



## INVOICE

**BILL TO:**  
LOON LOGISTICS LLC  
208 AZAR COURT  
ARBUTUS, MD 21227

**INVOICE DATE:** 07/11/2025  
**INVOICE #:** R100282  
**TERMS:** NET 30  
**DUE DATE:** 08/11/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
07/10/2025		3801 Southwestern Blvd, Baltimore, MD 21229 - 425 Athena Drive, Athens, GA 30601			
		Freight Income	1	\$1,100.00	\$1,100.00

TOTAL
\$1,100.00

### 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**

PRO # 10242

## Rate Confirmation

07/10/25 07:33:57 (EST)



LOON LOGISTICS, LLC  
3901 BENSON AVENUE  
BALTIMORE MD 21227

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NED WINAND  
(443) 833-1525 (p)  
Nwinand@shipwtl.com

ROYAL3 INC  
(630) 485-7370 (p)

MC # 944686  
DOT 2828543  
Driver

Truck #  
Trailer #  
Cell #

Size & Type: VAN  
Pieces:

Description: MANGA GLASS 1 MT  
Weight: 42000

Miles: 611

CHARGES		DISPATCH NOTES
LINE HAUL RATE	1100.00	
FUEL SURCHARGE		
TOTAL RATE	1100.00	

## PICK 1

BALTIMINE/KIMPE LLC  
3801 SOUTHWESTERN BLVD  
BALTIMORE MD 21229  
Hours : 0700-1400  
Phone/Contact: (443) 825-9991 KEVIN BENN  
APPT, STRAPS NEEDED

Appointment 07/10/25  
Appt Notes: STRAPS NEEDED  
Ref # 003824400 N.8

## STOP 1

CERTAINTEED ATHENS  
425 ATHENA DRIVE  
ATHENS GA 30601

Appointment 07/11/25  
Ref # 003824400 N.8

*All carriers must accept Macropoint tracking prior to pickup if requested to avoid a \$1000 fine*

Carrier Signature \_\_\_\_\_

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
M D

Send Carrier Bills to the Address Above

PRO # 10242

must appear on all Invoices



19) Manga Glass  
on pallet  
7-10-25 11:00 HRS

Date: 07/10/25

**SHIP FROM**

Name: Baltimore % Kimpe America LLC.  
Address: 3801 Southwestern Blvd  
City/State/Zip: Baltimore, MD 21229

**P.O. 3003824400 N.8**

**INV 3470**

**SHIP TO**

Name: CertainTeed LLC  
IG Athens  
425 Athena Dr  
Athens, GA 30601-1618

**CARRIER NAME:** Royal 3 INC

Trailer# H116006

Truck# 743

Seal number(s): 1360893

**SCAC:**

Pro number:

*[Signature]*  
7/11/25

**THIRD PARTY FREIGHT CHARGES BILL TO:**

Name:  
Address:  
City/State/Zip:

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

Prepaid \_\_\_\_\_ Collect \_\_\_\_\_ 3<sup>rd</sup> Party \_\_\_\_\_

**SPECIAL INSTRUCTIONS:**

check box

**CUSTOMER ORDER INFORMATION** CUSTOMER ORDER NUMBER # PKGS WEIGHT PALLET/SLIP (CIRCLE ONE)

Master Bill of Lading: with attached underlying Bills of Lading **ADDITIONAL SHIPPER INFO**

			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
<b>GRAND TOTAL</b>					

1 MT supersack on pallet **CARRIER INFORMATION**



<b>STRAIGHT BILL OF LADING (Original Non-Negotiable)</b>					<b>Pro Number: <u>10242</u></b>								
<b>Property Broker:</b> BTX Global Logistics (MC# 461607) <b>Carrier:</b> TO BE ASSIGNED <b>Pickup Date:</b> 7/10/2025 <b>BTX Reference #:</b> BWI20013555 <b>Freight Charges:</b> Third Party					Attach Pro Sticker Here								
S H I P P E R	Baltimine Llc 3801 Southwestern Blvd.  Baltimore, MD 21229 US Kevin Benn Phone: (443) 825-9991			C O N S I G N E E	Certainteed Llc/Ig Athens 425 Athena Dr  Athens, GA 30601 US Phone:								
	PO Number SO Number Invoice Number Reference 1 Reference 2 Reference 3				003824400 N.8								
<table style="width:100%; border: none;"> <tr> <td style="width: 33%;"><b>COD AMOUNT:</b></td> <td style="width: 33%;"><b>COD FEE:</b></td> <td style="width: 33%;"><b>TOTAL CHARGES:</b></td> </tr> </table>							<b>COD AMOUNT:</b>	<b>COD FEE:</b>	<b>TOTAL CHARGES:</b>				
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<small>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, from the carrier. I hereby declare that the contents of this consignment are fully and accurately described by the proper shipping name and are classified, packaged, marked and labeled and are in all respects in proper condition for transportation according to applicable international and national government regulations, which said carrier agrees to carry to destination, if on his route or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether printed or written, herein contained, including all conditions of the Uniform Straight Bill of Lading and the back thereof, which are hereby agreed to by the shipper and accepted for himself and his assigns. BTX Global Logistics Role in this shipment is that of a BROKER ONLY - As Such we agree only to Locate and hire a Third Party to Transport the Goods - BTX Global Logistics is NOT the Carrier on this Shipment.</small>													
<table style="width:100%; border: none;"> <tr> <td style="width: 45%;"> <b>Truck / Equipment Type / Driver:</b>  <b>Trailer / 53' Van / Single</b> </td> <td style="width: 10%;"> <input type="checkbox"/> Partial Load       </td> <td style="width: 10%;"> <input type="checkbox"/> Pallet Exchange       </td> <td style="width: 10%;"> <input type="checkbox"/> Tarp Required       </td> <td style="width: 10%;"> <input type="checkbox"/> Shipper Load       </td> <td style="width: 10%;"> <input type="checkbox"/> Freight Stackable       </td> <td style="width: 10%;"> <input type="checkbox"/> Load Chains       </td> </tr> </table>							<b>Truck / Equipment Type / Driver:</b> <b>Trailer / 53' Van / Single</b>	<input type="checkbox"/> Partial Load	<input type="checkbox"/> Pallet Exchange	<input type="checkbox"/> Tarp Required	<input type="checkbox"/> Shipper Load	<input type="checkbox"/> Freight Stackable	<input type="checkbox"/> Load Chains
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Pcs	HM*	Len (in)	Wid (in)	Hgt (in)	Description of Articles, Special Marks and Exceptions <small>List Hazardous Materials First</small>	Weight (lb)							
1					MANGA GLASS - 1 MT Supersacks	42000							
*** Total Pieces & Weight (lb)***						42000							
<small>* An X in the HM column indicates Hazardous Material</small> <b>SPECIAL INSTRUCTIONS:</b>													
<small>Declared Value Clause</small> The agreed or declared value of the property is hereby specifically stated by the shipper to the carrier to be not exceeding _____ per _____. Carrier reserves the right to accept or deny shipper's declaration based on its tariff and/or terms and conditions then in effect.					Subject to Section 7 of the conditions, if this shipment is delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other charges.								
X <u>7-10-25</u> Shipper Signature      Printed Name      Date					Consignee: Certainteed Llc/Ig Athens X _____ Consignee Signature      Printed Name      Date								
Carrier: TO BE ASSIGNED					Carrier Signature: <u>JEFF Saint-Hilaire</u> Date:								
<b>DRIVER SIGNATURE ACKNOWLEDGES RECEIPT OF GOODS</b>													



PACKAGE HANDLING UNIT

COMMODITY DESCRIPTION LTL ONLY

QTY	QTY	TYPE	H.M. (X)	WEIGHT	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	NMFC #	CLASS
19		1 supersack on pallets		20.94 Tons	MANGA GLASS		
19		1 supersack on pallets		20.94 Tons	MANGA GLASS		
					GRAND TOTAL		.

declared value of the property as follows: **COD Amount: \$** \_\_\_\_\_ Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or

\*The agreed or declared value of the property is specifically stated by the shipper to be not exceeding \_\_\_\_\_ or

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).**

<p>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 to all applicable state and federal regulations.</p>		<p>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.</p> <p>_____ Shipper Signature</p>
<p><b>SHIPPER SIGNATURE / DATE</b> 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.</p> <p><i>[Signature]</i> 7-10-25</p>	<p><b>Trailer Loaded: Freight Counted:</b></p> <p>By Shipper _____</p> <p>By Driver _____</p> <p>By Driver/pallets said to contain _____</p> <p>By Driver/Pieces _____</p>	<p><b>CARRIER SIGNATURE / PICKUP DATE</b> 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.</p> <p><i>JEFF</i> <i>JEFFSON</i> <i>Saint Louis</i></p>