



INVOICE

BILL TO:
GRANE LOGISTICS EXPRESS LLC
820 JORIE BLVD SUITE 120
OAK BROOK, IL 60523

INVOICE DATE: 06/25/2025
INVOICE #: R97753
TERMS: NET 30
DUE DATE: 07/25/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/24/2025		2501 Internationale Pkwy, Woodridge, IL 60517, USA - 621 Mid Atlantic Pkwy, Martinsburg, WV 25404, USA			
		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

Grane Logistics Express
1815 Meyers Rd
Oakbrook Terrace, IL 60181
Contact: Bart Ryndak
PH: 773-922-2291



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*** Carrier Rate Confirmation Agreement***

Load Number 5201914

Carrier: ROYAL3 INC
CHICAGO IL 60638
Date: 06/24/2025

Contact: Samm Stanojevic
Phone: 630-485-7370
Fax: 630-485-6980

Order
Order: 5201914
Miles: 659.0
Temp:
BOL: 669093

Commodity: CHEMICALS - NON HAZMAT
Weight: 43200.0
Trailer: VAN
Reference: 172543 / 5503975945
Pieces 21

PU 1 Name: CHAMPION PACKAGING (WHSE) Date: 06/24/2025 1000
Address: 2501 INTERNATIONALE PKWY 06/24/2025 1000
STE 200 USE OPENDOCK PORTAL Contact: Champion Portal
WOODRIDGE IL 60517 Drvr Ld/Unld: No driver loading or unload
*****AN UNAPPROVED BROKEN SEAL MAY RESULT IN A FULL TRUCKLOAD CLAIM*****
Reference Number: BM 669093

SO 2 Name: ECOLAB Date: 06/25/2025 1400
Address: 621 MID ATLANTIC PARKWAY 06/25/2025 1400
Contact: GENERAL
MARTINSBURG WV 25404 Drvr Ld/Unld: No driver loading or unload
*****AN UNAPPROVED BROKEN SEAL MAY RESULT IN A FULL TRUCKLOAD CLAIM*****
Reference Number: AO 172543 / 5503975945

Payment (email: acctspay@granelx.com)

CARRIER FREIGHT PAY: \$2,000.00
TOTAL CARRIER PAY: \$2,000.00

Instructions

Special instructions here

Agreement

Load Number 5201914

***** FAILURE TO DO ANY OF THE FOLLOWING WILL RESULT IN A \$150.00 FINE *****

- * Driver must call Grane Logistics Express for dispatch information 773-922-6900.
- * Driver MUST count all freight and report any overages, shortages or damaged product immediately.
- * Driver MUST arrive on time for all pickups and deliveries.
- * Driver MUST notify GLX dispatcher immediately upon arrival and departure at shipper and reciever, and must provide the name of the person who signed for the freight.
- * Accessorial Requests must be sent to Extra@gograne.com at the time of occurrence. (Lumpers, detention, late fees, layover)
- * Detention requests must be reported 30 minutes before entry. Signed in/out times must be sent to Extra@gograne.

com within 24 hours of occurrence/delivery.

**DETENTION APPROVAL REQUIRES NOTIFICATION PRIOR TO THE IMPENDING DELAY. IN/OUT TIMES MUST BE ON THE BOL SIGNED BY SHIPPER/RECEIVER, AND THE POD MUST BE RECEIVED VIA EMAIL WITHIN 24 HRS OF DELIVERY
DETENTION AND ACCESSORIAL CHARGES MUST BE REPORTED WITHIN 24 HOURS**

GLX pay terms are net 30 of all valid charges with receipt of Invoice, ONLY if accompanied by a copy of the Carrier Rate Confirmation Agreement, a valid signed copy of the Proof of Delivery, and supporting accessorial documentation.

Carrier MUST electronically send valid, signed Proof of Delivery within 1 hours of delivery.

Carriers agrees to accept equal liability to that of the Shipper/Broker as defined by the Food Safety Act. In the event the Carrier breaks the seal or the seal is broken while in the possession of the freight, the Carrier assumes all cargo liability.

X Samm Stanojevic

Signature

06/24/2025


Date

DATE:

BILL OF LADING

SHIP FROM CPDI 2501 Internationale Pkwy Woodridge, IL 60517 Suite 200		Order Number 669093 Customer PO 5503975945 Carrier Name: ROYAL 3 Trailer # P5260128 Seal # 00834228	Time In: 10:17 AM Time Out: 11:00 Appt Date: 06/24/2025 Appt Time: 10:00 AM
SHIP TO ECOLAB INC. 621 MID ATLANTIC PARKWAY MARTINSBURG WV 25404		Customer Phone Number Freight Charge Terms (Freight charges are prepaid unless marked otherwise) Collect <input type="checkbox"/> 3rd Party <input type="checkbox"/> No accessorial charges without approval of shipper	

NOTE: Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C section 14706(c)(1)(A) and (B). RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between carrier and shipper, if applicable, otherwise to the rate, 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 regulation.

QTY	UoM	HM	Basic Description Identification Number, Proper Shipping Name, Hazard Class(es), Packing Group, Additional Information	Weight	Plt Qty	NMFC #	Class
2	EA		ECOLAB AIR BAG CHARGE EC100	0 Lb			
1008	CS		ECO-SAN 4-1GL EC6113979	42336 Lb	21	45000-2	60
							
1,010	Unit Total						
Gross Total Weight:				42,336 Lbs	Total Plt Qty 21		

Special Instructions: DEL APPT 6/25@2PM CONF#172543

24 Hour Emergency Contact Tel. No.
1-800-535-5053 Contract # 74072

Pro Number:
(LTL Only)

The property described above, is in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned and destined as shown above, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed here above shall be subject to all the conditions not prohibited by law, whether printed or written, herein contained, which are hereby agreed to by and accepted for himself and his assigns.

Receipt of Product Any discrepancies and/or damage of product must be reported within 24 hours of delivery or within 72 hours of the release of the product by the shipper.	Placards	Initials	Trailer Loaded	Freight Counted
	<input type="checkbox"/> Required <input type="checkbox"/> Supplied <input type="checkbox"/> Furnished by Carrier	_____ _____ _____	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver	<input checked="" type="checkbox"/> By Shipper <input type="checkbox"/> By Driver/Pallets Said to Contain <input type="checkbox"/> By Driver/Pieces

Shipper Field Shipper: Champion Packaging and Distribution Per: <u>AM 6-24-25</u> 2501 Internationale Pkwy Woodridge, IL 60517 Suite 200	Carrier Field Carrier: ROYAL 3 Per: <u>[Signature]</u> Date: Tuesday, June 24, 2025
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.	Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.