

Bill to:

Redwood

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Invoice Date: 06/14/2024 Invoice #: 3414291 Terms: NET 30 Due Date: 07/14/2024

Date	Customer Ref #	Origin - Destination	Quantity	Rate	Amount
06/13/2024		1270 Don Haskins Dr # A, El Paso, TX 79936, USA - 1201 BIG TOWN BLVD STE 150 Dallas, TX 75227			
			1	\$1,428.00	\$1,428.00

TOTAL			
\$1,428.00			

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: Asta . MC #: 944686

Direct (630)485-7370

x108

BILLING DETAILS

Transflo Velocity: Use Broker ID: TSGNV

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 Questions? Call (866) 912-2763

Redwood Load#3414291

Redwood Rep: Ryan Ruholl

tel. (312)698-8288 x8288

Email: rruholl@Redwoodlogistics.com After Hours (877)874-7400 ext 9

Note: Tha	anks1				
	This confirmation mu	st be signed	I prior to pick up and must	be accompanied with the	e load paperwork for payment.
Descripti	on		Rate	Quantity	Extended Cost
Line Haul		Į.	\$1,285.20	1.00	\$1,285.20
On Time [Delivery		\$142.80	1.00	\$142.80
				Balance Payable:	\$1,428.00
Truck R	equirements	Truck Type	: Van/Reefer		Length: 53.00 Feet
Pick		<u> </u>			#1
Facility:	1RW EL PASO, TEXAS (F 1270 DON HASKINS DRIN SUITE E El Paso, TX 79936	•	Earliest: 6/13/2024 08:0 Latest: 6/13/2024 16:00	Medical Supplies (0.9 St	OD CHL INJ, USP (AUTO-C)) : 41,990.00 lbs
XREF: TS	GN, PO: 1RW52200444		Note:		
Drop					#2
Facility:	HEMASOURCE INC 1201 BIG TOWN BLVD S' Dallas, TX 75227	ΓE 150	Earliest: 6/14/2024 Latest: 6/14/2024 0	Medical Sunnlies (0.9	SOD CHL INJ, USP (AUTO-C)): 41,990.00 lbs
XREF: TS	GN, SHPN: 01001-5220044	4, PO: 137708	/105965 Note:		
Product(s	s): Medical Supplies (0.9 SC TO-C))	DD CHL INJ,	Weight: 41,990.00 lbs		
Customer N	Notos:		•	•	

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 inuse 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	Driver Name:Cell #:
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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
 - 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 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, 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 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.
- 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 APInquiries@redwoodlogistics.com

Date: 06/13/2024	BILL OF	LADING - SHORT	FORM - NO				
	SHIP FROM	Bill of Lading Number: 643068551					
REDWOOD LOGISTICS		Carrier: ZIG DBA ROYA	BI FREIGHT L 3	Appt:			
1270 DON HASKINS DR	SUITE E	Trailer Num	ber: W94923	Time In:			
EL PASO, TX 79936		Driver:		Time Out: Scheduled Delivery Date/Tim TBD			
	SHIP TO	NAME OF TAXABLE PARTY.	er(s): 55621000				
HEMASOURCE INC		Cell Phone Dock #:	#:	Freight Class:			
1201 BIG TOWN BLVD S	TE 150	Freight Ch Prepaid [arge Terms Collect	at [] 3rd Party []			
DALLAS, TX 752270020		TMS ID: 105965 SPAC:					
		Customer P	O #: 05139203 O #: 137708 : 137708 / 105965				
	CUSTON	MER ORDER INFORM	ATION				
Customer Order No.	# of Pieces	Weight	Additional Shipp	er Information			
643068551	1300	41678					
GRAND TOTAL	1300	41678					

Handlin	g Unit	Pack	kage			Item Code
Qty	Туре	Qty	Type	Weight	Item Description	
26	PLT	1300	CASE	41678	MEDICAL SALINE	2B1323N
		1300		41678		

COD Amount: \$___

Note: Liability limitation for loss	or damage in this ship and (icable. See 49 USC § 14706(c)(1)(A)
Received, subject to individually determined rates upon in writing between the carrier and shipper, if classifications, and rules that have been established to the shipper, on request, and to all applicable sta	applicable, otherwise to the rates, and by the carrier and are available	The carrier shall not make and all other lawful fees. Shipper Signature	e delivery of this shipment without payment of charges
This is to certify that his above named materials are properly classified, package, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the DOT.	Trailer Loaded: [] By shipper [] By driver	Freight Counted: [] By shipper [] By driver/pallets said to contain [] By driver/pieces	Carrier Signature/Pickup Date and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted.

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REDWOOD L	OGISTIC	28				BA ROYAL	L 3					
					1	Trailer Number: W94923 Time In:						
270 DON H	ASKINS I	DR SUITI	EE			Time Out:						
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Qty	Type	Qty	Type	_	MEDICAL SALINE	Item I						de
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