

**Bill to:**

Specialized Logistics Solutions

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,
,

Invoice Date: 06/03/2024

Invoice #: 11229

Terms: NET 30

Due Date: 07/03/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/01/2024		825 Visco Dr, Nashville, TN 37210, USA - 1990 International Way, Hebron, KY 41048, USA			
			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**

**Specialized Logistics Solutions**6412 Deere Rd Suite 3
Syracuse, NY 13206
315-299-4453**Contact** Ali Manley
amanley@slsdelivers.com**Carrier** ZIGI FREIGHT INC
Attn Nikola Stamenkovic
Phone (201)805-9001

Van	Ref# 828616R1	MR2 961964		
Pick up	FREEMAN 825 VISCO DRIVE NASHVILLE, TN 37210		Earliest	06/01/24 08:00
			Latest	06/01/24 08:00
			Contact	
			Phone	
	PR1			
	<u>Pieces</u>	<u>Piece Type</u>	<u>Weight</u>	<u>Description</u>
	12		9,900	EXHIBITION MATERIALS
Pick up	Music City Center 700 Korean Veterans Blvd NASHVILLE, TN 37203		Earliest	06/01/24 08:00
			Latest	06/01/24 08:00
			Contact	CAITLYN MARTIN
			Phone	702 750 8750
	PR1 NOVARTIS BOOTH # 324			
Delivery	GES-CINCINNATI 1990 INTERNATIONAL WAY HEBRON, KY 41048		Earliest	06/03/24 07:00
			Latest	06/03/24 07:00
			Contact	
			Phone	812 577 2728
	DR1			

Special Instructions

DEDICATED 53'V W SWING DOORS AND E TRACK

6-8 STRAPS

DRIVER MUST CHECK IN AS SDS FOR NOVARTIS BOOTH # 324

2024 ANNUAL MEETING OF THE CMSC

DRIVER MUST TAKE PICTURES OF LOADED FREIGHT AND BOL PRIOR TO DEPARTING SHIPPER AND SEND TO
DISPATCH@SLSDELIVERS.COM FOR APPROVALDRIVER MUST TAKE PICTURES OF UNLOADED FREIGHT UPON DELIVERY AND SIGNED POD MUST BE SUBMITTED
IMMEDIATELY UPON DELIVERY FOR APPROVAL TO DISPATCH@SLSDELIVERS.COM

DRIVERS ARE REQUIRED TO SPEAK ENGLISH FLUENTLY

IF DRIVERS FAIL TO COMPLETE ABOVE, FINES ARE IMPOSED

Rate Detail	Quoted Amount	1,200.00	Carrier Initials: _____
	Total:	\$1,200.00	

For internal use only	Order# 51236
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**Specialized Logistics Solutions**

6412 Deere Rd Suite 3
Syracuse, NY 13206
315-299-4453

Contact Ali Manley
amanley@slsdelivers.com

Carrier ZIGI FREIGHT INC
Attn Nikola Stamenkovic
Phone (201)805-9001

All invoices must include a signed delivery receipt and be sent to: SLSDELIVERS@BILL.COM
Refer to the Load Number on your invoice: **11229**

Rate Confirmation Agreement for Specialized Distribution Solutions.

- All trailers contracted are exclusive to SDS as full trailer loads unless otherwise specified and/or approved by SDS.
- All invoices and PODs must NOW and ONLY be submitted as one file to slsdelivers@bill.com.
- Unauthorized consolidations will result in penalties.
- Drivers MUST accept MacroPoint tracking AND call our office (800)251-0002 for pickup dispatch, loaded/piece counts.
- Confirmation, daily 8AM EST check call and verbal POD upon delivery or pay \$25.00 rate reduction per violation.
- Carrier will receive "truck order not used" for any shipment canceled after driver arrives at pickup location.
- *** Drivers must be tracked via MacroPoint or fined \$100/DAY ***
- *** \$200/hour fine for late deliveries ***
- Picture of POD must be sent to dispatch@slsdelivers.com at time of delivery
- Please do NOT fax or mail your freight invoices.
- Direct driver communication is required
- If driver is late for scheduled appointment fines are imposed
- Drivers must send BOL / POD and receive confirmation before leaving site.
- CARRIER shall not re-broker, sub-broker, subcontract, assign, interline, or warehouse any shipments hereunder without the prior written consent from Broker. Failure to comply will result in non-payment of freight charges. In addition, CARRIER assumes liability for any claims, loss, damage, expenses, or liability, including reasonable attorney's fees, arising from non-compliance.
- Carrier agrees to provide coverage of \$100,000 in cargo, unless different amount is agreed to, or specified in rate confirmation.

Carrier Signature: Kelly Ivanovic Date: _____

MATERIAL HANDLING AGREEMENT
INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO
SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.
PLACE PRO NUMBER HERE

SHIPPER'S NUMBER

522070-33

MHA #: 33

DATE 05/31/2024 12:56 PM

BOOTH
NO 324

DATE/TIME
RECEIVED 6/1/24 10:23

AM
PM

FROM:

NOVARTIS PHARMACEUTICALS CORP

2024 ANNUAL MEETING OF THE CMSC
Music City Center
201 REP JOHN LEWIS WAY S
Nashville, TN 372034205

TO:

GES CINCINNATI
1990 INTERNATIONAL WAY

HEBRON, KENTUCKY 41048 USA
CAITLYN MARTIN
7027508750

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL
MOVE-OUT DAY BY THE DRIVER CHECK-IN DEADLINE, FREEMAN RESERVES
THE RIGHT TO RE-ROUTE YOUR FREIGHT ONTO ANOTHER CARRIER. IF NO
OUTBOUND INFORMATION HAS BEEN SUBMITTED, FREEMAN RESERVES THE
RIGHT TO RETURN THE FREIGHT BACK TO THE COMPANY ADDRESS ON FILE
AT THE EXHIBITOR'S EXPENSE.

SPECIAL INSTRUCTIONS

DECLARED VALUE:

\$
(Optional)

RE-ROUTE VIA _____ BY _____

DATE _____ TIME _____ AM PM

CARRIER
SDS

PHONE #

CIRCLE NUMBER OF SEPARATE DESTINATIONS IN BOOTH: 1 2 3 4 OR MORE

Desired Level of Service

Ground

Specialized

Next Day Air

2nd Day Air

3-5 Day Service

Intl

Air Freight will be billed on Actual or Dimensional Weight, whichever is greater.

☒ X

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CHECKER	NO. PIECES	DESCRIPTION AND EXCEPTIONS, USED/REPAKED PARAPHERNALIA, EXHIBITION OR SHOW, NOI	WEIGHT (LB) SUBJ. TO CORR.
11111111	9	Crates (wooden)	
		Cartons (cardboard)	
		Trunks / Cases (fiber) (color)	
11	2	Skids / Pallets <input checked="" type="checkbox"/> Shrinkwrapped <input type="checkbox"/> Loose	
		Carpets (color) <input checked="" type="checkbox"/> Wrapped <input type="checkbox"/> Loose	
11	1	Carpet Padding Rolls <input type="checkbox"/> Wrapped <input type="checkbox"/> Loose	
			8,000

DATE/TIME CARRIER SIGNED

TOTAL WEIGHT

BY SIGNING THIS AGREEMENT, YOU ARE AGREEING TO BE BOUND BY
FREEMAN'S TERMS AND CONDITIONS. THESE TERMS AND CONDITIONS ARE IN
YOUR SHOW KIT OR CAN BE OBTAINED AT THE SERVICE DESK. BY SIGNING
BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTOOD, AND
AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. EXHIBITOR SHALL BE
RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE
(OR THE SIGNATURE OF EXHIBITOR'S AGENT) CERTIFIES & WARRANTS THAT ITS
FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

IF NEITHER BOX IS CHECKED,
SHIPMENT WILL BE SENT COLLECT.

COLLECT ☐

PREPAID ☒

BILL FREIGHT CHARGES TO:

SPIRO
1990 INTERNATIONAL WAY
HEBRON, KY 41048

JULIE LONGTHORNE

8185270263

BY SIGNING THIS, I AGREE TO ENTER AT MY OWN RISK AND HOLD
FREEMAN HARMLESS FROM ALL LIABILITY ARISING FROM MY ACTIVITIES
ON THE PREMISES.

CHECKER NAME
PRINT

Tim Coleman

DATE
LOADED 6-1-24

TRAILER
NO.

94946

START TIME 12:30

FINISH TIME 1:00

EXHIBITOR

NOVARTIS PHARMACEUTICALS CORP

CARRIER SDS

SIGNATURE

PRINT NAME

Deey Brucke

DRIVER SIGNATURE

DRIVER PRINT NAME

EMERGENCY PHONE:

210-376-0046

DATE 6-1-24

PIECES RECEIVED

16

Original - File Copy

Green - Driver

Yellow - Exceptions

Pink - Control

Gold - Exhibitor

UDC0097T (05/10)

MATERIAL HANDLING AGREEMENT

INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

PLACE PRO NUMBER HERE

SHIPPER'S NUMBER

522070-59

MHA #: 59

DATE 05/31/2024 06:04 PM

BOOTH NO. HS-2

DATE/TIME RECEIVED 5/31 6:06 AM PM

FROM:

NOVARTIS

2024 ANNUAL MEETING OF THE CMSC
Music City Center
201 REP JOHN LEWIS WAY S
Nashville, TN 372034205

TO:

GES CINCINNATI
1990 INTERNATIONAL WAY

HEBRON, KENTUCKY 41048 USA
CAITLYN MARTIN
7027508750

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE-OUT DAY BY THE DRIVER CHECK-IN DEADLINE, FREEMAN RESERVES THE RIGHT TO RE-ROUTE YOUR FREIGHT ONTO ANOTHER CARRIER. IF NO OUTBOUND INFORMATION HAS BEEN SUBMITTED, FREEMAN RESERVES THE RIGHT TO RETURN THE FREIGHT BACK TO THE COMPANY ADDRESS ON FILE AT THE EXHIBITOR'S EXPENSE.

SPECIAL INSTRUCTIONS

DECLARED VALUE:

\$ (Optional)

RE-ROUTE VIA FET BY Stuart Mitchell
DATE 6/1/2024 TIME 12:17 AM PM

CARRIER SDS

PHONE #

CIRCLE NUMBER OF SEPARATE DESTINATIONS IN BOOTH: 1 2 3 4 OR MORE

Desired Level of Service

Air Freight will be billed on Actual or Dimensional Weight, whichever is greater.

Ground

X

Specialized

Next Day Air

2nd Day Air

3-5 Day Service

Intl

CHECKER	NO. PIECES	DESCRIPTION AND EXCEPTIONS, USED/REPACKED PARAPHERNALIA, EXHIBITION OR SHOW, NOI	WEIGHT (LB) SUBJ. TO CORR.
1111	4	Crates (wooden)	
		Cartons (cardboard)	
		Trunks / Cases (fiber) (color)	
1	1	Skids / Pallets Shrinkwrapped Loose	
		Carpets (color) Wrapped Loose	
5		Carpet Padding Rolls Wrapped Loose	

DATE/TIME CARRIER SIGNED

checkin at 6:30 AM
got loaded 1:20pm
6 hrs 50 min
waiting
time

TOTAL WEIGHT 3504

BY SIGNING THIS AGREEMENT, YOU ARE AGREEING TO BE BOUND BY FREEMAN'S TERMS AND CONDITIONS. THESE TERMS AND CONDITIONS ARE IN YOUR SHOW KIT OR CAN BE OBTAINED AT THE SERVICE DESK. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTOOD, AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. EXHIBITOR SHALL BE RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE (OR THE SIGNATURE OF EXHIBITOR'S AGENT) CERTIFIES & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

IF NEITHER BOX IS CHECKED, SHIPMENT WILL BE SENT COLLECT.

COLLECT

PREPAID

Freeman Transportation

3301 Adler Dr, Suite 150
Dallas, TX 75211
EXHIBIT.TRANSPORTATION@FREEMAN.COM
1-800-995-3579

CHECKER NAME PRINT Tim Coleman
TRAILER NO. 94946

DATE LOADED 6-1-24
START TIME 1:00
FINISH TIME 1:30

BY SIGNING THIS, I AGREE TO ENTER AT MY OWN RISK AND HOLD FREEMAN HARMLESS FROM ALL LIABILITY ARISING FROM MY ACTIVITIES ON THE PREMISES.

EXHIBITOR NOVARTIS

SIGNATURE [Signature]

PRINT NAME Jacob Threlk

CARRIER SDS

DRIVER SIGNATURE [Signature]

DRIVER PRINT NAME [Signature]

EMERGENCY PHONE: 231-248-7939

DATE 6-1-24

PIECES RECEIVED 5

Original - File Copy

Green - Driver

Yellow - Exceptions

Pink - Control

Gold - Exhibitor

FDC0097T (05/10)

MATERIAL HANDLING AGREEMENT

INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

PLACE PRO NUMBER HERE

SHIPPER'S NUMBER

522070-59

MHA #: 59

DATE 05/31/2024 06:04 PM

BOOTH NO. HS-2

DATE/TIME RECEIVED 5/31 6:06 AM PM

FROM:

NOVARTIS

2024 ANNUAL MEETING OF THE CMSC
Music City Center
201 REP JOHN LEWIS WAY S
Nashville, TN 372034205

TO:

GES CINCINNATI
1990 INTERNATIONAL WAY

HEBRON, KENTUCKY 41048 USA
CAITLYN MARTIN
7027508750

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE-OUT DAY BY THE DRIVER CHECK-IN DEADLINE, FREEMAN RESERVES THE RIGHT TO RE-ROUTE YOUR FREIGHT ONTO ANOTHER CARRIER. IF NO OUTBOUND INFORMATION HAS BEEN SUBMITTED, FREEMAN RESERVES THE RIGHT TO RETURN THE FREIGHT BACK TO THE COMPANY ADDRESS ON FILE AT THE EXHIBITOR'S EXPENSE.

SPECIAL INSTRUCTIONS

DECLARED VALUE:

5pcs (Optional)
DATE REC'D 6/3/2024
GES INSPECTION/COUNT
VERIFICATION PENDING

RE-ROUTE VIA FET BY Stuart McIntosh
DATE 6/1/2024 TIME 12:17 AM PM

CARRIER SDS

PHONE #

CIRCLE NUMBER OF SEPARATE DESTINATIONS IN BOOTH: 1 2 3 4 OR MORE

Desired Level of Service

Air Freight will be billed on Actual or Dimensional Weight, whichever is greater.

Ground ☒ Specialized ☐ Next Day Air ☐ 2nd Day Air ☐ 3-5 Day Service ☐ Intl ☐

CHECKER	NO. PIECES	DESCRIPTION AND EXCEPTIONS, USED/REPACKED PARAPHERNALIA, EXHIBITION OR SHOW, NOI	WEIGHT (LB) SUBJ. TO CORR.
1111	4	Crates (wooden)	
		Cartons (cardboard)	
		Trunks / Cases (fiber) (color)	
1	1	Skids / Pallets <input type="checkbox"/> Shrinkwrapped <input type="checkbox"/> Loose	
		Carpets (color) <input type="checkbox"/> Wrapped <input type="checkbox"/> Loose	
5		Carpet Padding Rolls <input type="checkbox"/> Wrapped <input type="checkbox"/> Loose	

DATE/TIME CARRIER SIGNED

checkin at 6:30 AM
car loaded 1:20pm
6 hr 50 min
waiting
time

TOTAL WEIGHT 3504

BY SIGNING THIS AGREEMENT, YOU ARE AGREEING TO BE BOUND BY FREEMAN'S TERMS AND CONDITIONS. THESE TERMS AND CONDITIONS ARE IN YOUR SHOW KIT OR CAN BE OBTAINED AT THE SERVICE DESK. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTOOD, AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. EXHIBITOR SHALL BE RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE (OR THE SIGNATURE OF EXHIBITOR'S AGENT) CERTIFIES & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

IF NEITHER BOX IS CHECKED, SHIPMENT WILL BE SENT COLLECT. COLLECT ☐ PREPAID ☐

Freeman Transportation

3901 Adler Dr, Suite 150
Dallas, TX 75211
EXHIBIT.TRANSPORTATION@FREEMAN.COM
1-800-995-3579

CHECKER NAME PRINT Tim Coleman
TRAILER NO. 94946
EXHIBITOR NOVARTIS

DATE LOADED 6-1-24
START TIME 1:00
FINISH TIME 1:30

BY SIGNING THIS, I AGREE TO ENTER AT MY OWN RISK AND HOLD FREEMAN HARMLESS FROM ALL LIABILITY ARISING FROM MY ACTIVITIES ON THE PREMISES.

CARRIER SDS

SIGNATURE [Signature] PRINT NAME Jacob Threlkeld
EMERGENCY PHONE: 231-248-7939

DRIVER SIGNATURE [Signature] DRIVER PRINT NAME Bryan
DATE 6-1-24

PIECES RECEIVED 5

Original - File Copy

Green - Driver

Yellow - Exceptions

Pink - Control

Gold - Exhibitor

FDC0097T (05/10)

MATERIAL HANDLING AGREEMENT

INSTRUCTIONS: COMPLETE ALL SHADED AREAS. RETURN COMPLETED AGREEMENT TO SERVICE DESK WHEN MATERIALS ARE PACKED AND READY FOR SHIPMENT.

SHIPPER'S NUMBER

522070-33

MHA #: 33

PLACE PRO NUMBER HERE

DATE 05/31/2024 12:56 PM

BOOTH NO. 324

DATE/TIME RECEIVED 6/1/24 10:23 AM

FROM:

NOVARTIS PHARMACEUTICALS CORP

2024 ANNUAL MEETING OF THE CMSC
Music City Center
201 REP JOHN LEWIS WAY S
Nashville, TN 372034205

TO:

GES CINCINNATI
1990 INTERNATIONAL WAY

HEBRON, KENTUCKY 41048 USA
CAITLYN MARTIN
7027508750

IN THE EVENT YOUR SELECTED CARRIER FAILS TO SHOW ON FINAL MOVE-OUT DAY BY THE DRIVER CHECK-IN DEADLINE, FREEMAN RESERVES THE RIGHT TO RE-ROUTE YOUR FREIGHT ONTO ANOTHER CARRIER. IF NO OUTBOUND INFORMATION HAS BEEN SUBMITTED, FREEMAN RESERVES THE RIGHT TO RETURN THE FREIGHT BACK TO THE COMPANY ADDRESS ON FILE AT THE EXHIBITOR'S EXPENSE.

RE-ROUTE VIA _____ BY _____
DATE _____ TIME _____ AM PM

SPECIAL INSTRUCTIONS

DECLARED VALUE:

(Optional)

DATE REC'D 6/3/2024
GES INSPECTION/COUNT
VERIFICATION PENDING

CARRIER
SDS

PHONE #

CIRCLE NUMBER OF SEPARATE DESTINATIONS IN BOOTH: 1 2 3 4 OR MORE

Desired Level of Service

Air Freight will be billed on Actual or Dimensional Weight, whichever is greater.

Ground

Specialized

Next Day Air

2nd Day Air

3-5 Day Service

Intl

CHECKER	NO. PIECES	DESCRIPTION AND EXCEPTIONS, USED/REPAKED PARAPHERNALIA, EXHIBITION OR SHOW, NOI	WEIGHT (LB) SUBJ. TO CORR.
	9	Crates (wooden)	
		Cartons (cardboard)	
		Trunks / Cases (fiber) (color)	
		Skids / Pallets Shrinkwrapped _____ Loose _____	
11	2	Carpets (color) _____ Wrapped _____ Loose _____	
		Carpet Padding Rolls _____ Wrapped _____ Loose _____	
(11)	(11)		8,000

DATE/TIME CARRIER SIGNED

TOTAL WEIGHT

BY SIGNING THIS AGREEMENT, YOU ARE AGREEING TO BE BOUND BY FREEMAN'S TERMS AND CONDITIONS. THESE TERMS AND CONDITIONS ARE IN YOUR SHOW KIT OR CAN BE OBTAINED AT THE SERVICE DESK. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTOOD, AND AGREE TO BE BOUND BY THESE TERMS AND CONDITIONS. EXHIBITOR SHALL BE RESPONSIBLE FOR ALL SHIPPING CHARGES INCURRED. EXHIBITOR'S SIGNATURE (OR THE SIGNATURE OF EXHIBITOR'S AGENT) CERTIFIES & WARRANTS THAT ITS FREIGHT CONTAINS NO HAZARDOUS MATERIALS.

CHECKER NAME Tim Coleman
PRINT DATE LOADED 6-1-24
TRAILER NO. 94946
START TIME 12:30
FINISH TIME 1:00

EXHIBITOR NOVARTIS PHARMACEUTICALS CORP

SIGNATURE [Signature] PRINT NAME Doug Bruden

EMERGENCY PHONE: 210-376-0046

IF NEITHER BOX IS CHECKED, SHIPMENT WILL BE SENT COLLECT.

COLLECT

PREPAID

BILL FREIGHT CHARGES TO:

SPIRO
1990 INTERNATIONAL WAY
HEBRON, KY 41048

JULIE LONGTHORNE

8186270263

BY SIGNING THIS, I AGREE TO ENTER AT MY OWN RISK AND HOLD FREEMAN HARMLESS FROM ALL LIABILITY ARISING FROM MY ACTIVITIES ON THE PREMISES.

CARRIER SDS

DRIVER SIGNATURE

DRIVER PRINT NAME

DATE 6-1-24

PIECES RECEIVED

Pink - Control

Gold - Exhibitor

SDC0097T (05/10)

Original - File Copy

Green - Driver

Yellow - Exceptions