



## INVOICE

**BILL TO:**  
BELLAVANCE LOGISTICS INC  
5 SOUTH VINE ST.  
BARRE, VT 05641

**INVOICE DATE:** 06/20/2025  
**INVOICE #:** R96877  
**TERMS:** NET 30  
**DUE DATE:** 07/20/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/19/2025		One Gordon Mills Way, St Johnsbury, VT 05819 - 3550 Mayflower Dr, Lynchburg, VA 24501			
		Freight Income	1	\$2,200.00	\$2,200.00

<b>TOTAL</b>
\$2,200.00

**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**



BELLAVANCE LOGISTICS, INC.  
"Brokerage Services"  
PO Box 398  
Barre VT 05641

Phone: 802-661-5597  
Toll Free: (800) 257-2828  
Email: dispatch@bellavancelogistics.com

**Addendum B**  
**RATE CONFIRMATION**

**Load #: L398986**

**Trip #: 407307**

**Carrier** ROYAL3 INC (ROYCHIL2)  
**Attention:** Bill  
**Email** bill@royal3inc.com

**Phone** 630-485-7370EXT.  
**Fax** 132

Carrier agrees to notify Bellavance Logistics, Inc. immediately in the event of any delay related to the shipment's pick up and/or delivery.  
Carrier must provide a vehicle that has satellite, cell phone and/or other technology capable of frequent two way communication.

**Van or Reefer MUST be clean, dry and odor free.**  
**Please have Driver call for dispatch and load requirements prior to arriving at Shipper.**

**Stop   Type   Date**  
**1**   **PICK**   **6/19/2025 09:00:00 APPT MADE.**  
**FB#: L398986**  
Pick up #: L398986

**Shipper/Consignee Address**

WEIDMANN ELECTRICAL TECHNOLOGY  
ONE GORDON MILLS WAY  
ST JOHNSBURY, VT 05819

**ELECTRICAL EQUIP; REQUESTED EQUIPMENT: VAN/REEFER; PCS: 1; WGT: 42,500.0 LB**

**Stop   Type   Date**  
**2**   **DROP**   **6/20/2025 08:00:00 to 16:00:00 APPT MADE.**  
**FB#: L398986**  
Pick up #: L398986

**Shipper/Consignee Address**

DELTA STAR, INC  
3550 MAYFLOWER DR  
LYNCHBURG, VA 24501

**ELECTRICAL EQUIP; REQUESTED EQUIPMENT: VAN/REEFER; PCS: 1; WGT: 42,500.0 LB**

**Submit Freight Bills & POD's To:**

Bellavance Logistics, Inc.  
P.O. Box 398  
Barre, VT 05641

**Email: LoadDocs@bellavancelogistics.com**

Rate	
RATE	0.00
BASE	\$2,200.00
<b>TOTAL PAY</b>	<b>\$2,200.00</b>

**This addendum must be signed and emailed back to dispatch@bellavancelogistics.com**  
**By signing this document, the Carrier agrees to the terms and conditions of the Broker-Carrier Agreement.**

**Carrier: ROYAL3 INC**

**Broker: Bellavance Logistics, Inc.**

**Signed by:** *Bill Carson*

**Date:**  
6/18/2025

**Signed by:** *Ryan Bellavance*

**Date:**  
6/18/2025

**Title:**  
Dispatcher

**Title: (Broker)**

**Service & Rate Stipulation**

This rate is contingent upon the successful and on-time completion of all load terms. Rates are subject to reduction if carrier fails to complete any shipment terms and conditions as provided in this Addendum and/or the Broker Carrier Agreement. Rates may be reduced if load picks up or delivers after originally scheduled time and date. Failure to maintain tracking throughout the duration of the shipment, as provided in the Broker Carrier Agreement, will result in a \$150 deduction. Carrier acknowledges that failure to complete any terms and conditions on this shipment may jeopardize or result in loss of future business opportunities with Bellavance Logistics, Inc.

**Accessorial Charges and OS&D Conditions**

Accessorial charges (including but not limited to labor, detention, and/or layover charges) must be authorized and approved prior to or at time of occurrence. Bellavance Logistics, Inc. will not provide any reimbursement of any non, prior-approved accessorial charges. Carrier shall ensure the bill of lading is notated either when handling is required or when detention occurs, that a lump sum receipt is provided when a lump sum is hired, and/or that both are included as supporting documents with the carrier's invoice. All overage, shortage, and damage must be reported to Bellavance Logistics immediately, at the time of the occurrence, and noted on the bill of lading.

SHIP0000574485

**BILL OF LADING**

Sender  
Weidmann Electrical Technology Inc.  
One Gordon Mills Way  
ST. JOHNSBURY VT 05819  
USA

Shipping Date  
06/19/2025

Shipping Carrier  
Bellavance Logistics, Inc  
Aime Bellavance & Sons, Inc.  
5 SO.Vine Street  
BARRE VT 05641  
USA

Phone.: 1-800-257-2828

Fax:

Shipment No.. 574485

Recipient  
Delta Star East Inc  
3550 Mayflower Drive  
LYNCHBURG VA 24501  
USA

Delivery #	Freight Class	Quantity	Gross weight KG	Gross weight LB
83019500	77.5	1	581.000	1,280.887
	TOTAL	1 TOTAL	581.000 KG	1,280.887 LB

Charges: Collect

Attachments / Comments:

ID:

Driver Name:

Driver Signature:

Date:

Shipper's signature:

Neal Thomas

Recipient signature:

Jesse Roberts

Date:

6-20-28

Print date:

06/19/2025

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DRIVERS COPY

SHIP0000574485

SHIP0000574434

Sender

**Weidmann Electrical Technology Inc.**  
**One Gordon Mills Way**  
**ST. JOHNSBURY VT 05819**  
**USA**

**BILL OF LADING**

Shipping Date  
**06/19/2025**

Shipping Carrier

**Bellavance Logistics, Inc**  
**Aime Bellavance & Sons, Inc.**  
**5 SO.Vine Street**  
**BARRE VT 05641**  
**USA**

**Shipment No..** **574434**

Recipient

**Delta Star East Inc**  
**3550 Mayflower Drive**  
**LYNCHBURG VA 24501**  
**USA**

Phone.: **1-800-257-2828**

Fax:

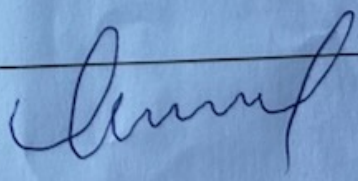
Delivery #	Freight Class	Quantity	Gross weight KG	Gross weight LB
83018487	55	2	2,180.000	4,806.081
83018488	55	2	2,877.000	6,342.704
83018523	55	2	1,013.000	2,233.285
83018745	55	1	754.000	1,662.287
83018865	55	4	2,822.000	6,221.450
83019037	55	4	3,685.000	8,124.041
83019038	55	3	2,013.000	4,437.909
<b>TOTAL</b>		<b>21 TOTAL</b>	<b>16,724.000 KG</b>	<b>36,870.139 LB</b>

**Charges:** Collect

Attachments / Comments:

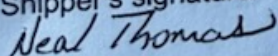
ID:

Driver Name:

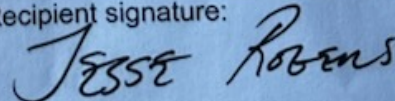
Driver Signature: 

Date:

Shipper's signature:

Date: **6/19/25**

Recipient signature:

Date: **6-20-25**

Print date:

**06/19/2025****DRIVERS COPY**

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