



## INVOICE

**BILL TO:**  
MAX TRANS LOGISTICS LLC  
219 US HIGHWAY 45 W  
HUMBOLDT, TN 38343

**INVOICE DATE:** 06/27/2025  
**INVOICE #:** R98224  
**TERMS:** NET 30  
**DUE DATE:** 07/27/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/26/2025		400 Bill Brooks Drive, Huntingdon, TN 38344 - 301 Hill Carter Pkwy, Ashland, VA 23005			
		Freight Income	1	\$2,000.00	\$2,000.00

<b>TOTAL</b>
\$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**



## Rate Confirmation Agreement

1. Driver must call booking agent when loaded, while in transit, and to confirm exception free delivery. Driver must report any delays and all delivery exceptions immediately.
2. DRIVER IS RESPONSIBLE FOR PROPER LOAD SECUREMENT. All FLATBED loads MUST BE TARPED unless otherwise specified on the confirmation sheet.
3. Carrier must provide carrier's freight invoice, including the assigned Max Trans Logistics rate confirmation number, shippers bill of lading, a signed delivery receipt providing exception-free delivery, any receipts proving preauthorized reimbursement expenses, and all other documents required by Max Trans Logistics or shipper. The Max Trans Logistics rate confirmation number must appear on the freight invoice. Failure to provide confirmation number will delay payment and may result in a charge of \$50 or more from settlement.
4. No payment for additional charges (stop-off, unloading, etc.) may be added to freight invoice without approval of Max Trans Logistics at the time of occurrence. A revised confirmation sheet authorizing extra charges must be issued by Max Trans Logistics at the time of occurrence.
5. Max Trans Logistics will issue payment within 30 days of receipt of the above paperwork requirements.
6. Rates are inclusive of any fuel surcharges.
7. This load must not be 2nd Brokered without written permission on this document. Failure to secure said permission may result in a rate reduction or refusal of payment.
8. This rate confirmation is an addendum to the transportation contract between Max Trans Logistics and carrier and must be signed and returned prior to loading. If any provisions of the rate confirmation sheet conflicts with the terms of the transportation contract, the terms of the transportation contract shall prevail and control.
9. Carrier's authorization signature on this confirmation verifies carrier has insurance in the limits designed by Max Trans Logistics for any loss or damage to shipment and/or liability to the general public. If liability for any claim is disputed, Max Trans Logistics reserves the right to withhold settlements until a mutually agreed settlement is negotiated.

Max Trans Logistics, LLC  
219 US Highway 45 W  
Humboldt, TN 38343  
(731) 784-8811  
<http://www.maxtrans.us>

Max Trans Logistics, LLC  
PO Box 11537  
Jackson, TN 38308

\*\*\* Rate Confirmation \*\*\*



Quinn Anderson  
Phone: (731) 222-5052  
Fax: (731) 222-5115  
Email: qanderson@maxtrans.us  
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5126551

<b>Carrier:</b>	Royal3 Inc	<b>Contact:</b>	BOJANA POPARA
	Chicago IL 60638	<b>Phone:</b>	(630) 485-7370
<b>Date:</b>	06/26/25	<b>Fax:</b>	(630) 485-6980

<b>Order</b>	<b>Order:</b>	5126551	<b>Commodity:</b>	Aluminum Coils
	<b>Miles:</b>	710.0	<b>Weight:</b>	
	<b>Order Type:</b>	VAN	<b>Trailer:</b>	Van (DAT)
	<b>BOL:</b>		<b>Reference:</b>	

<b>PU 1</b>	<b>Name:</b>	Granges Americas Inc.	<b>Date:</b>	06/26/25 0700
	<b>Address:</b>	400 Bill Brooks Drive		06/26/25 1900
		HUNTINGDON TN 38344	<b>Contact:</b>	Quinn
	<b>Phone:</b>	(731) 222-5127	<b>Driver Load:</b>	No driver loading or unload

<b>SO 2</b>	<b>Name:</b>	Hanover Foils	<b>Date:</b>	06/27/25 0700
	<b>Address:</b>	301 Hill Carter Pkwy		06/27/25 1400
		ASHLAND VA 23005	<b>Contact:</b>	
	<b>Phone:</b>	(804) 496-5835	<b>Driver Load:</b>	No driver loading or unload

<b>Payment</b>	<b>Carrier Freight Pay:</b>	\$2,000.00	
	<b>Total Carrier Pay:</b>	\$2,000.00	(No additional charges can be invoiced without written approval)

\*\*\* Proof of Delivery MUST be emailed or faxed to the broker within 24 hours of delivery.\*\*\*

Instructions

Granges Americas Inc. - GRANFRTN: Trailers must be free of debris, damage, or odor.

Granges Americas Inc. - GRANFRTN: Please pull into the staging area and follow instructions on the sign. Notify broker if waiting over 2 hours.

SHIPPER SHOULD BLOCK AND BRACE THE LOAD, BUT PLEASE NOTE IT IS THE DRIVER'S RESPONSIBILITY TO VERIFY IF THE LOAD IS PROPERLY SECURED BEFORE HE/SHE SIGNS THE BOL, SHUTS THE TRAILER DOORS, OR LEAVES THE YARD!

ALL FLATBED LOADS MUST BE TARPED

Granges Americas Inc. - No dropping trailers in an unsecured location.

**Driver Name:** Steve  
**Driver Cell:** (786) 763-6652  
**Driver Email:**  
**Tractor #:** 452166  
**Trailer #:** P5260112  
**Comment / ETA:**

*Aaron Bojovic*

Please Sign: \_\_\_\_\_  
(X) Accept  
( ) Decline


Mail invoice & required paperwork to: PO Box 11537 Jackson, TN 38308  
Carrier Settlements: (731) 222-5073 **payables@maxtrans.us**  
For Quick Pay: quickpay@maxtrans.us



**STRAIGHT BILL OF LADING - SHORT FROM - ORIGINAL - Not Negotiable**  
RECEIVED, subject to the classifications and tariffs in effect on the date of the issue of this Bill of Lading.

CARRIER NO.  
SHIPPER'S NO.

291906

FROM:  **GRANGES**

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract), agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff if this is a motor carrier shipment.  
Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

ROUTING

SALES ORDER NO.

MAX TRANS LOGISTICS

CONSIGNEE TO  
AND DESTINATION:

HANOVER, FOILS LLC  
301 HILL CARTER PARKWAY

ASHLAND, VA, 23005

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BUYER'S ORDER NUMBER

DATE SHIPPED  
06/26/25

COMP. PART CARRIER CAR INITIALS AND NO. SEALS  
MXNG 75645

NO. PKGS	KIND OF PACKAGE	DESCRIPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS	WEIGHT (SUBJECT TO CORRECTION)	RATE PER 100 LBS.	CNK COL	If charges are to be prepaid, write or stamp here, "To be Prepaid."
7	SKID	FOIL, ALUMINUM, NOI, not paper back	40,210 LB			ORIGIN - PREPAID
		REQUESTED DELIVERY DATE: 06/27/2025 LD# 2				
		MXTR				
		RECEIVING NOTES:				Received \$ _____ to apply in prepayment of the charges on the property described hereon.
		TOTALS:				Agent or Cashier _____ Per _____ (The signature here acknowledges only the amount prepaid.)
7			40,210 LB			
						This certifies that the description and gross weight of shipment shown hereon are correct, subject to verification by the Southern Weighing & Inspection Bureau. The fibre boxes used for this shipment conform to the specifications set forth on the box maker's certificate thereon, and all other requirements of the governing Freight Classification. Shipper's imprint in lieu of stamp, not a part of bill of lading approved by the Interstate Commerce Commission.
						PLANT NUMBER 15260112
						MANIFEST NO. Steve L
						AGENT REP 6-26-25
						DATE 38344

Ronnie S  
6-27-25

Granges Americas, Inc., Shipper, per Granges Americas, Inc.  
Permanent post office address of Shipper, 400 Bill Brooks Drive, Huntingdon, TN  
Shipper's Special Instructions: