INVOICE

BILL TO:
DHL TRANSPORT BROKERAGE 360 WESTAR BLVD WESTERVILLE, OH 43082-7627

INVOICE DATE: 12/05/2024
INVOICE #: R68185
TERMS: NET 30
DUE DATE: 01/05/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/04/2024		11835 NEWGATE BLVD, HAGERSTOWN, MD 21740 - 30 VETERANS MEMORIAL DR, GREEN ISLAND, NY 12183			
		Freight Income	1	$2,100.00	$2,100.00

TOTAL
$2,100.00

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 Load Tender

Reference: 03-7411530 ( ) **Carrier:** Royal3 Inc. (ZFIH) **Tender:** 12/04/2024 04:58

Origin:	**TSI DC 059 HAGERSTOWN 11835 NEWGATE BLVD HAGERSTOWN, MD 21740** EXEL-HAGERSTOWN phone:301-223-6979 X 10667 fax:
Pickup:	12/05/2024 06:00 - 12/05/2024 18:00
Destination:	**SEALY ALBANY 01 30 VETERANS MEMORIAL DR GREEN ISLAND, NY 12183** SEALY ALBANY 01 phone: fax:
Delivery:	12/05/2024 08:00 - 12/05/2024 15:00
Bill To:	**DHL Transport Brokerage UPDATED 360 Westar Blvd, 1st Floor Westerville, OH 43082** phone: 8553935378 email: efc-invoices@dhl.com

Comments

Equipment

TL (TL)

Items

Item ID	HM	Description	Weight	Class	NMFC	Dimensions
		Freight of All Kinds	6400.0			

Stop 1 (pickup)

12/05/2024 06:00 - 12/05/2024 18:00

TSI DC 059 HAGERSTOWN, 11835 NEWGATE BLVD, HAGERSTOWN, MD 21740
EXEL-HAGERSTOWN Phone: 301-223-6979 X 10667 Fax:

01.5047.5204.3564.22.05C (GL_Code) 6,400 lb 56.0 Pieces
04239139 (Sales Order)
04241402 (Sales Order)
04245162 (Sales Order)
04190407 (Sales Order)
19931 (PO Number)
1202MD (PO Number)
ADAPTMEDHYBRID2QN (PO Number)
PO001895138 (PO Number)
03-7411530 (Load ID)
B24338E05033 (Customer Reference)
87169 (Customer Address Site ID)
8103 (CSG#)

Stop 2 (drop)

12/05/2024 08:00 - 12/05/2024 15:00

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Bill To:	**DHL Transport Brokerage UPDATED 360 Westar Blvd, 1st Floor Westerville, OH 43082**
	phone: 8553935378 email: efc-invoices@dhl.com

Freight Terms

Charge Details

Description	Rate		Quantity	Charge
Quoted Amount	2100.0	Flat Rate		$2100.0
			Total:	$2100.0

Freight Terms: 2100.0, (6400.0 lb) (372.9 miles)

References

Reference Type	Reference
Customer Reference	B24338E05033
GL_Code	01.5047.5204.3564.22.05C
PO Number	19931
PO Number	1202MD
PO Number	ADAPTMEDHYBRID2QN
PO Number	PO001895138
CSG#	8103
Customer Address Site ID	87169
PRO	03-7411530
Oracle Vendor ID	146330
Oracle Vendor Site ID	340527
AP Payment Terms	NET 30

Special Instructions

E F C C

E F C C

12/04/24 Trial **BILL OF LADING** Page 1

SHIP FROM

DHL Supply Chain
11835 Newgate Blvd
301-223-6979 ext 10667
Hagerstown, MD 21740
SID#: 0001448048 FOB: ☐

SHIP TO

Sealy Mattress Company
30 Veterans Memorial Drive
Troy, NY 12183
US FOB: ☐

THIRD PARTY FREIGHT CHARGES BILL TO:

Harrisburg Control Tower
DHL Supply Chain c/o US Bank
P.O. Box 3001 9 Pallets
Naperville, IL 60566-7001 56 Units

SPECIAL INSTRUCTIONS: **Underlying Bols**
B24338E05034, B24338E05035, B24338E05036
B24338E05037
Multiple Stop Load

Bill of Lading Number: B24338E05033

B24338E05033

CARRIER NAME: EXEL FREIGHT CONNECT I
Trailer number:
Seal number(s): 152552

SCAC: ----
Pro number:

Freight Charge Terms: *(freight charges are prepaid unless marked otherwise)*
Prepaid X Collect ____ 3rd Party ____

☒ (check box) Master Bill of Lading: with attached underlying Bills of Lading

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT (LBS)	PALLET/SLIP (CIRCLE ONE)		ADDITIONAL SHIPPER INFO
See Attached Underlying Bills Of Lading			Y	N	
			Y	N	
			Y	N	
			Y	N	
			Y	N	
GRAND TOTAL	10	6400	Y	N	

CARRIER INFORMATION

HANDLING UNIT QTY	HANDLING UNIT TYPE	PACKAGE QTY	PACKAGE TYPE	WEIGHT (LBS)	H.M. (X)	COMMODITY DESCRIPTION	LTL ONLY NMFC #	LTL ONLY CLASS
						See Attached Underlying Bills Of Lading		
10		10		6400		GRAND TOTAL		

Commodities requiring special or additional care or attention in handling or stowing must be so marked and packaged as to ensure safe transportation with ordinary care. *See Section 2(e) of NMFC Item 360*

Carriers liability for loss, damage or delay is limited to
Shipper ____ By: ____ $ ____ per lb $ ____ per shipment (truckload)

COD Amount: $ ____
Fee Terms: Collect: ☐ Prepaid: ☐
Customer check acceptable: ☐

NOTE Carrier's liability is for the actual loss unless otherwise agreed in contract, or stated above and signed by Shipper.

RECEIVED, subject to the written transportation contract between shipper and carrier if applicable, otherwise subject to the terms and conditions of the shipper's standard transportation contract in effect on the date of shipment, which is available to the carrier on request. This shipment is not subject to any classification or tariffs which may be established by the carrier.

The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

Shipper Signature

SHIPPER SIGNATURE / DATE

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 of the Department of Transportation.

Trailer Loaded:
☒ By Shipper
☐ By Driver

Freight Counted:
☐ By Shipper
☐ By Driver/pallets said to contain
☐ By Driver/Pieces

CARRIER SIGNATURE / PICKUP DATE

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.
Property described above is received in good order, except as noted.

12-5-24