



INVOICE

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

INVOICE DATE: 12/19/2024
INVOICE #: R70201
TERMS: NET 30
DUE DATE: 01/19/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
12/18/2024		6438 Saguaro Ct, Indianapolis, IN 46268, USA - 1891 Ellis Rd, Durham, NC 27703, USA			
		Freight Income	1	\$2,200.00	\$2,200.00

TOTAL
\$2,200.00

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

Carrier Load Tender

Reference: 03-7443516 ()

Carrier: Royal3 Inc. (ZFIH)

Tender: 12/18/2024 12:06

Origin: **MM Group 6454 Saguaro Court Indianapolis, IN 46268**
Denis LaPerle phone:3174294044 fax:
Pickup: 12/18/2024 08:00 - 12/18/2024 15:00

Destination: **RTP Pharma MFG 1891 Ellis Road Durham, NC 27703**
phone: fax:
Delivery: 12/19/2024 09:00 - 12/19/2024 09:00

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

Comments

Equipment

VAN (VAN)

Items

Item ID	HM	Description	Weight	Class	NMFC	Dimensions
		Roll Label	7900.0			

Stop 1 (pickup)

12/18/2024 08:00 - 12/18/2024 15:00

MM Group, 6454 Saguaro Court, Indianapolis, IN 46268

Denis LaPerle Phone: 3174294044 Fax:

4502018293 (PO Number) 7,900 lb 14.0 PLT
RTP (Lilly Care Of)
03-7443516 (Load ID)
5009333 (Customer Address Site ID)
8275 (CSG#)

Stop 2 (drop)

12/19/2024 09:00 - 12/19/2024 09:00

RTP Pharma MFG, 1891 Ellis Road, Durham, NC 27703

Phone: Fax:

4502018293 (PO Number) 7,900 lb 14.0 PLT
RTP (Lilly Care Of)
03-7443516 (Load ID)
5009333 (Customer Address Site ID)
8275 (CSG#)

Freight Terms

Charge Details

Description	Rate	Quantity	Charge
Quoted Amount	2200.0 Flat Rate		\$2200.0
		Total:	\$2200.0

Freight Terms: 2200.0, (7900.0 lb) (618.0 miles)

References

Reference Type	Reference
PO Number	4502018293
Customer Address Site ID	5009333
CSG#	8275
PRO	03-7443516
Oracle Vendor ID	146330
Oracle Vendor Site ID	340527
AP Payment Terms	NET 30

Carrier Load Tender

Reference: 03-7443516 ()

Carrier: Royal3 Inc. (ZFIH)

Tender: 12/18/2024 12:06

Origin:	MM Group 6454 Saguaro Court Indianapolis, IN 46268 Denis LaPerle phone:3174294044 fax: 12/18/2024 08:00 - 12/18/2024 15:00
Pickup:	
Destination:	RTP Pharma MFG 1891 Ellis Road Durham, NC 27703 phone: fax:
Delivery:	12/19/2024 09:00 - 12/19/2024 09:00
Bill To:	DHL Transport Brokerage UPDATED 360 Westar Blvd, 1st Floor Westerville, OH 43082 phone: 8553935378 email: efc-invoices@dhl.com

Special Instructions



2 Load locks/straps required

ALL DRIVERS MUST VERIFY THE FOLLOWING BEFORE LEAVING SHIPPER:

1. Driver has BOL and PACKING SLIP provided to them.
2. Trailer is sealed, and the correct seal number is documented on the BOL
3. BOL is signed by the shipper and the driver after the above is checked.

C/O:RTP Delivery Number:



Date: 18 Dec 2024		BILL OF LADING		Page 1	
SHIP FROM Name: MM Group Address: 6454 Saguaro Court City/State/Zip: Indianapolis, IN 46268 SID#: Lilly Indianapolis				Bill of Lading Number: 03-7443516 Lilly Care Of:	
SHIP TO Name: RTP Pharma MFG Address: 1891 Ellis Road City/State/Zip: Durham, NC 27703 CID#: Lilly RTP Pharma MFG				Customer Reference: PO Number: 4502018293 EL Cost Center: 1000316 Trailer Number: Seal Number(s):	
THIRD PARTY FREIGHT CHARGES BILL TO: Name: DHL Transport Brokerage UPDATED Address: 360 Westar Blvd, 1st Floor City/State/Zip: Westerville, OH 43082				SCAC: Pro Number: 03-7443516 Freight Charge Terms: (freight charges are prepaid unless marked otherwise) Prepaid Collect 3rd Party <input checked="" type="checkbox"/>	
Special Instructions: 2 Load locks/straps required ALL DRIVERS MUST VERIFY THE FOLLOWING BEFORE LEAVING SHIPPER: 1. Driver has BOL and PACKING SLIP provided to them. 2. Trailer is sealed, and the correct seal number is documented on the BOL 3. BOL is signed by the shipper and the driver after the above is checked. CAO RTP Delivery Number:				<input type="checkbox"/> (check box) Master Bill of Lading: with attached Underlying Bills of Lading	
Load ID: 03-7443516					
CUSTOMER ORDER INFORMATION					
CUSTOMER ORDER NUMBER		# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	
Roll Label		14.0	7900.0	Y N	
GRAND TOTAL		14.0	7900.0		
CARRIER INFORMATION					
HANDLING UNIT		PACKAGE		COMMODITY DESCRIPTION	
QTY	TYPE	QTY	TYPE	LTL ONLY	
				NMFC # CLASS	
		14.0	PLT		
0.0		14.0		GRAND TOTAL	
Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property as follows: "The agreed or declared value of the property is specifically stated by the shipper to be not exceeding _____ per _____."				COD Amount: \$ _____ Fee Terms: Collect: <input type="checkbox"/> Prepaid: <input type="checkbox"/> Customer check acceptable: <input type="checkbox"/>	
NOTE Liability Limitation for loss or damage is this shipment may be applicable. See 49 U.S.C. 14706(c)(1)(A) and (B).					
RECEIVED, subject to individually determined rates or contracts that have been agreed upon in writing between the carrier and shipper, if applicable, otherwise to the rates, classifications and rules that have been established by the carrier and are available to the shipper, on request. The shipper hereby certifies that he/she is familiar with all the terms and conditions of the NMFC Uniform Straight Bill of Lading, including those on the back thereof, and the said terms and conditions are hereby agreed to by the shipper and accepted for him/herself and his/her assigns.				The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. <div style="text-align: right;">_____ Shipper Signature</div>	
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 DOT.  12/17/24		Trailer Loaded: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver		Freight Counted: <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver / pallets said to contain <input type="checkbox"/> 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 DOT emergency response guidebook (prevalent documentation in the vehicle. Property described above is received in good order, except as noted.) 	

Seal # 6254221