



INVOICE

BILL TO:

SUNTECK TRANSPORT CO LLC
4500 SALISBURY RD SUITE 450
JACKSONVILLE, FL 32216

INVOICE DATE: 07/01/2025**INVOICE #:** R98704**TERMS:** NET 30**DUE DATE:** 08/01/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
06/30/2025		4875 Susquehanna Trail, York, PA 17406 - 5342 Morse Dr, Decatur, GA 30035			
		Freight Income	1	\$1,200.00	\$1,200.00

TOTAL

\$1,200.00

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

CARRIER RATE CONFIRMATION

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LOAD NUMBER 14943827 MUST APPEAR ON YOUR INVOICE!

BOOKED BY DIANE CHAMPAGNE

14943827

CARRIER ZIGI FREIGHT INC DBA ROYAL3 INC
CARRIER CODE 112754
OFFICE
DISPATCH NAME Tamsen
PHONE (630) 485-7370
FAX 630-485-6980
TOLL FREE



112754

EQUIPMENT REQUIRED VAN 53ft
WEIGHT 11000lbs
TRAILER # P5260114
REF #

DRIVER NAME Remy
DRIVER PHONE 646-705-5833

CHARGES
\$1,200.00 FLAT RATE
\$1,200.00 TOTAL

PICKUP 06/30/2025 08:00 - 10:00

ES3,LLC / CONAGRA - PA
4875 SUSQUEHANNA TRAIL
YORK, PA 17406

CONTACT SCH EMAILS IN DIRECT. TAB
PHONE
EMAIL

SHIPMENT DESCRIPTION

1 TL PALLATIZED FOOD STUFFS
BOL NOTE 06/30/2025 08:00 AM (LIVE) REF 59681842 BOL
04110000596818427
BOL NOTE 1030 ETA FOR SHIPPER - SEND DELAY

PICKUP NOTES

cpu.es3@es3.com customerservice@es3.com CPU@es3.com CPU
Scheduling 603-354-6100 opt. #5 ** FIRM PICKUP CAN'T BE LATE OR
WON'T LOAD *** **** DRIVERS TRUCK MUST BE CLEAN/FREE OF
HOLES AND FOOD GRADE AND HE MUST HAVE A SAFETY VEST

PICKUP INSTRUCTIONS

** FIRM PICKUP CAN'T BE LATE OR WON'T LOAD *** **** DRIVERS
TRUCK MUST BE CLEAN/FREE OF HOLES AND FOOD GRADE AND
HE MUST HAVE A SAFETY VEST *****

DELIVER 07/01/2025 08:00 - 12:00

VENDORS SUPPLY OF GA
5342 MORSE DR
DECATUR, GA 30035

CONTACT STEVEN
PHONE
EMAIL

DELIVERY #**SHIPMENT DESCRIPTION**

Please continue to next page

CARRIER RATE CONFIRMATION

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14943827

Carrier warrants that it is duly and legally qualified to provide the transportation services herein and holds at least \$1,000,000 in auto liability and cargo insurance of at least \$100,000. Accessorial charges must be stated above or agreed to in a subsequent signed rate confirmation between Broker and Carrier. Carrier must submit signed carrier confirmation(s) with Carrier's invoice, a legible copy or original proof of delivery. Unauthorized delayed service shall be charged to Carrier, not to exceed the actual charges assessed against Broker for which Carrier's actions are at fault. A minimum charge of \$100 shall apply to missed appointments. Carrier is prohibited from subcontracting this Load to any other Carrier or broker. Broker reserves the right to pay the delivering carrier directly and Carrier named below shall remain primarily liable as provided herein. Carrier shall defend, indemnify and hold harmless Broker, its shipper customer, and the bill of lading parties from any claims, actions or damages, arising out of Carrier's performance hereunder, including damages of any kind asserted against Broker for negligent hiring of Carrier, cargo loss and damage, theft, delay, damage to property, and personal injury or death. Carrier represents it has adequate coverage for towing and any towing invoice in excess of coverage shall be Carrier's sole responsibility. Broker shall be permitted to offset carrier payables for any loss, delay, shortage or damage. Carrier agrees that any loss or damage to customer's food grade cargo shall be considered a total loss. Carrier forfeits its right to be paid in the event Broker's freight is held hostage. Carrier payment terms are net 30 days from the date Broker receives Carrier's invoice, a legible copy or original proof of delivery, matching confirmation(s), and reimbursable receipts. If Fuel Surcharge is not separately stated, then Flat Rate is all inclusive. The Carrier, and any connecting Carrier, shall not receive for transport any freight that shall be excluded from coverage under its primary cargo policy. Delivery and pick-up dates and hours will not require the driver to violate hours of service regulations. Routing instructions are for informational purposes only. Carrier agrees that Broker's charges to its customers are confidential and need not be disclosed to Carrier. Carrier waives any rights it may have under 49 CFR §371.3 or any related or successor law or regulation. Food Safety: Carrier agrees to comply with the terms at: <https://carrterms.modetransportation.com/regulatory/>

Carrier submit invoices and backup documentation via email to sendmybill@modeglobal.com. Please access our Carrier Portal at <https://carriers.modeglobal.com> to request quick pay and make payment status inquiries.

Signature _____ Position _____ Date _____

Carrier Signature _____ Position _____ MC# 00944686 DOT# 2828543 Date _____

14785 PRESTON RD, SUITE 850, DALLAS, TX 75254 TEL 978-844-5035

Page 1

SHIP FROM

FOB: ☐

Bill of Lading Number: 04110000596818427



SHIP TO

Location #:

FOB: ☐

CARRIER NAME: ESHL

Trailer number: YRLI260114 CPUU CPU

Seal number(s): In: 4403571

SCAC: ESHL

Pro number:

CARRIER INSTRUCTIONS:

Name: _____

Address:

City/State/Zip:

SPECIAL INSTRUCTIONS:

Freight Charge Terms: *(freight charges are prepaid unless marked otherwise)*

Prepaid _____ Collect X 3rd Party _____

1

☐ Master Bill of Lading: with attached underlying
(check box) Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SKID (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
165933	1188	10143	Y		0012470916
GRAND TOTAL	1188	10143			

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M. (X)	COMMODITY DESCRIPTION <small>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(e) of NMFC item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE				NMFC#	CLASS
19	PLT	1188	CSES	10143		GROCERY		
19		1188		10143		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: \$

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; and all the terms and conditions of the NMFC Uniform Straight Bill of Lading.

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

Subject to check

Shipper

Signature _____

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.

Trailer Loaded:

☒ By Shipper☐ By Driver

Freight Counted:

☒ By Shipper☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

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 DOT emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted