,100.00	\$1,100.00
		Detention	1	\$225.00	\$225.00

TOTAL

\$1,325.00

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**



Landstar Ranger Inc

Carrier Load Tender & Rate Confirmation

Any questions or concerns about this load please contact the Landstar Agent at: (800) 427-8539

Important: Carrier must call agent if your dispatch instructions below differ from the bill of lading.

Carrier shall not in any way subcontract, broker, or arrange for freight to be transported by a third party.

Download the free Landstar Connect™ App prior to pick up to view below load details, transmit automated status updated & submit paperwork while under Landstar load only. Available in Google Play and Apple App stores.



LOAD VERIFICATION

To verify this load originates from a Landstar agency, please visit the Landstar load verification site at <http://www.landstar.com> and select "Verify" from the homepage.

Freight Bill # 3422106
EL # EL6429301
Date 06/05/2025 09:38

Carrier BRZ

Equipment VAN 53VN

Total Miles 390

Services
Sent From
Posting Code: CNH

Agency Name: Hartley Transportation LLC - CNH

Contact Name: Robert Ledbetter

Contact Phone: (800) 427-8539

Contact Email: rledbetter@hartleytrans.com

References
Team false

Route Details

Stop #1 pickup -
Appointment: -

Target Window: 06/05/2025 08:00 - 06/05/2025 15:00

Location Amvets

Address 1090 Hunters Xing

Address Alcoa, TN 37701-1849

Contact Micah **Phone** 8655248498

Comment
Item CONSUMER GOODS OR APPLIANCES **Qty** 0.0 **Wgt** 38,500

Stop #2 drop -
Appointment: -

Target Window: 06/06/2025 10:00 - 06/06/2025 10:00

Location Amvets

Address 2526 Elvis Presley Blvd

Address Memphis, TN 38106

Contact Leticia **Phone** 9017755010

Comment
Item CONSUMER GOODS OR APPLIANCES **Qty** 0.0 **Wgt** 38,500

Notes

revised tender

Agreed Rate

Description	Charge
Pay Capacity	\$1,100.00
Total	\$1,100.00 USD

Item ID	Haz Mat	Description	Qty	Weight	Class	NMFC	Temp	Dimensions
CGAPP		CONSUMER GOODS OR APPLIANCES	0	38,500	70.0			

Important Billing Instructions

- Invoice, bill of lading (for each stop) and proof of delivery (for each stop) required. Documents must be legible.
- Invoices must include Landstar's freight bill number or EL#.
- The rate on the carrier's invoice must match the rate confirmation and any accessorials must be authorized in writing by the agent in order to prevent delays in payment.
- Receipts (lumper, tolls, etc.) and permit and/or escort invoices must be submitted.
- For carrier payable questions call: 800-435-1791, opt 2.

PAPERWORK SUBMISSION OPTIONS

Send electronically by 2:00pm EST for same day receipt via:

Transflo Mobile +

Go to your app store to download to your mobile device. Enter LCGB as the Recipient ID when registering. Cost: \$2.00 per trip.

Transflo Express

To find a participating truck stop go to:
<http://transfloexpress.com/locations/>
 Cost: 2.00 per trip with cover sheet
 For a cover sheet call 800-435-1791, opt 5

Landstar Savings Plus Members Send To:		
Mailing address: Landstar Transportation Logistics Attn: Imaging P.O. Box 19139 * Jacksonville, FL 32245-9139	For Express Mailing: Landstar Transportation Logistics Attn: Brokerage Billing - LSP 1000 Simpson Rd * Rockford, IL 61102	Regular Mail: Landstar Transportation Logistics Attn: LSP - Imaging P.O. Box 19119 * Jacksonville, FL 32245-9119
	Call 866-321-PLUS (7587) to learn how to get paid in 2 days	

Tracking

Capacity must comply with all requested load tracking requirements. If Capacity is unable to comply with requested load tracking requirements, communicate with the Landstar Agent immediately. Capacity is subject to rate reduction in an amount up to 15% of line-haul in the event of non-compliance with requested load tracking requirements.

CARRIER certifies it is aware of the California Air Resources Board's Truck and Bus, Drayage and Greenhouse Gas Rules and that, on all loads originating in, destined for, or passing through California, CARRIER will utilize only vehicles that are compliant with those rules. Please see CARB regulations available at [Http://www.arb.ca.gov](http://www.arb.ca.gov)

Full terms and requirements are within the Landstar TBA. The Transportation Brokerage Agreement between CARRIER and BROKER provides that CARRIER shall refrain from all collection efforts against the shipper, receiver, consignor, consignee, or the customer. CARRIER acknowledges that any effort by CARRIER or any representative of CARRIER to contact any such third party to collect on freight charges relating to this shipment shall constitute a material breach of the Transportation Brokerage Agreement between CARRIER and BROKER.

FSMA
 CARRIER certifies it is aware of, and compliant with, all regulations and requirements regarding the sanitary transportation of human and animal food, including the federal food safety and modernization act (FSMA).

Electronic Rate Confirmations

CARRIER acknowledges that Load or Rate Confirmation may be submitted by BROKER to the CARRIER via electronic means and such shall constitute the CARRIER's binding acceptance of such Load or Rate Confirmation upon the earlier to occur of (a) the CARRIER's electronic acceptance of the Load or Rate Confirmation as verified by the BROKER's Information Services System, or (b) the CARRIER's pick up of the shipment in question.

Nothing herein is intended to modify or amend the terms and conditions of the Transportation Brokerage Agreement between CARRIER and BROKER.

Thank you for doing business with Landstar
To confirm please accept using the link in the tender email.

Carrier BRZ ID CP197920 MC 86875 DOT 3119062 Phone 708-303-5150 Email steve@rtbrz.com	Signature
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Contact Name: Robert Ledbetter

Contact Phone: (800) 427-8539

Contact Email: rledbetter@hartleytrans.com

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Route Details**Stop #1 pickup -****Appointment:** -**Target Window:** 06/05/2025 08:00 - 06/05/2025 15:00**Location** **Amvets****Address** **1090 Hunters Xing****Address** **Alcoa, TN 37701-1849****Contact** **Micah** **Phone** 8655248498**Comment****Item** CONSUMER GOODS OR APPLIANCES **Qty** 0.0 **Wgt** 38,500**Stop #2 drop -****Appointment:** -**Target Window:** 06/06/2025 10:00 - 06/06/2025 10:00**Location** **Amvets****Address** **2526 Elvis Presley Blvd****Address** **Memphis, TN 38106****Contact** **Leticia** **Phone** 9017755010**Comment****Item** CONSUMER GOODS OR APPLIANCES **Qty** 0.0 **Wgt** 38,500**Notes****Agreed Rate**

Agreed Rate	
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Thank you for doing business with Landstar
To confirm please accept using the link in the tender email.

Carrier BRZ ID CP197920 MC 86875 DOT 3119062 Phone 708-303-5150 Email steve@rtbrz.com	Signature
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DATE: June 5, 2025		DELIVERY ORDER		Bill of Lading Number: 153475 - B	
SHIP FROM			SHIP TO		
Name: AMVETS			Name: AMVETS WAREHOUSE		
Address: 1090 HUNTERS CROSSING			Address: 2526 ELVIS PRESLEY BLVD		
City/State/Zip: ALCOA, TN 37701			City/State/Zip: MEMPHIS, TN 38106		
Phone #: (865) 524-8498		FOB: <input type="checkbox"/>	Phone #: (901) 775-5010		FOB: <input type="checkbox"/>
CARRIER NAME: Sunset Xpress LLC			Freight Charge Terms:		
Trailer #: _____			Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> 3rd Party <input checked="" type="checkbox"/> X		
Seal #: _____			THIRD PARTY FREIGHT CHARGES BILL TO:		
SPECIAL INSTRUCTIONS:			Name: Hartley Transportation LLC		
			Address: 110 Sheep Davis Road		
			City/State/Zip: Pembroke, NH 03275		

NO. PKGS.	KIND OF PACKAGE, DESCRIPTION OR ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WGT (Sub. To Cor.)	Class or Rate	HAZMAT	CK COL
	TRUCKLOAD: CONSUMER GOODS	38,000			
	PU IN-10A				
	OUT-4:30P				
0	GRAND TOTAL	38,000			

<p>* If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight"</p> <p>NOTE: 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 to be not exceeding _____ per _____</p>	<p>COD AMOUNT: \$ _____</p> <p>Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/></p> <p>Customer check acceptable: <input type="checkbox"/></p>
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NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C. - 14706(c)(1)(A) and (B).

RECEIVED: subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request, and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

SHIPPER SIGNATURE / DATE This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT. <i>Del</i>	Trailer Loaded: By Shipper <input checked="" type="checkbox"/> By Driver <input type="checkbox"/>	Freight Counted: By Shipper <input checked="" type="checkbox"/> By Driver/Pieces <input type="checkbox"/> By Driver /pallets said to contain <input type="checkbox"/>	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 DOT emergency response guidebook or equivalent documentation in the vehicle. <i>[Signature]</i>
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Time In: 9:30am

Time Out 4:30pm

CONSIGNEE: Susie Petrucelli

CONSIGNEE PRINTED FIRST AND LAST NAME: Susie Petrucelli

CONSIGNEE SIGNATURE / DATE: Susie Petrucelli 6-5-25