



BILL TO: ALS 3517 SCHEELE DRIVE JACKSON, MI 49202 INVOICE DATE: 07/16/2025 INVOICE #: R100933 TERMS: NET 30 DUE DATE: 08/16/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
07/15/2025		2235 BARRAUD AVE, Norfolk, VA 23504 - 1115 SOUTH WAYNE STREET, Saint Marys, OH 45885			
		Freight Income	1	\$1,400.00	\$1,400.00

TOTAL

\$1,400.00

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

Automated Logistics Systems, LLC

ORDER # 611996-1 Carrier: ROYAL3 INC Trailer Type: Van

A Macropoint connection must be established prior to scheduled pickup time or you are subject to a \$50 penalty or removal from shipment without pay. Contact your Carrier Sales Rep to establish an ELD connection or have driver download the Macropoint Application on their phone.

Stop # 1 Pickup	- Appointment Required					
US PORT SERV	ICES	Earliest:	7/15/202	5 11:00		
2235 BARRAUD	AVE	Latest:	7/15/202	5 11:02		
Norfolk, VA 235	04	Weight:	43320	LBS		
			15.00	PCS	0	FT
Stop # 2 Deliver	гу					
Rheinmetall St M	larys	Earliest:				
1115 SOUTH W		Latest:	7/16/202	5 12:00		
Saint Marys, OH	45885	Weight:	43320	LBS		
			15.00	PCS	0	FT
Total Mileage: 66	52					
Pay Summary:	_	Remarks PU # 91;				
Flat Rate:	\$1,400.00					
Other:	\$0.00					
Fuel Surcharge:	\$0.00					
TOTAL:	\$1,400.00	Tender A	Accepted E	By:		

Carrier Rep: Zayne Ballard Phone: 517-888-5000 Cell: 616-888-4511 Fax:

1. The following information is REQUIRED at each stop:

a. Pickup: Onsite notification, piece count, weight, BOL number. Confirmed with ALS Employee PRIOR to departure. Driver is responsible for ensuring the securement of freight.

b. Delivery: Onsite notification, POD name

c. A SIGNED POD, Invoice, and Rate Confirmation must be provided within 14 business days of delivery or could result in a rate reduction. All Quickpay carriers must send this information immediately to quickpaygroup@automatedlogistics.com or risk payment being handled by standard payment terms. All others must send their paperwork to ap@automatedlogistics.com d. Driver must call 517-782-7500 x4 to reach the tracking team to provide all updates.

2. Order number (upper right-hand corner of this form) MUST accompany your invoice to ALS, along with the original BOL

and Proof of Deliveries within 14 days of delivery or deductions from settlement will occur in the form of a late fee. 3. Bills of Lading must be signed and dated by shipper, carrier, and consignee. Carrier is responsible for these duties

4. All unplanned delay information must be provided to ALS immediately in writing

5. Any trailer dropped at an intermediary stop before delivery to final consignee must be left in a secure and protected manner including chains and tarps for open deck trailers. In the event the driver leaves the trailers without tarping or other securement, the carrier is liable for damages due to exposure of cargo.

6. Unless otherwise specified on this rate con, all shipments are tendered for DEDICATED USE of equipment

7. It is the responsibility of the motor carrier and the driver to ensure that any cargo aboard a vehicle is properly loaded and secured.

8. Disclaimer: All services by Automated Logistics are subject to the terms and conditions at www.automatedlogistics.com/terms.html

Name: US	07-15	-2025						91384		
		Date: 07-15-2025				DING -	MASTER			Page
		SHIP	EROM	and serve	A STORE AND A S	Bill	of Ladin	g Number: ALS71	7222	
	SHIP FROM Name: US Port Services					ALS	Load N	umber: LD-924264		
Address: 2235 Barraud Ave					Shipment ID					
City/State/Zip: Norfolk, VA 23504						ner Order Nu	mber:			
Pickup Appt#:					Ref Numbers: SM000188 9:12					
		SHI	P TO		all and a start	CARRIE	R: ALS Brok	kerage		
Name. RI	heinmeta					Trailer N	umber:			
		uth Wayne Street				Seal Nur	nber(s):			
		nt Marys, OH 4588	5	1.0		SCAC: A	ULS			
						Pro Number: E611996				
	THI	RD PARTY FREIGI	HT CHAR	GES BILL	то:	Carrier C	Quote Numbe	er:	1	KC .
Name:						· 9		s:(freight charges prepaid unle	ess marked)	
Address:						_Freight C	harge Term	s:(Ineight charges propose		
City/State			0400004			_Prepaid_	Collec	t 3rd Party[X] Master Bill of Lading: with a	attached	
SPECIAL	INSTRU	CTIONS:PU # ORI	D109864				(check box)			
					CUSTOMER ORI	DER INFOR	MATION	didentying bins or beauty		
CUST	OMER O	RDER NUMBER	# PLT		- 7.P			TIONAL SHIPPER INFO		
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The state of	1	TOTAL	15	43320	.00 Lb	学校社会			and a line and	
					CARRIER II	NFORMATI	ION			
	HANDLING UNIT PACKA		KAGE	WEIGHT	H.M. (x)	4	MODITY DESCRIPTION		ONLY	
ατγ	TYPE	DIM	QTY	TYPE			1	stowing must be stowing must be kaged as to ensure safe transportation with ordi		CLASS
<u> </u>							S	ee Section 2(e) of NMFC Item 360		70
15	Pallet	58 x 45 x 37 (ln)	0		43320.00 Lb			Rubber Preservatives	172160	70
Where the rat	te is depend dared value	ent on value, shippers are of the property as follows:	required to	state specifica	say in writing the		COD	Amount: \$		
		alue of the property is spe	ecifically stat	ed by the ship	pper to be not exceeding	9		rms: Collect: Prepaid: stomer check acceptable:		
	per bility Lim	vitation for loss or	damage	in this sh	ipment may be a	applicable.	See 49 U.S.	C 14706(c)(1)(A) and (B).		
ECEIVED S	ubject to ind	ividually determined rates	or contracts	that have be	en agreed upon in	The carrier sh	all not make deliv	very of this shipment without payment of	freight	
ritino betwee	n the carrier	and shipper, if applicable	, otherwise	o the rates, cl	lassifications and	and all other la	awful charges.			
ules that have been established by the carrier and are available to the shipper, on request, and o all applicable state and federal regulations.							Shi	pper Signatu	ire	
		IRE / DATE 7-	15-2	CONSIC	SNEE SIGNATURE		1	CARRIER SIGNATURE / PI		
his is to certify	y that the ab	ove named materials are	properly	·	M		C	Carrier acknowledges receipt of pack Carrier optimies emergency response	ages and required	l placards. nade
assified,packa	aged, marke	d and labeled, and are in according to the applicab	proper	PRINT	WIE C	ler	1	available and/or carrier has the DOT	emergency respon	nse
the DOT.	ansportation	according to the approac	ie regulore.	DATE	9-1	ES	- WC	guidebook or equivalent documentation		
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