

# **INVOICE**

BILL TO: RXO Inc

INVOICE DATE: 12/18/2024 INVOICE #: B69997 TERMS: NET 30 DUE DATE: 01/18/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/17/2024		2350 Reeves Rd, Plainfield, IN 46168 - 5104 Chin Page Rd, Durham, NC 27703			
		Freight Income	1	\$1,900.00	\$1,900.00

TOTAL	
\$1,900.00	

## 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







CARRIER INFORMATION	)N	CONTACT INFORMATION	
Carrier	Contact	RXO, Inc.	After Hours

BRZ BLAKE VELJIC
Burbank, IL 60459 7083035150
CONOR@rtbrz.com

CHA1Tracking@rxo.com

980-308-6017

PAYMENT		
Carrier Pay Breakdown		Bill To Address
LNH   Line Haul   Flat	\$1900.00	RXO
		PO Box 49069
		Charlotte, NC 28277
Total Carrier Pay	\$1900.00	
		Please refer to section Paperwork Submission for

Please refer to section **Paperwork Submission** for options on where to send your Invoice, POD and accessorial receipts (if applicable) for payments

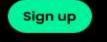
# AGREEMENT

Please sign and complete this form to submit as your invoice.

Driver Name Driver Phone # Tractor # Trailer # Carrier Invoice #

## **Signature**

Carrier will perform the transportation described in this load confirmation subject to and in accordance with the Motor Carrier Transportation Agreement between Carrier and RXO, Inc. (the "Agreement"), which is incorporated herein by reference. Carrier acknowledges that RXO, Inc.'s customers or shippers may have special requirements for this shipment. By accepting the shipment described in this load confirmation, Carrier agrees to the rates and charges stated in this load confirmation and to special requirements communicated to Carrier by RXO, Inc., its customer or the shipper.









 ORDER INFORMATION

 Order #
 Total Weight (lbs.)
 Equipment
 Temp
 Reference #

 15992992
 35000.00
 Van - 53 Feet
 N/A - N/A
 BM
 7116856895

STOP	STOP DETAIL						
Туре	Date/Time	Name and Address	Commodity	Weight (lbs)/Cases/Dims		Reference #	
PU	12/17/24	Plainfeld drop on Friday	CONSUMER GOODS	35000 (33)	so	DFT	
	09:00 - 18:00	2350 REEVES RD		Dim: $N/A \times N/A \times N/A$	СС	4294	
	10.00	Plainfield, IN 46168		DIIII. N/A X N/A X N/A	РО	4532484044	
					РО	4532498755	
					РО	4532510165	
					РО	4532522878	
					SI	6031623762	
					SI	6031710563	
					SI	6031716723	
					SI	6031742745	
					SI	6031746944	
					SI	6031760607	
					ACD	85	
so	12/18/24	CARDINAL MEDICAL	CONSUMER GOODS	35000 (33)	so	DFT	
	06:00	PRODUCTS DH		Dim: $N/A \times N/A \times N/A$	СС	4294	
		5104 CHIN PAGE RD Durham, NC 27703		DIIII. N/A X N/A X N/A	РО	4532484044	
		Bamam, 110 277 00			РО	4532498755	
					РО	4532510165	
					РО	4532522878	
					SI	6031623762	
					SI	6031710563	
					SI	6031716723	
					SI	6031742745	
					SI	6031746944	
					SI	6031760607	
					ACD	85	







## NOTES

#### **Order Notes**

For all Mckesson Drug deliveries, driver may be required to unload and sort product. Driver will be compensated \$200 if this is required. Driver must be willing to accept this unloading requirement.

In the current environment with COVID-19 we are constantly assessing the safety of our employees and customers. Effective May 11, 2020 we are now requiring all drivers delivering to our McKesson Medical-Surgical distribution centers (DC) to wear a mask at all times. These masks can be fabric or balaclava material. Any drivers that arrive without a mask are subject to refusal

Location MCKESSON, ROBBINSVILLE, NJ: Driver can either unload and sort product and be compensated \$200, or carrier is to prearrange lumper service - Express Freight (516) 671-0415 or All Staffing 215-245-7080 Office / 215-512-5612 cell. Carrier will be reimbursed with receipt

'SHIPPER REQUIRES DRIVERS TO DISCONECT THEIR TRAILER AND ENGAGE THEIR LANDING GEAR WHILE AT THE DOCK BEING LOADED FOR SAFETY REASONS

"A BOL IS REQUIRED TO BE TURNED INTO RXO BY THE CARRIER WITHIN 48HRS OR A \$50 FINE WILL BE IMPOSED. BY PICKING UP THE LOAD YOU (CARRIER) AGREES TO THESE TERMS AND A SIGNATURE IS NOT REQUIRED"

100 FINE FOR ALL MISSED DELIVERY APPOINTMENTS, UNLESS COMMUNICATED IN ADVANCE WITH A APPROVED REASON SUCH AS A BREAK DOWN WITH REPAIR RECEIPTS

\$100 fine for not auto tracking via macro point, four kites or RXO Connect until delivery is complete. There will not be any excuses or reasons accepted to avoid this fine. By picking up this load the carrier accepts the terms and conditions of this fine

Paperwork must be submitted within 48 hours of delivery

POD required: POD must be received by RXO within 48 hours of delivery

BOL required: BOL must be received by RXO within 48 hours of delivery

BOL required: In and out times must be signed by shipper or consignee

Receipts required for any accessorial reimbursement: Lumper receipts required

Receipts required for any accessorial reimbursement : Must submit receipts for accessorials within 48 hours of delivery to get

reimbursement

Trailer Type and Condition: Food grade trailer (clean, dry, odor free, no holes, no insulation showing)

Auto tracking required: \$ 100 fine if not auto-tracked

Auto tracking required: Not eligible for detention and layover if not tracked

Auto tracking required: Tracking frequency: 1 hour

Notify RXO immediately of any issue that will delay delivery

TONU: \$150: In order to qualify for tonu, driver must be dispatched by rxo prior to arriving to the shipper

TONU: \$150: Trailer rejections will not be paid TONU

Detention: Compensation per hour: \$30

Detention: Grace period hours: 2

Detention: Broker must be notified prior to detention beginning

Layover compensation: \$150

Contact RXO if overweight before leaving shipper.









Damaged product must be reported to RXO by driver prior to leaving shipper or receiver.

Any discrepancies must be reported to RXO by driver before leaving facility.

Notify RXO immediately of any rejected material.

Pickup Street address and pickup Reference number will be provided only after auto-tracking update.

#### **Location Notes**

#### **INSTRUCTIONS**

## **RXO Requirements**

Carriers must provide RXO with timely updates of arrival/departure at all stops and while in transit by utilizing a method of auto tracking or by calling 833-TRAK RXO (1-833-872-5796).

Any discrepancies or incident affecting transportation such as overages, shortages, damages, trailer seal discrepancies, failure of any temperature control equipment or other conditions that may render (or may have rendered) food unsafe during transportation, or detention must be reported immediately. All accessorial charges must be reported within 24 hours of delivery to be reimbursed.

## **Paperwork Submission**

For faster processing, submit your paperwork by Transflo \$Velocity or Transflo Mobile (use RXO broker code of "XPOLV"). Follow instructions@rxo.com. For slower processing, submit your paperwork by email to carrierpaperwork@rxo.com, or by fax to (704) 626-3455.

Please clearly follow the instructions you have been provided to prevent delay in payment.

RXO offers Quick Pay options for USD and CAD carriers. If interested in getting processed within 2, 7 or 15 days please reach out to Quickpaysetup@rxo.com for additional information. Please note that setup can take up to 15 business days.

RXO offers exclusive discounts through the RXO Extra program. Click here to check out savings on fuel, maintenance and tires, factoring and more.

Notice of Assignments, Letters of Release and change of address request are to be submitted to carrierpayupdate@rxo.com to be updated. Failure to do so may result in delayed payment.

# BD BILL OF LADING CARRIER'S RECEIPT AND AGREEMENT Received subject only to the rates, rules and charges agreed to in writing to the rates, rules and charges agreed to in writing to the rates. The support of the property of the property

Received, subject only to the rates, rules and charges agreed to in writing by Becton Dickinson Received, subject only to the rates, rules and charges agreed to in writing by Becton Dickinson and Company and Corler at the time of shipment. Carrier, by signing the document, receives and Company and be below in apparent good order. Carrier agrees to deliver the shipment to the property described in in the same condition as received. Carrier shall have the right in the the intended destination in the same condition as received. Carrier shall have the right in the case of physical fleenist to destination. Carrier shall be liable for the full actual loss suffered as a shipment and the point of destination. Carrier shall be liable for the full actual loss suffered as a shipment and the provided to in writing. Carrier shall deliver this shipment with reasonable unless otherwise agreed to in writing. Carrier shall deliver this shipment with reasonable unless otherwise agreed to in writing.

of delivery upon 15007 GLN #: 0382909215007 Becton Dickinson 2350 Reeves Road Plainfield, IN 46168

DATE 12/17/24

CONSIGNEE AND DESTINATION

SHIP TO: 1001033578

CARDINAL MEDICAL PRODUCTS DH DURHAM DISTRIBUTION PLANT 5104 CHIN PAGE RD

5104 CHIN PAGE RD DURHAM, NC 27703-0000 US

MASTER BILL OF LADING WITH ATTACHED BILLS OF LADING

SHIPMENT IDENTIFICATION NUMBER

7116856895



CARRIER # / NAME: XPO LOGISTICS (BROKERA

Trailer Number: 289475 BRZ Seal Number: 1226956

SCAC: XLFT PRO NUMBER:

SEND FREIGHT BILL TO:

BD C/O CASS INFORMATION SYSTEMS INC

PO BOX 67

ST LOUIS, MO 63166

LISA

THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER.	THE RESERVE OF THE PARTY OF THE	
SPECIAL	TNISTRI	ICTION
JELLIAL	11121116	1011011

ANDREWBArrett andrew Barrett 12.18.24

OF

PAGE

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PURCHASE ORDER#	CUSTOMER ORDER#	BD DELIVERY#	PURCHASE ORDER#	CUSTOMER ORDER#	BD DELIVERY#
4532498755 4532498755 4532522878 4532522878 4532522878 4532522878 4532510165	5010895941 5010895941 5010954205 5010870134 5010954205 5010927685	6031716723 6031742745 6031710563 6031746944 6031623762 6031760607			

NAME OF THE OWNER, WHEN	CARRIER	INFORMATIC	N			
NO OF PKGS HM	FREIGHT DESCRIPTION	ERG GUIDE	WEIGHT (LB's)	WEIGHT (KG's)	CUBE (CFT3)	CUBE (M3)
4282	HOSPITAL/MEDICAL LABORATORY SUPPLIES		11965.9	5432.54	1641.56	46.48
	1			3		
345K	ids			210		
TOTAL						
4282	ТОТ	ALS	11965.9	5432.54	1641.56	46.4

	NTACT: Chemtrec 1-800-424-9300 (Intl 1+70352738	87) CCN253
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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 applicable regulations of the Department of Transportation.

SHIPPER SIGNATURE

FREIGHT TERMS

FOB PER BD TERMS & CONDITIONS

CARRIER NAME: XPO LOGISTICS (BROKERAGE)

CARRIER SIGNATURE

DATE / TIME 12/17/24 14:28:48

PALLET COUNT

PERMANENT POST OFFICE ADDRESS OF SHIPPER: Becton, Dickinson and Company, One Becton Drive, Franklin Lakes, NJ 07417 IN THE EVENT OF INABILITY TO DELIVERY OR REFUSAL OF ANY PORTION OF THIS SHIPMENT, NOTIFY SHIPPER AT 201.847.6633.

12/17/24 14:28:48