



INVOICE

BILL TO:
BLUE GRACE LOGISTICS LLC
2846 S. FALKENBURG RD.
RIVERVIEW, FL 33578

INVOICE DATE: 06/13/2025
INVOICE #: B95518
TERMS: NET 30
DUE DATE: 07/13/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/11/2025		390 Spectrum Dr Suite 100, Knightdale, NC 27545 - 2600 Sylvania Cross Dr, Fort Worth, TX 76137			
		Freight Income	1	\$2,050.00	\$2,050.00

TOTAL
\$2,050.00

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

Carrier Load Tender

Reference: BG965847625 (BOL) Carrier: RIKI TRANSPORTATION INC. (Tender: 06/10/2025 01:42PM

Bill To: Blue Grace 2846 S Falkenburg Rd Riverview, FL 33578

BlueGrace Logistics (BGLF) will only consider additional charges if agreed to in writing. Carrier must inform BGLF at the time charges occur and of all unplanned accessorial or other additional charges incurred. BGLF will not reimburse detention charges unless reported at the time of the event, and "in" and "out" times are clearly stated on the Bill of Lading. BGLF will reimburse Carrier for approved lumber costs upon submission of a signed receipt. OS&D must be reported prior to leaving the consignee. PLEASE NOTE: Invoices and PODs must be submitted within 24 hours of delivery for Payment to: TLInvoices@bluegracegroup.com. Payment will not be processed without all required paperwork. Reference is made to the broker-carrier agreement between BGLF and Carrier for the legal requirements and terms between the parties.

Comments

Contact Information: Joshua Burca jburca@bluegracegroup.com

Special Instructions

Equipment & Services

Equipment

Attributes

Services

Dry Van

Temperature: Minimum: 0.00 Maximum: 0.00 Requirement:

Stop 1 (pickup)

06/11/2025 10:00AM - 06/11/2025 02:30PM shipping, (919) 828-3436

Alliance Packaging, 390 Spectrum Dr suite 100 , Knightdale, NC 27545

Comments:

Items

HM	Description	Weight	Qty	Dimensions
	RW1078346 parts	42878	22	

Stop 2 (drop)

06/13/2025 07:00AM - 06/13/2025 12:00PM Yenta Sanders, (817) 248-4500

GD ENERGY PRODUCTS-FORT WORTH C/O Central Warehouse, 2600 SYLVANIA CROSS DR , Fort Worth, TX 76137

Comments: FCFS 7-16:30 CST

Items

HM	Description	Weight	Qty	Dimensions
	RW1078346 parts	42878	22	


References

Reference Type	Reference
BOL	BG965847625
BRANCH CODE	29 Fort Worth CW
Mode	TL
PO Number	11170119
PRO	BG965847625
Sales Order #	24000405
Shipment Number	06112025ARB1P29

Freight Terms

Charge Details		
Description	Rate	Charge
Line Haul	1575.0000 Flat Rate (FR)	\$1575.00
Fuel	0.3800 Per Mile (PM)	\$475.00
	Total:	\$2050.00

Freight Terms: \$2050.00, Third Party (42878 lb) (1241.96 miles)

SHIP FROM		Bill of Lading Number: BG965847625	
Name: Alliance Packaging Address: 390 Spectrum Dr suite 100 , City/State/Zip: Knightdale, NC, 27545 Contact: shipping, (919) 828-3436 SID#		 (402) BG965847625	
SHIP TO		Carrier Name:	
Name: GD ENERGY PRODUCTS-FORT WORTH C/O Central Warehouse Address: 2600 SYLVANIA CROSS DR, City/State/Zip: Fort Worth, TX, 76137 Contact: Yenta Sanders, (817) 248-4500 CID#		Trailer Number: Seal Number(s):	
THIRD PARTY / FREIGHT CHARGES BILL TO		SCAC:	
Name: Blue Grace Address: 2846 S Falkenburg Rd, City/State/Zip: Riverview, FL, 33578		Pro Number: <div style="border: 1px solid black; height: 40px; width: 100%;"></div> (9012K)	
SPECIAL INSTRUCTIONS		Freight Charge Terms: 3rd Party <input checked="" type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> <small>(freight charges are prepaid unless marked otherwise)</small>	
Service: Default		<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	

CUSTOMER ORDER INFORMATION				
CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP	ADDITIONAL SHIPPER INFO
			Y/N	BRANCH CODE: 29 Fort Worth CW PO Number: 11170119 Sales Order #: 24000405 Shipment Number: N/A
			Y/N	
			Y/N	
			Y/N	
			Y/N	
			Y/N	
			Y/N	
GRAND TOTAL		0 lbs		

CARRIER INFORMATION						
H/U	PACKAGE			COMMODITY DESCRIPTION	LTL ONLY	
QTY/TYPE	QTY/TYPE	WEIGHT	H.M. (X)	Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(g) of NMFC Item 309	NMFC	CLASS
22/Crates	N/A	42878 lbs		RW1078346 parts		0.0
24						
24						
22		42878 lbs		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).

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. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NIMC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.

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

Shiraden Drey
Shipper Signature

SHIPPER SIGNATURE / DATE 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. <u>Amadean Day</u> 6.11.25	Trailer Loaded <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	Freight Counted <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets said to contain <input type="checkbox"/> By Driver/Pieces	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 U.S. Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. <u>Cristina Iglesias</u> 6/13/25
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