



Bill to:
VERIHA LOGISTICS, INC

Invoice Date: 01/25/2024
Invoice #: 1225235
Terms: NET 30
Due Date: 02/25/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
01/23/2024		5511 W Ten Rd, MEBANE, NC 27302 - 9220 Commerce Parkway STE 100, GRAYSLAKE, IL 60030			
			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

Veriha LogisticsPO Box 456
Marinette, WI 54143**(M) 715-732-4431 (F) 715-732-2363****Page 1****How to Get Paid:****Submit freight bill and required paperwork to carrierinvoices@veriha.com****Payment Terms:****Default payment terms are Net 30 from the date received****Quick Pay:**

1. You can select Quick Pay option for a 2% fee, through TriumphPay
2. Getting started on TriumphPay:
3. secure.triumphpay.com to create an account with TriumphPay, or if you already have a TriumphPay account, enter your login information.
4. Once logged in, select Veriha Logistics as your broker and confirm the relationship through authentications.
5. Select your preferred payment term, your payment type, and verify your carrier information.
6. Send Notice of Assignment/Release letters to: verihalogistics@noa.triumphpay.com

Tracking Required:**Carrier Must Provide Automated Tracking-Macropoint, Driver APP, or ELD.
Failure to do so will result in a fine.****Carrier:** ROYAL3 INC
CHICAGO IL 60638
Date: 01/23/2024**Contact:** Mike Zivanovic
Phone: 6304857370
Fax: 6304856980**Order**
Order: 1225235
BL # : 4104371280
Miles: 812.0**Commodity:** MEDICAL SUPPLIES
Weight: 7752.0
Trailer: Van Trailer**PU 1** Medline distribution center C57
5511 W Ten Rd
MEBANE NC 27302
Reference number: PO 4104371280Pick Between 01/23/2024 0915
and 01/23/2024 1700
Driver Load: LL**SO 2** Medline Industries - C02
2200 Cornerstone Parkway STE 100
GRAYSLAKE IL 60030
Reference number: DO 2817671Del Between 01/24/2024 0800
and 01/24/2024 1500
Driver Unload: LU**Payment**
Carrier Freight Pay: \$1,200.00
Total Carrier Pay: \$1,200.00**Instructions**

Special instructions here

-
- Rate is contingent upon successful and on-time completion of the load.
 - Any accessorial not listed above (including, but not limited to, labor, detention, layover charges, etc.) must be pre-approved by Veriha; failure to obtain pre-approval will result in non-payment. Driver detention must be clearly noted on the BOL. Receipts must be provided for any third party (e.g., lumber) charges. Supporting documentation must be provided or reimbursement may be denied. Standard charges: Stop off \$50.00, Detention \$50.00 per hour after the first 2 hours of appointment time, Layover \$150.00 only if applicable.
 - Any directions given by Veriha or its customers whether orally and/or electronically are for informative purposes only and it is the carrier's sole responsibility to confirm and will be solely responsible for any fines.
 - Driver must report any overages, shortages, or damage of the product immediately to Veriha.
 - Driver must contact Veriha within 1 hour prior to detention occurring or detention will not be paid.
 - The driver should never move to another location without prior authorization from Veriha or will not be paid stop-off.
 - Do not dispatch a driver who cannot meet transit time without violating hours of service or other safety rules. Nothing in this rate confirmation constitutes a request to violate Hours of Service or other safety rules or to coerce a driver to do so.
 - Brokerage of this shipment by the carrier is prohibited and will void Veriha's obligation to pay the carrier.
 - Driver is required to scale the shipment prior to departing the shipper and is responsible for legal weight for transit and ensuring the load is properly sealed.
 - The carrier must have \$1,000,000 in auto coverage and \$100,000 in cargo coverage. If the carrier's policy contains a schedule of covered vehicles or equipment, the carrier will not transport this shipment using a vehicle and/or equipment that is not listed as scheduled on the carrier's cargo insurance policy, and the Carrier's cargo policy must not exclude the coverage of any commodities or cargo transport in this shipment.

Agreement

Please sign below and email back to

Brittany Mylener

Signature:

Printed Name and Title:

PALETS

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UNIFORM FREIGHT BILL OF LADING

Original - Not Negotiable

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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: SHIPPERS BOL# 2570071396
 DATE 01/18/2024
 COMPANY NAME MEDLINE INDUSTRIES LP
 5511 WEST TEN RD
 C57
 MEBANE, NC 27302
 CARRIER SCAC VTHG
 Seal No
 Trailer No
 CARRIER Pro No

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to and discharge at the place named in the bill of lading. Every service to be performed hereunder shall be subject to all conditions and restrictions of the carrier's tariff, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for shipment at this date.

DESCRIPTION Medical Supplies FAK70
 CONSIGNEE TO: 0000990151
 CUSTOMER NAME & ADDRESS
 C02 MEDLINE INDUSTRIES LP
 2200 CORNERSTONE PKWY STE 100
 GRAYSLAKE DC C02
 GRAYSLAKE, IL 60030
 999-999-9999
 PACKING LIST Yes
 Consignee's PO 4104371280
 Shipper's Reference 8182731664
 WEIGHT 7752
 PIECES 670

For all OSAD issues please send an email to carrierdisposition@medline.com

SPECIAL DELIVERY INSTRUCTIONS

BILLABLE ACCESSORIES
 Freight is prepaid unless otherwise noted.
☐ Check Box if Collect
 Collect on Delivery \$ _____ and remit to: _____ State _____
 Street _____ City _____

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
 The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required payments. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per

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.
 Mail all freight bills to: Medline Industries, Inc. C/O Data2Logistics (MEDL01)
 PO BOX 61050
 Ft Myers, FL 33906
 Date 1/23/24

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

No civil action for collection of merchandise or overcharge claim may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are contained on the back hereof or in a separate contract.

I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
 II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
 III. Inbound shipments and collect shipments to a Shipper facility; valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Shrink Wrap Intact ☐ Yes ☐ No
 Consignee Signature _____ Date _____
 Packing List Intact ☐ Yes ☐ No
 Pieces _____

UNIFORM FREIGHT BILL OF LADING

Original - Not Negotiable

RECEIVED, subject to individually determined rates or contracts that have been agreed to in writing between the carrier and shipper. If applicable, otherwise, the rates, classification and rules that have been established by the carrier and are available to the shipper on request.

FROM: **SHIPPER'S BOL#**
2570071396

DATE: 01/18/2024

COMPANY NAME: MEDLINE INDUSTRIES LP

5511 WEST TEN RD

C57

MEBANE, NC 27302

Seal No

Trailer No

CARRIER PRO NO

VTHG

PALLETS

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The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination. Upon receipt of the goods at destination, the carrier shall be subject to all conditions not prohibited by law, whether herein contained, including due conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION

Medical Supplies FAK70

PIECES

670

WEIGHT

7752

SHIPPER'S

REFERENCE

8182731664

CONSIGNEE'S PO

4104371280

Packing

List

Yes

CONSIGNEE TO:

C02 MEDLINE INDUSTRIES LP

2200 CORNERSTONE PKWY STE 100

GRAYSLAKE DC C02

GRAYSLAKE, IL 60030

999-999-9999

MEDLINE INDUSTRIES

DROP DATE 1/24/24

SEAL NUMBER

UNLOAD DATE 1-25-24

OF PIECES RCVD 670

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIES

Freight is prepaid unless otherwise noted.

☐ Check box if Collect

Collect on Delivery \$

Street

City

and remit to:

State

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

SPECIAL DELIVERY INSTRUCTIONS

Short Over Damaged 0

COD Check ☒ Shipper ☐ Consignee

Consignee by Pieces AND Pallets

Signature: Chad [Signature]

Date: 1/23/24

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per

Shipper per

Medline Industries, Inc. C/O Data2Logistics (MEDL01)

PO BOX 61050

Ft Myers, FL 33906

Date

1/23/24

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo to as to provide for the receipt by shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

I. In the case of inbound shipments, the SCAC of the carrier to be paid for the movement and complete and valid bill of lading number.

II. In the case of outbound shipments, the SCAC of the carrier to be paid for the movement and complete and valid bill of lading number.

III. Inbound shipments and collect shipments to a shipper facility, valid air-digital shipper purchase order number, work order number, or return goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the carrier will normally be handled in single line service. Handling of a shipment by carrier and a connecting carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name)

Consignee Signature

Date

Packing List Intact

Yes ☐ No ☐

Shrink Wrap Intact

Yes ☐ No ☐

Pieces

Yes ☐ No ☐

SHIPPER'S BOL# 2570071396

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