

**Bill to:**

GTI USA INC.  
4201 WESTOWN PARKWAY SUITE 114,  
WDM,  
IA,  
50266

Invoice Date: 08/10/2023

Invoice #: 211905

Terms: NET 30

Due Date: 09/10/2023

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
08/08/2023		405 Peach Avenue, Owensville, MO, USA - 334 County Road 16, Canton, NY 13617, U.S.			
			1	2500	2500

TOTAL
2500

**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 and Load Confirmation



GTI USA INC  
\*\*ADDRESS CHANGE\*\* 7780 OFFICE PLAZA DR. S, STE 130  
West Des Moines, IA 50266  
Brian King  
brian.king@thegtigroup.com

**Load Number:** 211905

**Date:** 08/08/2023

**Equipment Type:** Van

**\* GTI Office:** DM

**HazMat:** ☐

**Temperature Controlled:** ☐

**Temperature Run Type:**

**Customer Specific Instructions:** \$150.00 FEE IF WE DO NOT RECEIVE A PICTURE OF BOL/POD FROM DRIVER BEFORE THEY LEAVE SITE. DRIVER MUST ACCEPT AND RUN MACRO POINT THROUGHOUT TRANIST TO AVOID \$150.00 PER DAY FEE. \$250 FOR LATE DELIVERY WITHOUT PROOF OF BREAKDOWN OR WEATHER DELAY.

**Special Considerations:**

**Container/Trailer Number:** W94951 (53' DV)

**Carrier:** ROYAL3 INC

**Contact:** KELLY IVANOVIC, (p) (f)

**MC #:** MC944686

**Actual Dispatcher:**

**Total Weight:** 28,060

**Temperature Setting Minimum:**

**Temperature Setting Maximum:**

**Customer Confirmation Notes:** \$150.00 FEE IF WE DO NOT RECEIVE A PICTURE OF BOL/POD FROM DRIVER BEFORE THEY LEAVE SITE. DRIVER MUST ACCEPT AND RUN MACRO POINT THROUGHOUT TRANIST TO AVOID \$150.00 PER DAY FEE. \$250 FOR LATE DELIVERY WITHOUT PROOF OF BREAKDOWN OR WEATHER DELAY.

**Imported Load Notes:**

**Customer Reference #:** J920093620

### Shipper Pickup (Stop 1)

Rath LLC  
405 East Peach Avenue  
Owensville, MO US 65066  
**Expected Date:** 08/08/2023  
**Shipping/Receiving Hours:** 07:00-15:30  
**Appointment Required:** No  
**Appointment Time:**  
**Contact:** Karen McKinney 573 4372132

**Pickup Instructions:** FCFS Facility  
**Shipper References:** 1004P-1004079652  
**Pickup/Delivery Number:** J920093620  
**Stop Name:** Rath LLC  
**Shipping/Receiving Phone #:** 573 4372132

### Consignee Delivery (Stop 2)

Corning Inc  
334 County Route 16  
Canton, NY US 13617  
**Expected Date:** 08/10/2023  
**Shipping/Receiving Hours:** 07:00-16:00  
**Appointment Required:** No  
**Appointment Time:**  
**Contact:** Chris Castell 315-379-3200

**Delivery Instructions:** FCFS Facility  
**Consignee References:**  
**Pickup/Delivery Number:** 1004P-1004079652  
**Stop Name:** Corning Inc  
**Shipping/Receiving Phone #:** 315-379-3200

### Shipment Information

Handling Unit		Package				
Qty	Type	Qty	Type	Weight	Commodity Description	Cargo Summary
0		12	Pieces	28060 lbs	BRICK	0 BRICK, 28060 lbs

Carrier Fees	
Description	Cost
Net Freight Charges	USD 2,500.00
Total Cost	USD 2,500.00

INVOICING INSTRUCTIONS: Settlements are paid within 30 days from the first business day after receipt of your Invoice Pack and/or when load is Released. All invoices must include a SIGNED DELIVERY RECEIPT, BOL, RATE CON, INVOICE # and ORDER # and be sent to: Accounting@thegtigroup.com.

\*\*\*NEW ADDRESS\*\*\* 7780 Office Plaza Dr. S, Ste 130, West Des Moines, IA 50266

We DO NOT require originals when we receive legible digital copies.

The undersigned hereby acknowledges as correct and accepts the referenced shipment on behalf of GTI USA. It is agreed that the charges indicated above include all costs and fees in connection with the shipment as described. All advances are issued less the corresponding fees unless agreed upon in writing with the GTI Capacity Executive. All accessorials must be pre-approved prior to billing.

Carrier acknowledges and agrees that all freight tendered to it by Broker shall be transported on EXCLUSIVE (no co-mingling or combining customers freight) equipment operated only under the authority of MC# Carrier and that Carrier shall not in any EVENT sub-contract, broker, or in any other form arrange for the freight to be transported by a third party without the prior written consent of Broker. In the event that Carrier breaches this provision, Carrier WILL remain directly responsible for any and all loss, liability, damage, claim, fine, cost or expense including reasonable attorney's fees, arising out of or in any way related to the use of any subcontractor in violation of this provision regardless of whether arising from the conduct or omissions of Carrier, the subcontractor, or any other third party. Carrier will also be subjected to 100% reduction in rate if this provision is breached at any time. GTI reserves the right to request additional documentation to verify shipment was hauled as agreed to by this rate confirmation.



Statement #29781

Oscar Rojas

7/24/2023

Truck # 912

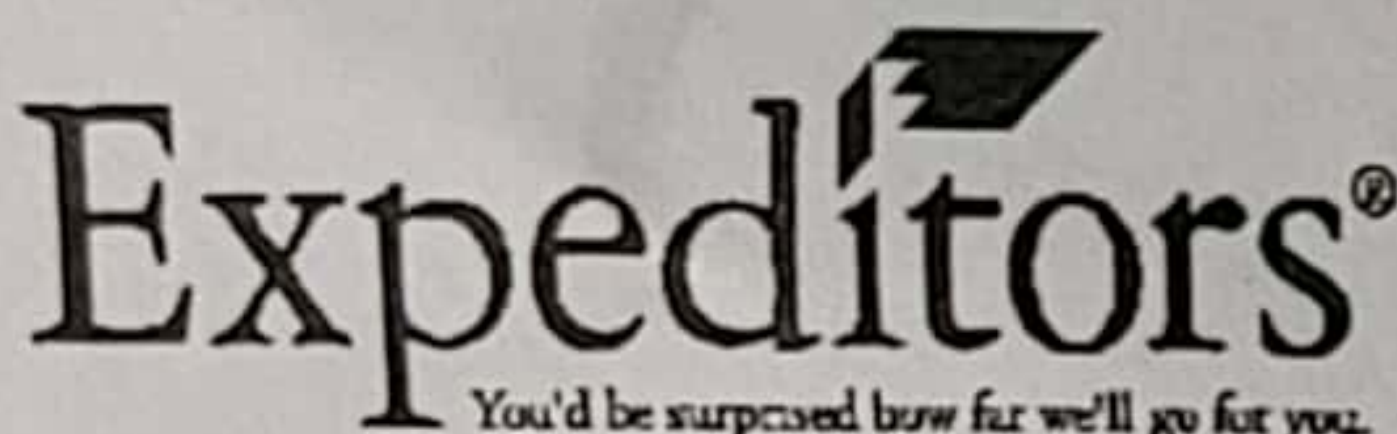
Oscar Rojas  
4963 RIVERSIDE DR  
Pompano Beach, FL 33067

**Trips :**

Date	Trip #	Route	Description	Loaded Miles	Empty Miles	Total Miles	Amount
07/18/2023	51205.00	New Orleans, LA-Orlando, FL	673 total miles @ 0.5700	646.00	27.00	673.00	\$383.61
Total:				646.00	27.00	673.00	\$383.61

Check Amount:	\$383.61
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Ship Date	Origin	Dest
08/08/23	STL	JFK

### Contract of Carriage

For Service Conditions, please refer to:  
[https://www.expeditors.com/Transcon\\_Service\\_Conditions](https://www.expeditors.com/Transcon_Service_Conditions)

J920093620

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SHIPPER INFORMATION				CONSIGNEE INFORMATION			
Shipper Account # G3144979				Consignee Account # G1551985			
Shipper Name (From) Rath LLC				Consignee Name (To) Corning Inc.			
Address 405 East Peach Avenue				Address 334 County Route 16			
City Owensville	State MO	Country US	Code 65066	City Canton	State NY	Country US	Code 13617
Contact Karen McKinney		Phone 573 4372132		Contact Chris Castell		Phone 315-379-3200	
Shipper Reference				Consignee Reference 1004P-1004079652			
Payment Method <input type="checkbox"/> Prepaid <input type="checkbox"/> Collect <input checked="" type="checkbox"/> 3rd Party <small>If no payment method is selected, Shipper will be billed for all charges.</small>				Service Requested Deferred			
THIRD PARTY INFORMATION				Handling Information			
Third Party Account # G0837231				If no service level is selected, shipment moves Next Day or actual service provided.			
Third Party Name (To) Corning Incorporated				Special Instructions CNEE REF: 1004P-1004079652.			
Address 1 Riverfront Plaza				Seal # 307226			
City Corning	State NY	Country US	Code 14831				
Contact Jeff Beck		Phone 607-974-9000					
Third Party Billing Reference							
PIECES	DESCRIPTION	ACTUAL WEIGHT	LENGTH	WIDTH	HEIGHT	Declared Value for Carriage	
12	BRICK					Expeditors liability for loss or damage shall be limited per the reverse hereof unless a higher amount is specified here \$ N.V.D.	
TOTAL PIECES		TOTAL WEIGHT	28060	Amount of Insurance			
				Insurance if insurance is requested in accordance with the conditions hereof, indicate amount to be insured here \$ NIL			
				International Customs Value \$ N.V.D.			

Does this shipment contain dangerous goods? ONE BOX MUST BE CHECKED

☒ No ☐ Yes - as per attached Shippers Declaration ☐ Yes - Shippers Declaration Not Required

SHIPPER HEREBY CONSENTS TO A SEARCH OR INSPECTION OF THE CARGO PURSUANT TO ANY APPLICABLE LAW OR REGULATION, INCLUDING 49 C.F.R. 1548.9(b)

Shipper's Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date / Time \_\_\_\_\_

Received By: *[Signature]*

I certify the goods have been received in good order and condition.

Print Name *RAY Montroy*

Date *8/10/23* Time *12:05 pm*

Received By: \_\_\_\_\_

I certify the goods have been received in good order and condition.

Print Name \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

Received By: \_\_\_\_\_

I certify the goods have been received in good order and condition.

Print Name \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

An original version of this image, which can always be generated upon request, sets forth terms and conditions of service on the reverse side of this page.

All services provided are subject to these terms and conditions.



J920093620

Rath LLC  
405 East Peach Avenue  
Owensville, MO 65066

ELECTRONIC IMAGE

SUBJECT TO TERMS AND CONDITIONS