



INVOICE

BILL TO:

RTC
2000 CRAWFORD PLACE NUMBER 900
MT LAUREL, NJ 08054

INVOICE DATE: 06/27/2025**INVOICE #:** R98059**TERMS:** NET 30**DUE DATE:** 07/27/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/25/2025		5100 W 123rd St, Alsip, IL 60803, USA - 11050 Challenger Ct, Manassas, VA 20109, USA			
		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

To: Royal3 Inc. -ICC No. 0944686
Fax Attn: ROY 126

Fax (888)294-7030 Vc (630)485-7370

APPOINTMENTS - Times are scheduled by Rehmann Transportation Corp.

**** ALL Accessorials must be preapproved. ****

**ALL ACCESSORIAL PAPERWORK MUST BE FAXED TO 1-888-600-2151 WITHIN 24 HOURS.
FAILURE TO DO SO WILL RESULT IN NON-PAYMENT.**

YOU MUST CALL 1-800-206-3500 TO OBTAIN AN AUTHORIZATION NO.

***NO ADVANCES* ALL Comchecks will have a \$17 charge added including Lumpers
Carrier to provide driver(s) to affect agreed schedule according to
DOT SAFETY REGULATIONS**

**NO Brokers: by signing this amendment to contract you agree to utilize
YOUR equipment. If this load is brokered out you agree to forfeit payment.**

BILLING REQUIREMENTS: for Accounting Questions: 856-787-9729

- 1.) Original Bill of Lading/Delivery Receipt.
- 2.) Rate confirmation sheet.
- 3.) Carrier Invoice.
- 4.) ALL ACCESSORIAL PAPERWORK MUST BE TURNED IN WITHIN 24 HOURS
FAILURE TO DO SO WILL RESULT IN NON-PAYMENT.
- 5.) Copy of Operating Authority.
- 6.) Complete IRS form W-9.
- 7.) Signed contract.
- 8.) Original certificate of liability & cargo insurance - (must be sent
from your insurance agent and listing Rehmann Transportation Corp.
as Additional Insured).

This Rate Confirmation will be added to the Contract Carrier Agreement

Send invoice and supporting documents to: ap@rtcttransportation.com
or mail to: Rehmann Transportation Corp., PO Box 1028, Mt Laurel, NJ 08054

To Secure Order Driver must call 1-800-206-3500
BETWEEN 7:30-10:00 AM (EASTERN TIME) ON DAY OF PICKUP.

Addendum to Contract

Load Number: 001 498727 (This number must appear on all paperwork)

Pick-up(s):

Alsip IL 60803

Appt: 6/25/25 19:00

Consignee(s):

Manassas VA 20109

Appt: 06/26/25 12:00NOON

<u>#/Pcs</u>	<u>Commodity</u>	<u>Weight</u>	<u>Equipment</u>	<u>Amount</u>
1	Paper	44,000	VAN ONLY	2,050.00

**MUST USE MACRO POINT OR DAT TRACKING FOR ALL LOADS
VAN ONLY. EQ MUST BE NO MORE THAN 5YRS OLD.**

Carrier agrees not to solicit customers according to contract.

Authorized Signature: _____ Date: _____
Royal3 Inc. -ICC No. 0944686

Please SIGN and FAX back to 1-888-600-2151 Attn: BILL

To: **Royal3 Inc. -ICC No. 094468**
Fax Attn: **ROY 126**

Fax **(888)294-7030** Vc **(630)485-7370**

Load Number: 001 498727 (This number must appear on all paperwork)

Pick-up(s):

Roosevelt Paper
5100 W 123rd St

Alsip IL 60803

Appt: 6/25/25 19:00

PU 83930
BOL 026724

Consignee(s):

RPG Enterprises LLC
11050 Challenger CT

Manassas VA 20109

Appt: 06/26/25 12:00NOON

PO KM2306

<u>#/Pcs</u>	<u>Commodity</u>	<u>Weight</u>	<u>Equipment</u>	<u>Amount</u>
1	Paper	44,000	VAN ONLY	2,050.00

MUST USE MACRO POINT OR DAT TRACKING FOR ALL LOADS

VAN ONLY. EQ MUST BE NO MORE THAN 5YRS OLD.

Send invoice and supporting documents to: ap@rtctransportation.com
or mail to: Rehmann Transportation Corp., PO Box 1028, Mt Laurel, NJ 08054

