



INVOICE

BILL TO:
GILTNER LOGISTICS INC
834 FALLS AVE SUITE 1220
TWIN FALLS, ID 83301

INVOICE DATE: 06/09/2025
INVOICE #: R94663
TERMS: NET 30
DUE DATE: 07/09/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/06/2025		1 7th Ave, Carbondale, PA 18407 - 2510 12th St, Harlan, IA 51537			
		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



GILTNER LOGISTICS, INC.
DOCS@GILTNER.COM
PO BOX 5129
TWIN FALLS ID 83303

PRO # 1317565

Rate Confirmation

06/06/25 09:45:49 (EST)

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JODY CLARK
(208) 295-2632
(208) 914-7181 (f)
g3carriersales@giltner.com

ROYAL3 INC
(630) 485-7370 (p) Att: AARON
(630) 485-6980 (f)
MC # 944686 Truck # 256561
DOT 2828543 Trailer # P5260112
Driver STEVE Cell # (786) 763-6652

Size & Type: 48' VAN
Pieces: 22

Description: MACHINE PARTS
Weight: 40626

Miles: 292

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1900.00	PODS REQUIRED WITHIN 12 HOURS OF DELIVERY TO AVOID DEDUCTIONS - MACROPOINTS REQUIRED DEDUCTIONS FOR LATE PICK/DROP/NO MACROPOINTS - NO DETENTION @ FCFS
TRACKING FEE	100.00	
TOTAL RATE	2000.00	

PICK 1

HENDRICK MFG
1 7TH AVE
CARBONDALE PA 18407
Hours : 0800-1500
Phone/Contact: (570) 267-6782 STEVE

Appointment 06/06/25 @ FCFS
Appt Notes: ETA
Pieces: 6
Weight: 37200
Seal # 630-566-0562
Ref # 26833

STOP 1

JACOBS NORTH
2510 12TH ST
HARLAN IA 51537
Hours : 0800-1630
Phone/Contact: (712) 755-2720 JILL X9109

Appointment 06/09/25 @ FCFS
Pieces: 6
Weight: 37200
Seal # 630-566-0562
Ref # 50556

PLEASE CALL 208-293-9613 to provide status updates or if you need assistance on a shipment. **DETENTION REQUESTS-LUMPER-OSD must be reported at time of occurrence to BROKER via phone 208-293-9613 or email g3brokerage@giltner.com** All shipment paperwork (including POD's and receipts for reimbursement) must be submitted to Giltner Logistics via email at docs@giltner.com and g3brokerage@giltner.com within 48 hours of final delivery for prompt payment. Lumpers will only be reimbursed with valid receipts. No detention will be paid without IN AND OUT TIMES marked on the bills by SHIPPER or CONSIGNEE and prior approval by BROKER. A missed pu/late delivery fee of up to \$250 per instance will apply to all missed appts caused by Carrier. If this shipment is double brokered, the agreement is VOID. Carrier is responsible for compliance with CA Air Resource Board if operating in CA. Carrier will indemnify BROKER for any fines received for not complying. This confirmation governs the shipment/freight movement referenced above as of the date specified & hereby amends, is incorporated by reference, & becomes part of that certain BROKER-CARRIER agreement executed between BROKER and CARRIER. Carrier agrees to sign and return confirmation via email or fax. Carrier shall be in agreement with rates listed on rate agreement and any change in the rate agreement between BROKER and CARRIER must have subsequent rate agreement issued by BROKER. Rates include all charges including fuel surcharge.

(Rate Confirmation Details on Next Page)

Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 262506060459567
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO #1317565

must appear on all Invoices



GILTNER LOGISTICS, INC.
DOCS@GILTNER.COM
PO BOX 5129
TWIN FALLS ID 83303

PRO # 1317565

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Carrier Signature _____

Date _____ / _____ / _____
M D

Doc ID: 2625060606459567
Send Carrier Bills to the Address Above
Sertifi Electronic Signature

PRO #1317565

must appear on all Invoices

E-Signed : 06/06/2025 08:47 AM CDT

Aaron Bojovic

dispatch@royal3inc.com
IP: 74.63.233.45

Sertifi Electronic Signature
DocID: 20250606084550367

BOL Number: 63006236

BILL OF LADING

SHIP FROM

Name: Hendrick MFG
Address: 1 7TH AVE.,
City/State/Zip: CARBONDALE, PA, 18407
Steve Mikloiche P: 5702676782 Ext
Stop Notes:

SHIP TO

Name: Jacobs North
Address: 2510 12th St
c/o Jacobs North
City/State/Zip: HARLAN, IA, 51537
Jill Tingler P: 7127552720 x9109 Ext
Stop Notes:

REFERENCE INFORMATION

Reference Name	Value
Direction Type	Inbound - parts (588513)
PO Number	26833/50556

THIRD PARTY FREIGHT CHARGES BILL TO

Echo Global Logistics
600 W. Chicago, Suite 200
Chicago, IL 60654 UNITED STATES

Freight Charge Terms:
Prepaid ☒
Collect ☐
3rd Party ☒

Carrier Acct #: _____
Quote ID: _____

Special Instructions:

ECHO is not liable for any accessorial charges unless pre-approved by Echo or noted on this bill of lading.

LTL or Partial Only:
of Pallets: 0 Pallet Type: _____ Skid Spots: _____ Stackable: No
Pallet Dimensions: L: _____ W: _____ H: _____

CARRIER INFORMATION				LTL Only	
HANDLING UNIT	QTY	TYPE	WEIGHT	HM (X)	OD (X)
Pallets	0	22	40626 lb		
	0	22	40626 lb		
GRAND TOTAL					

Where the rate is dependent on 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 _____"

COD Amount: \$ _____

Fee Terms: Collect ☐ Prepaid: ☐

Customer check acceptable: ☐

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

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. (Section 7)

SHIPPER SIGNATURE / DATE
This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled in accordance with the Department of Transportation regulations.
Shipper: [Signature] Date: 6/6/25

Trailer Loaded:
By Shipper ☐
By Driver ☐

Freight Counted:
By Shipper ☐
By Driver/Pallets said to contain ☐
By Driver/Pieces ☐

CARRIER SIGNATURE / PICKUP DATE
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available to the driver. The driver shall be provided with the emergency response placard or equivalent documentation in the vehicle.
Carrier: _____ Date: _____

6-9-25
Kevin Blum

Shipper Instructions
Pickup #: 26833
Loc Type: Business
Special Services:

Consignee Instructions
Delivery #: 50556
Loc Type: Business
Special Services: