Royal 3inc.

Bill to:

A&B Logistics

, ,

,

Invoice Date: 03/28/2024 Invoice #: 0109980 Terms: NET 30 Due Date: 04/28/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
03/27/2024		10821 Withers Cove Park Dr, Charlotte, NC 28278, USA - 1840 Outer Loop, Louisville, KY 40219, USA			
			1	\$900.00	\$900.00

TOTAL	
\$900.00	

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

A&B Logistics 801 Trey St. Jeffersonville, IN 47130 812-256-0400 Fax 812-256-2552

0109980

Carrier: Date:	ROYA CHIC 03/27		IL 60638		Contact: Phone: Fax:	ZIGI FREIGHT INC (321) 465-5667 (630) 485-6980
Order	Orde Miles				Commodity: Weight:	#
	Tem BOL				Trailer: Reference:	Van (DAT)
	PU 1	Name: Address:	STERIGENICS 10821 WITHERS	COVE PARK DR	Date:	03/27/2024 0800 03/27/2024 1800
			2ND BLDG ON (R) WHITE IN COL	OR Contact:	STERIGENICS
		Phone:	CHARLOTTE (704) 588-4011	NC 28278		Jnld: No driver loading or unload
	SO 2	Name: Address:	Therakos 1840 Outer Loop		Date:	03/28/2024 0900
		Address.			Contact:	
		Phone:	LOUISVILLE	KY 40219		Jnld: No driver loading or unload
Payment		Carrier Fre		\$900.0 \$900.0		

Instructions

P/U #RM345 & N126

Driver must have straps to secure the load & send pictures of both bills BEFORE departing the shipper.

Agreement	Please sign and fax back to Bonnie	Smallwood	
		Driver Name	Tractor
	<u>Joey Cimbaljevic</u> Signature	Driver Cell	Trailer
	II A&B Logistics for dispatch information 812-2 port any overages, shortages of damaged pro		

*** \$150 FINE WILL BE ASSESSED FOR MISSED PICKUP OR DELIVERY APPT WITHOUT PRIOR NOTIFICATION***

DRIVER MUST FAX P.O.D. WITHIN 24 HOURS OF DELIVERY OR \$25.00 FEE WILL BE ASSESSED

Please send invoice and POD to billing@misterpexpress.com***

R5542530										
					Bill of Lading	8		Page -	3/27/2024	10.00.
STER0022							199598	Dail -	312112024	18:50:1
						Ship To:	UPS SCS			
	Carrier Number	10932					1840 Outer Loop	1.1		
	National Freight						Louisville KY 40			
	National Freight						United States			
	Sterigenics									
	10821 Withers Cove Pa	rk Dr.					66471			
	Charlotte NC 28278					Sold To:	Mallinckrodt Pharmace		Ltd	
							College Business & Te	chnology Park		
							Cruiserath Rd.			
	Phone: 704 588-4011						Blanchardstown			
	www.sterigenics.com						Dublin 15			
eight charg	es are COLLECT, unles	s marked otherwise i	in the spaces below	<i>N</i> .		List 3rd Party	Address Below			
Prepaid			Bill 3rd Party				No. 1			
								- Aren Spece		
							de la compañía de la			
OD Amount	ction 7 of the conditions, i	f this shipment is				Note: Where	the rate is dependent on	value, shippers	are	
	d to the consignee without						te specifically in writing			
nsignor, th	e consignor shall sign the	following statement:				declared value	e of the property. The agr	reed or declared		
he carrier si	hall not make delivery of t	his shipment without				value of the p	roperty is hereby specific.	ally stated by th	ic	
syment of f	reight and all other lawful	charges.				shipper to be	not exceeding:			
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	the second s									
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Sh	(Signature of Consigno	r)				1. <u>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</u>				
Sh sales Order	ipping Notes :	n)						<u></u>		
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ales Order	ipping Notes : # 3518451	Work Order#	MEDICAL /	MEDICAL D		Hazard/Class	N/A		N126 Total Weight	

shall be to all the bill of lading terms and conditions in the governing classification on the date of shipment.

*Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and

conditions are hereby agreed to by the shipper and accepted to himself and his assigns.

*Driver signature indicates the above material was received in good condition unless otherwise noted.

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*Shipper signature indicates the trailer was clean of debris and odor and acceptable to load unless otherwise noted or rejected.

Driver Signature Moronse Date/Time 03/27/24 On Behalf of Sterigenics Cons Bouse Date/Time 2744/24 18:49:

R5542530 STER0022						
STER0022			Sterigenics		Page - 1	1
			Bill of Lading		Date - 3/27/2024	18:50:12
			Ship To:	199598		
	Carrier Number 10932		Ship to.	UPS SCS		
				1840 Outer Loop		
	National Freight			Louisville KY 40219		
				United States		
	Sterigenics					
	10821 Withers Cove Park Dr.			66471		
	Charlotte NC 28278		Sold To:	Mallinckrodt Pharmaceuticals	Ireland Ltd	
			0010 10.	College Business & Technolo		
				Cruiserath Rd.	6) 1 1 1	
1	Phone: 704 588-4011			Blanchardstown		
	www.sterigenics.com					
				Dublin 15		
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he carrier shall t	not make delivery of this shipment wit	hout	value of the	property is hereby specifically st	tated by the	
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	Work Order#	# Product Group Descript	tion Hazard/Class	_	Custom	er PO
ustomer Load#		MEDICAL / MEDICAL	DEVICES	N/A	N126	
	3524193					
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126					Total Weight	UM 00.0 LB
126					Total Weight	<u>UM</u> 00.0 LB
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STER0022		Bill	l of Lading		
			Ship To:	199598	
Carrier Number	10932		Ship to:	UPS SCS	
				1840 Outer Loop	
National Freig	int			Louisville KY 40219 United States	
Sterigenics					
10821 Withers Cove				66471	
Charlotte NC 28278	5		Sold To:	Mallinckrodt Pharmaceuticals Ireland Ltd	
				College Business & Technology Park	
				Cruiserath Rd.	
Phone: 704 588-40				Blanchardstown	
www.sterigenics.com	m			Dublin 15	
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