



INVOICE

BILL TO:

FUSION TRANSPORT LLC
4 WESTBROOK CORPORATE CTR SUITE 1020
WESTCHESTER, IL 60154

INVOICE DATE: 06/09/2025**INVOICE #:** R94804**TERMS:** NET 30**DUE DATE:** 07/09/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/06/2025		3263 Elam Farms Pkwy, Murfreesboro, TN 37127 - 2801 S Valley Pkwy, Lewisville, TX 75067			
		Freight Income	1	\$1,400.00	\$1,400.00

TOTAL

\$1,400.00

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



AM TRANS EXPEDITE, LLC
FUSION TRANSPORT P.O BOX 24498
INVOICES@AMTRANSEXPEDITE.COM
NEW YORK NY 10087-4498

PRO # 680931

Rate Confirmation

06/06/25 14:05:32 (EST)

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HENRY PUCKORIUS
(201) 251-7333 (p)
hpuckorius@amtransexpedite.com

ROYAL3 INC
(630) 485-7370 (p)
(630) 485-6980 (f)
MC # 944686
DOT 2828543
Driver ALAN
Truck # 730
Trailer # H11575
Cell # (346) 277-3204

Size & Type: 53' EXPEDITED VAN LOAD
Pieces: 11

Description: PALLETIZED FAK
Weight: 6000

Miles: 701

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1400.00	MUST SECURE LOAD/11 PIECES//MUST HAVE MACROPOINT ON AT ALL TIMES OR 20% REDUCTION // HANDLE WITH CARE // TAKE PICS OF FREIGHT AT PICKUP // MUST GET POD SIGNED AT DELIVERY // MUST RECEIVED POD WITHIN 15 MIN OF DELIVERY OR \$150 RATE REDUCTION WILL APPLY//MUST HAVE PPWK IN HAND AT DELIVERY AND GET ALL PAGES SIGNED FOR POD/MUST DELIVERY PER APPT OR FEES WILL APPLY
TOTAL RATE	1400.00	

PICK 1

METRO INDUSTRIES CORPO
3263 ELAM FARMS PKWY
MURFREESBORO TN 37127
Hours : 0800-1530

Appointment 06/06/25 @ FCFS

STOP 1

TRIMARK USA
2801 S VALLEY PKWY
LEWISVILLE TX 75067
Hours : 0900

Appointment 06/09/25 @ 09:00

EMAIL INVOICE AND POD TO INVOICES@AMTRANSEXPEDITE.COM FOR STANDARD PAY TERM
DRIVER IS RESPONSIBLE FOR COUNTING PIECES AND SIGNING FOR NUMBER OF PIECES
RECEIVED. IF FOR ANY REASON THERE IS A PROBLEM WITH THE COUNT, DRIVER MUST
CONTACT BROKER FOR ASSISTANCE. THE RATE QUOTED BY THE BROKER, AM TRANS
EXPEDITE, INC. TO THE CARRIER ADDRESSED ON THIS AGREEMENT, HEREIN AND IS HERBY
CONFIRMED AND AGREED TO AS THE RATE ASSESSED FOR THE SHIPMENT. FURTHER MORE,
BY ACCEPTING THIS SHIPMENT AT THE RATE QUOTED, THE CARRIER AGREES TO HOLD
HARMLESS THE SHIPPER, CONSIGNEE, AND BROKER FOR ANY BILLING IN EXCESS OF THE
RATE AND CHARGES AS QUOTED IN THE AGREEMENT. CARRIER AGREES TO BE RESPONSIBLE
FOR CARGO INSURANCE ON A FULL VALUE BASIS FOR ALL SHIPMENTS IN THEIR CARE,
CUSTODY, AND CONTROL. CARRIER ASSUMES THE LIABILITY OF A COMMON CARRIER
(I.E. CARMACK AMENDMENT LIABILITY) FOR LOSS, DELAY, DAMAGE TO OR DESTRUCTION
OF ANY AND ALL OF CUSTOMER'S GOODS OR PROPERTY WHILE UNDER CARRIER'S CARE,
CUSTODY OR CONTROL. CARRIER SHALL PAY BROKER, OR ALLOW BROKER TO DEDUCT FROM
THE AMOUNT BROKER OWES CARRIER, CUSTOMER'S FULL ACTUAL LOSS FOR THE KIND
AND QUANTITY OF COMMODITIES SO LOST, DELAYED, DAMAGED OR DESTROYED. CARRIER
SHALL BE LIABLE TO BROKER FOR ALL ECONOMIC LOSS, INCLUDING CONSEQUENTIAL
DAMAGES THAT ARE INCURRED BY BROKER OR THE CUSTOMER FOR ANY FREIGHT
LOSS, DAMAGE OR DELAY CLAIM.
CARRIER IS NOT ALLOWED TO DOUBLE BROKER SHIPMENT, ALL EQUIPMENT USED SHOULD BE
COVERED UNDER THE CARRIERS INSURANCE. BROKER CAN HOLD ALL PAYABLES IF CARRIER
IS CAUGHT DOUBLE BROKERING

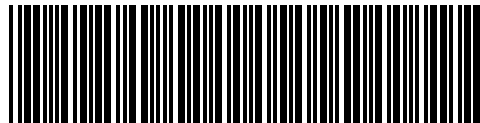
Carrier Signature _____

Date _____ / _____ / _____
M D

Send Carrier Bills to the Address Above

PRO # 680931

must appear on all Invoices



410 N. Freeport Pkwy, Park 121 Bldg. 5B
Coppell, TX 75019, US
Phone: 469-573-1220
Fax: 443-459-8182
Email: dfwops@icatlogistics.com

House Waybill

Shipper's Copy

DFW 922097

Date: 06/06/2025

Org: BNA Dest: DFW

Shipper:

METRO INDUSTRIES CORPORATION
3263 ELAM FARMS PKWY
MURFREESBORO, TN 37127, US
Phone: (615) 439-6410
Contact: KATIUSKA FLORES

Consignee:

TRIMARK USA
2801 S VALLEY PKWY,
APPOINTMENT REQUIRED
LEWISVILLE, TX 75067, US
Phone: (469) 240-7200

Bill To:

TRIMARK USA - CORPORATE ACCOUNTS (SOUTH)
2801 SOUTH VALLEY PARKWAY, SUITE 200
LEWISVILLE, TX 75067, US
Contact: FRANCIS AGHEMELOH

Bill To Ref: FV 13974787**Payment Terms:** Third Party**Service Level** TK-Truckload**Pickup:** Friday, June 6, 2025 8:00 AM-6:00 PM**Call in Company:****Delivery By:** By 6/9/2025 between 9:00 AM and 5:00 PM**Special Instructions:****Items To Be Shipped:**

<u>Pieces</u>	<u>Pkg Type</u>	<u>H/M</u>	<u>Description</u>	<u>Length</u>	<u>Width</u>	<u>Height</u>	<u>Weight (lb)</u>
11	PLT	<input type="checkbox"/>	Shelving	0.0	0.0	0.0	5839.0

Total Pieces: 11
Total Actual Weight: 5839.0

ICAT Logistics, Inc. - DFW - Voice: 469-573-1220

410 N. Freeport Pkwy, Park 121 Bldg. 5B

Coppell, TX 75019, US

Fax: 443-459-8182**Email:** dfwops@icatlogistics.com

SUBJECT TO TERMS AND CONDITIONS AT WWW.ICATLOGISTICS.COM, OR UPON REQUEST.

SHIPPER SIGNATURE	DATE	TIME	RECEIVED IN GOOD ORDER EXCEPT AS NOTED	DATE	TIME
DRIVER SIGNATURE	DATE	TIME	RECEIVED IN GOOD ORDER EXCEPT AS NOTED	DATE	TIME
CONSIGNEE SIGNATURE	DATE	TIME	RECEIVED IN GOOD ORDER EXCEPT AS NOTED	DATE	TIME



ICAT LOGISTICS, INC.

TRIMARK USA DELIVERY CHECKLIST

Driver to complete:

Yes / No

Notes/Comments

Product was safely secured inside the truck or trailer.	Y	
Driver accepted tracking prior to shipment being loaded.	Y	
Driver has confirmed pickup/delivery appt. times with ICAT.	Y	
Driver has sufficient equipment and is working properly (e-trak, ratchet straps, lift-gate, pallet-jack if applicable).	Y	
Driver has taken photos of product once on-site for delivering or recovering.	Y	

Driver Name (Print):	
Driver Signature:	
Date/Time:	

On-Site Contact to complete:

Yes / No

Notes/Comments

Driver arrived on-time for scheduled appointment.	Y	
Driver was dressed properly and behavior was orderly while on-site for delivery or recovery.	Y	
Driver followed instructions while on-site.	Y	
On-site contact received pre-call from ICAT team prior.	Y	
Overall experience was satisfactory.	Y	

Consignee Name (Print):	Alvin Marks
Consignee Signature:	
Date/Time:	06/09/25

*Carrier must ensure delivery checklist is filled out, signed, and sent back to ICAT Logistics for all Trimark deliveries. Failure to do so may result in rate reductions or non-payment. Signed copy of the checklist and photos must be sent to TrimarkUSA@icatlogistics.com within 24 hours of delivery**