



Bill to:  
Redwood

Invoice Date: 02/13/2024  
Invoice #: 3325555  
Terms: NET 30  
Due Date: 03/13/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
02/12/2024		1900 N HWY 201, Mountain Home, AR 72653 - 65 Pitts Station Rd, Highway 221 North, Marion, NC 28752			
			1	\$1,634.00	\$1,634.00

TOTAL
\$1,634.00

**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 CONTRACT & RATE CONFIRMATION

Carrier: Zigi Freight Inc. DBA Royal3  
Inc  
Attention: Samm .  
MC #: 944686  
Direct (630)485-7370

## BILLING DETAILS

Transflo Use Broker ID: TSGNV  
Velocity:  
Email: pod@redwoodlogistics.com

Carrier must submit all payment documents together at the same time including Invoice, POD, Lumper receipt (if applicable) and this signed rate confirmation by one of the above methods for payment. Invoice and rate con amounts must match or will lead to delays in payment.

Sign up for payment information and quick pay options at [www.TriumphPay.com](http://www.TriumphPay.com)  
Questions? Call (866) 912-2763

## Redwood Load# 3325555

Redwood Rep: Ryan Ruholl  
tel. (312)698-8288 x8288  
Email: rruholl@Redwoodlogistics.com  
After Hours (877)874-7400 ext 9

**Note: PLEASE REPLY WHEN RECEIVED PLEASE READ ALL THE NOTES ON YOUR RATE CON** Detention may only be approved if carrier is on time for pick up and/or delivery. Work-ins are not eligible for detention. IN AND OUT TIMES MUST BE ON THE BILLS TO BE ELIGIBLE FOR DETENTION - BILLS MUST BE SENT TO BROKER NO LATER THAN 2 BUSINESS DAYS AFTER DELIVERY IN ORDER TO REQUEST DETENTION Any late fees accrued at the shipper or receiver are the responsibility of the carrier if they can not prove they were on time for their respective appointments. Rate can NOT be cut due to . . . . - Prolonged detention at shipper - Severe weather - Documented breakdown PLEASE SEND DRIVER NAME, CELL, TRUCK AND TRAILER # If you need help outside normal business hours: AfterHours@Redwoodmultimodal.com nightdispatch@Redwoodlogistics.com CarrierUpdates@Redwoodlogistics.com \*\*\*\*IF YOU NEED A COMCHECK AFTER HOURS\*\*\* EMAIL ComcheckRequests@Strivelogistics.com AND PUT THE LOAD NUMBER IN THE SUBJECT LINE \*\*\*\*

This confirmation must be signed prior to pick up and must be accompanied with the load paperwork for payment.

Description	Rate	Quantity	Extended Cost
Line Haul	\$1,388.90	1.00	\$1,388.90
On Time Delivery	\$245.10	1.00	\$245.10
Balance Payable:			\$1,634.00

Truck Requirements	Truck Type: Van	Length: 53.00 Feet
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Pick		#1
Facility: 7MH MOUNTAIN HOME PLANT 1900 N HIGHWAY 201. Mountain Home, AR 72653	Earliest: 2/12/2024 08:00 Latest: 2/12/2024 15:00	Medical Supplies : 40,280.00 lbs
PU: 3325555	Note: CARRIER MUST PROVIDE THEIR OWN SEAL AS A BACKUP IN CASE SHIPPER DOES NOT PROVIDE. MUST SEAL TRAILER!!! MUST BE 53 FOOT SWING DOOR!! NO ROLL UP DOORS!! MUST HAVE 2-4 LOAD LOCKS OR STRAPS TO SECURE FREIGHT!! TRAILER MUST BE LESS THAN 10 YEARS OLD AND HAVE A CURRENT DOT INSPECTION FORM THAT HAS BEEN COMPLETED WITHIN THE LAST CALENDAR YEAR!!! MUST BE FOOD GRADE TRAILER - CLEAN, DRY, AND ODOR FREE!!! DETENTION STARTS AFTER FOUR HOURS!! MUST SUBMIT POD WITHIN 48 HOURS OF DELIVERY!! CARRIER MUST HAVE SEAL ON HAND AS A BACK UP IN CASE SHIPPER CANNOT SUPPLY	

Drop		#2
Facility: Baxter Healthcare Corp 65 Pitts Station Rd Highway 221 North Marion, NC 28752	Earliest: 2/13/2024 07:00 Latest: 2/13/2024 20:00	Medical Supplies : 40,280.00 lbs
PO: 3325555	Note: DETENTION STARTS AFTER FOUR HOURS!! MUST SUBMIT POD WITHIN 48 HOURS OF DELIVERY!	

Product(s): Medical Supplies	Weight: 40,280.00 lbs
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Customer Notes:



By signing this agreement or by picking up and taking possession of the shipment the CARRIER agrees to all the terms and conditions as outlined in this rate confirmation and the transportation agreement between Transportation Solutions Group, dba Redwood Multimodal (the "BROKER") and the CARRIER (the "Agreement"). No oral agreements or conditions exist. In the event that there is a conflict between the Agreement and this rate confirmation, the Agreement shall control. Further, no charges or amendments to this rate confirmation will be binding unless BROKER approves such changes in writing prior to the CARRIER taking possession of the shipment. In accordance with 49 CFR § 392.9 and 49 CFR § 393.100 et al., the CARRIER and its drivers are solely responsible for verifying the contents, counts, conditions, loading, weight, proper weight distribution per axle, blocking, bracing, and securement of each load for transportation. CARRIER and its drivers are solely responsible for attaching a seal either provided by the shipper or by the CARRIER to each shipment and ensuring the seal is not tampered or broken during transit. Bills of Lading (BOL) must indicate the seal number and "SEAL INTACT" AT THE TIME SHIPMENT IS DELIVERED. Shipments which are pre-loaded and sealed or whereas the driver is not permitted on the dock to witness the loading or counts are required to be marked on the BOL with "SHIPPER LOAD AND COUNT." CARRIER acknowledges and agrees the CARRIER is liable for the full invoice value of the shipment or any part thereof due to loss or damage. CARRIER shall notify BROKER immediately in the event any exception is listed on the BOL, the seal is broken due to a regulatory inspection, delay in the transportation of the shipment, or there is an incident or accident during transit. FOOD GRADE NOTICE: Due to federal, state and local regulations which govern food grade commodities, if the shipment container is damaged, breached, exposed to outside elements, or the seal is broken during shipment the customer may reject the entire shipment or if CARRIER is not able to provide a downloadable temperature report indicating that required temperatures were maintained at all times during transport. If the customer denies the right of salvage or there is no right of salvage, the CARRIER will remain fully liable for loss or damage to the shipment and no salvage will be allowed. To the extent that any shipments subject to this rate confirmation or the Agreement are transported within the State of California on refrigerated equipment, CARRIER warrants that it shall only utilize equipment which is in full compliance with the California Air Resources Board (ARB) TRU ACTM in-use regulations. CARRIER shall indemnify BROKER and Shipper from any penalties, costs or any other liability, imposed on Shipper or BROKER due to CARRIER'S use of non-compliant equipment. CARRIER is an independent contractor and not an agent or employee of BROKER. CARRIER agrees to obey all federal, state and local laws and regulations. CARRIER acknowledges that BROKER does not exercise direction or control over the daily operations of the CARRIER and that the CARRIER can legally meet all the terms, conditions and times as enumerated herein. CARRIER shall indemnify BROKER for any loss, damage, injury, liability, expense, cost, including reasonable attorney fees, fines, penalties, actions and claims including, but not limited to, claims for injuries to persons, (including death), for damage to equipment, and for damage to third parties arising out of the CARRIER'S own negligence, wrongful act or omission, or failure to comply with the terms of this Agreement. Neither party shall be liable to the other for any claims, actions, or damages due to negligence or willful misconduct of the other party. CARRIER must notify BROKER within 24 hours of any accessorial charges. CARRIER must provide a written certification of detention time signed by the responsible party indicating time in and time out on the BOL. All comchecks incur a minimum of \$5.00 processing fee.

Agreed to this \_\_\_\_\_ day of \_\_\_\_\_, 2024  
 By: \_\_\_\_\_ (sign)  
 Name: \_\_\_\_\_ (print)

Truck#/Trailer #: \_\_\_\_\_  
 Pro #: \_\_\_\_\_

Driver Name: \_\_\_\_\_  
 Cell #: \_\_\_\_\_

No amendments to this rate confirmation will be binding on Transportation Solutions Group dba Redwood Multimodal unless approved in writing prior to Carrier's acceptance of the shipment.

## ATTENTION MOTOR CARRIER

### Methods for Submitting Paperwork

All carriers must submit an invoice, POD, lumper receipt (if applicable), and signed rate confirmation all together at the time of uploading/emailing.

Below are the methods to submit paperwork for payment:

1. **Transflo (Preferred Method to get paid faster)** – existing Transflo Velocity users, please use Broker ID: TSGNV
2. **Email** – send all paperwork to [pod@redwoodlogistics.com](mailto:pod@redwoodlogistics.com)
  - a. Only include one load per email
  - b. All documents must be attached: carrier invoice, signed POD, lumper receipt (if applicable) and signed rate confirmation
  - c. Documents must be PDF or TIF files
  - d. Only [pod@redwoodlogistics.com](mailto:pod@redwoodlogistics.com) can be the recipient of the email (Do NOT include other email addresses. If you include additional email addresses your documents will not be received)

If you do not submit an invoice, POD, lumper receipt (if applicable), and signed rate confirmation together all at the same time of uploading/emailing, payment will be delayed.

### Methods for Payment Inquiries & Quick Pay

In order to ensure efficient payment to our carrier partners, Redwood has teamed up with **Triumph Pay**.

1. Please visit the Triumph Pay website, [www.TriumphPay.com](http://www.TriumphPay.com), to sign up, provide payment information, and explore Quick Pay options.
2. If you are not currently being paid via ACH, please visit [www.Triumphpay.com](http://www.Triumphpay.com) to sign up for payments by ACH.
3. If you require support, you can reach out to Triumph Pay Carrier Success Team by calling (866)912-2763 or [Info@TriumphPay.com](mailto:Info@TriumphPay.com).
4. Questions/Problems/Escalations/Rate Verifications/Payment Status Inquiries SHOULD NOT be submitted to the POD email inbox. They will not be seen or replied to as the POD email inbox is not monitored.
5. All rate verifications MUST be done through the booking carrier rep listed on this rate confirmation.
6. Questions/Escalations issues should be sent to [APIquiries@redwoodlogistics.com](mailto:APIquiries@redwoodlogistics.com)







**BILL OF LADING**

Page 1 of 1

02/12/24

ORIGINAL

**STRAIGHT BILL OF LADING SHORT FORM NON-NEGOTIABLE**

MOUNTAIN HOME, AR. 72653 870-424-5383

**Carrier Copy**

**DELIVERY TO:** 1001907  
BAXTER HEALTHCARE CORPORATION  
HGWY 22 NORTH PO BOX 1390  
MARION NC 287521390

**DELIVERY FROM:** 7501501  
BAXTER HEALTHCARE CORPORATION  
1900 N HIGHWAY 201.  
MOUNTAIN HOME AR 72653-2433



<b>BOL NUMBER</b>	<b>83739</b>
PROMISED DELIVERY	02/14/24
SHIP DATE	02/12/24
BRANCH/PLANT	7MH
TRAILER NUMBER	
SEAL NUMBER	0111586
FREIGHT HANDLING CD	
MODE OF TRANSPORT	TRUCK LOAD
CARRIER	KMS2 BY TM Kidney Co
LOAD NUMBER	
DOCUMENT NUMBER	20000136

Freight charges are PREPAID, unless otherwise marked: PREPAID

<b>SHIPMENT No.</b>	50484752	
<b>ORDER No.</b>	50044647	
<b>CUSTOMER PO</b>		
<b>RELATED PO</b>		
<b>RELEASE No.</b>	16711-OK-01001	

See attached Supplemental shipping papers for individual shipping name, classification, and weight of these hazardous materials.

NMFC	DESCRIPTION	FREIGHT CODE	DESCRIPTION	QTY	WEIGHT	WEIGHT UOM	VOLUME	VOLUME UOM
70	MIN AVG DENSITY 15 LB/FC	156600	PLASTC OR RUBBER ARTICLES, NOI	19.00	38504.00	LB		FC
<b>BOL TOTALS :</b>				19.00	38504.00			

**CARRIER INSTRUCTIONS****DELIVERY INSTRUCTIONS**

CONNECTING CARRIER REDWOOD  
PLACE OF DELIVERY NORTH COVE  
BOOKING NUMBER

VESSEL NAME  
VOYAGE INFO  
SAIL DATE

**FOR CUSTOMER USE :**

**SIGNATURE :** \_\_\_\_\_  
**DATE :** \_\_\_\_\_

**FOR CARRIER USE :**

**SIGNATURE :** \_\_\_\_\_  
**DATE :** \_\_\_\_\_

**WAREHOUSE COMMENTS :** \_\_\_\_\_**NUMBER OF PIECES** 19

Baxter: CHEMTREC For Chemical Emergency Spill, Leak, Fire, Exposure or Accident, Call Chemtrec - Day or Night. US:(800)424-9300, non-US:(703)527-3887

Signature of Consignor \_\_\_\_\_  
This is to Certify the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation, according to the application regulations of the Dept of Transportation.

Subject to Section 7 (Seven) of Conditions of applicable bill of lading, if this shipment is to be 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 lawful charges.

Carrier direct billing only - No assignments. Send Bill of Lading w/ Freight Bill to: Baxter C/O CTSI GLOBAL, 5100 Poplar Ave, Clark Tower Suite 1750, Memphis, TN. 38137, USA.





## BILL OF LADING

Page 1 of 1

MOUNTAIN HOME, AR. 72653 870-424-5383

02/12/24

ORIGINAL

Carrier Copy

STRAIGHT BILL OF LADING SHORT FORM NON-NEGOTIABLE



DELIVERY TO: 1001907

BAXTER HEALTHCARE CORPORATION  
HGWY 22 NORTH PO BOX 1390  
MARION NC 287521390

DELIVERY FROM: 7501501

BAXTER HEALTHCARE CORPORATION  
1900 N HIGHWAY 201.  
MOUNTAIN HOME AR 72653-2433

BOL NUMBER	83739
PROMISED DELIVERY	02/14/24
SHIP DATE	02/12/24
BRANCH/PLANT	7MH
TRAILER NUMBER	
SEAL NUMBER	0111586
FREIGHT HANDLING CD	
MODE OF TRANSPORT	TRUCK LOAD
CARRIER	KMS2 BY TM Kidney Co
LOAD NUMBER	
DOCUMENT NUMBER	20000136

Freight charges are PREPAID, unless otherwise marked: PREPAID

SHIPMENT No.	50484752	
ORDER No.	50044647	
CUSTOMER PO		
RELATED PO		
RELEASE No.	16711-OK-01001	

See attached Supplemental shipping papers for individual shipping name, classification, and weight of these hazardous materials.

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BOL TOTALS :				19.00	38504.00			

## CARRIER INSTRUCTIONS

## DELIVERY INSTRUCTIONS

CONNECTING CARRIER

REDWOOD

VESSEL NAME

PLACE OF DELIVERY

NORTH COVE

VOYAGE INFO

BOOKING NUMBER

SAIL DATE

## FOR CUSTOMER USE :

SIGNATURE :

DATE :

13-FEB-2024

## FOR CARRIER USE :

SIGNATURE :

DATE :

WAREHOUSE COMMENTS :

NUMBER OF PIECES

19

Baxter: CHEMTREC For Chemical Emergency Spill, Leak, Fire, Exposure or  
Accident, Call Chemtrec - Day or Night. US:(800)424-9300,  
non-US:(703)527-3887Signature of Consignor \_\_\_\_\_  
This is to Certify the above named materials are properly classified,  
described, packaged, marked, labeled, and are in proper condition for  
transportation, according to the application regulations of the Dept  
of Transportation.Subject to Section 7 (Seven) of Conditions of applicable bill of lading, if this shipment is to be delivered to the consignee without recourse on the  
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