



BILL TO: SAFE TRANSPORTATION SERVICES INC 11788 WINTHROP LANE CINCINNATI, OH 45249 **INVOICE DATE**: 01/29/2025 **INVOICE #:** R74821 **TERMS:** NET 30 **DUE DATE:** 03/01/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
01/27/2025		4200 BINION WAY, MASON, OH 45036 - 150 WHITE WAGON ROAD, CHEMUNG, NY 14825			
		Freight Income	1	\$1,700.00	\$1,700.00
		Detention	1	\$70.00	\$70.00

Payments:

DATE	METHOD	CHECK#	CHECK DATE	REFERENCE	AMOUNT
01/28/2025	Direct Deposit	721334	01/28/2025	721334	\$1,700.00

TOTAL	
\$70.00	

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

		Sign & Return
Date 01/	/27/2025 12:34	n - Load# 156625
Carrier: MC#: Attn: Phone: Email:	ZIGI FREIGHT, INC. 944686 KELLY (630)485-7370 100 KELLY@ROYAL3INC.COM	SAFE TRANSPORTATION SRVS INC. P.O. BOX 42504 CINCINNATI, OH 45242-0504 (513) 598-1100 dispatch@safetransportationservices.com
Pick up:	RXCROSSROADS / TORRENT PHARMACEUTICALS 4200 BINION WAY MASON, OH 45036	Earliest: 01/27/25 08:00 Latest: 01/27/25 14:00
Delivery:	CVS RX SERVICES, INC************************************	Earliest: 01/28/25 09:00 Latest: 01/28/25 09:00
Commodit Pieces: Weight:	ty: PALLETS PHARMACEUTICALS 8 25000	PO# 0190070 B/L# . PU# DEL # 4744344
Rate Deta		
All invoice	es must include a signed delivery receipt (POD) and b	e sent to: ap@safetransportationservices.com
Special Ins	structions: 3 Clean AVa	in Sealed & Decleca tel
10am ES *This load *Sealed shi and retur or missin *Carrier mi	T. POD Required within 24 hours of delivery. requires freight to be secured with <u>TWO</u> straps or loa ipments must have BOL signed ''Seal Intact.'' Broken rned to shipper at the carrier's expense. Carrier will al	so be liable for any cargo claim arising from a broken ions. SAFE does not condone or approve of Carrier
To be el rate mu liability 2. Current and bef 3. SAFE ag must pa 4. NO DO assigne	e includes all stop charges, fuel surcharges, loading & ligible for detention, carrier MUST notify SAFE in writi ist be approved in writing & signed by both carrier ar shall apply. insurance, operating authority, our signed contract, a fore payment will be made. grees to pay within 30 days of receipt of carrier invoic ay it and SAFE will reimburse the cost. Lumper receipt UBLE BROKERING. Payment will not be made if freigh ed. Carrier must handle this load under their own auth ad confirmation is subject to the terms and conditions ed by the parties. Your signature indicates approval o nature:	hority. 6 of the Broker / Motor Carrier Transportation Agreement

		Sign & Return Page 1 of 1
Date 01/	28/2025 14:27	
	Rate Confirmation - Lo	
Carrier: MC#: Attn: Phone: Email:	ZIGI FREIGHT, INC. 944686 KELLY (630)485-7370 100 KELLY@ROYAL3INC.COM	SAFE TRANSPORTATION SRVS INC. P.O. BOX 42504 CINCINNATI, OH 45242-0504 (513) 598-1100 dispatch@safetransportationservices.com
Email.		
Pick up:	RXCROSSROADS / TORRENT PHARMACEUTICALS 4200 BINION WAY MASON, OH 45036	Earliest: 01/27/25 08:00 Latest: 01/27/25 14:00
Delivery:	CVS RX SERVICES, INC************************************	Earliest: 01/28/25 09:00 Latest: 01/28/25 09:00
Commodi	V: PALLETS PHARMACEUTICALS	PO# 0190070
Pieces:	8	B/L# .
Weight:	25000	PU# DEL # 4744344
Rate Deta	il: Total: $\$1,770.00 \rightarrow \1700 es must include a signed delivery receipt (POD) and be sent	o Bate - \$70 Setention to: ap@safetransportationservices.com
Special In	structions:	
10am ES *This load *Sealed sh and retu or missir	LOAD REQUIRE Dispatcher <u>must</u> call SAFE for dispatch and upon arrival at d T. POD Required within 24 hours of delivery. requires freight to be secured with <u>TWO</u> straps or load lock ipments must have BOL signed ''Seal Intact.'' Broken seals w rned to shipper at the carrier's expense. Carrier will also be l ng seal. ust adhere to all FMCSA guidelines, rules and regulations. So ing any FMCSA violations (e.g hours of service violations, we	estination. Load updates required everyday before s on the rear of the shipment. /ill result in freight being refused by consignee iable for any cargo claim arising from a broken AFE does not condone or approve of Carrier
To be e rate mu liability 2. Current and be	SAFE Transportation Services, Inc. e includes all stop charges, fuel surcharges, loading & unloa ligible for detention, carrier MUST notify SAFE in writing one ist be approved in writing & signed by both carrier and SAF shall apply. : insurance, operating authority, our signed contract, and sig fore payment will be made. grees to pay within 30 days of receipt of carrier invoice and ay it and SAFE will reimburse the cost. Lumper receipts must	ing charges and all arbitrary & accessorial charges. e hour prior to entering detention. Any deviation from this E. Carrier agrees no released value rate or limitation of gned rate sheet must be on file with SAFE before pick-up signed original BOL. If a lumper is required, the carrier

- Must pay it and SAFE will reimburse the cost. Lumper receipts must be submitted at time broker
 4. NO DOUBLE BROKERING. Payment will not be made if freight is double brokered, subcontracted, interlined or otherwi
 assigned. Carrier must handle this load under their own authority.
- assigned. Carrier must name this load under their own additions.5. This load confirmation is subject to the terms and conditions of the Broker / Motor Carrier Transportation Agreement executed by the parties. Your signature indicates approval of rates and all terms listed above.

Carrier Signature: SAFE Transportation:	Kelly Ivanovic	Date: Date:	1/2	5/25-
	V			

RxCrossroads BILL OF LADING

Date: 01/27/2025

SHIPPER	(FROM)				The second			
RyCro	T/shcoras	orrent Pharm	na Inc		CVS Pharmacy Inc			
	ADDRESS	orrent r nari	nu me		STREET ADDRESS			100
	Binion Way				150 White Wagon	RD		
CITY	union traj		TATE	ZIP CODE	CITY	100	STATE	ZIP CODE
Masor	1	0	он	45036	Chemung		NY	14825
SHIPPER	PHONE #	CONTACT NA	ME (ATTN)		CONSIGNEE PHONE #	CONT	ACT NAME (ATT	TN)
	58-8745	Sherry Ph	illips	and the second				
BOLNUN	MBER				P.O. NUMBER			
SHIPN	ENT INFOR	MATION				1995		(The Manual And
NO. PCS.	PKG		DESCRIP	TION OF ART	ICLES & SPECIAL MARKS			WEIGHT (Ibs
8	PLTS				DLV: 0230490506			6,658
							TOTAL:	6658 Lbs.
TOTAL:	INSTRUCTIONS	2	(-	Must Arrive Intact 16 Cases		TOTAL	0038 105.
Same from				-				0038 L03.
SPECIAL		SHIPPER		-	16 Cases	0	SIGNEE	0038 LUS.
SPECIAL TRAILER SEAL NUI	NUMBER			-	16 Cases	0	SIGNEE	
TRAILER SEAL NUI C4087 PRINT N/	NUMBER 78 AME			-	16 Cases	0	SIGNEE	DATE U28/2
TRAILER TRAILER SEAL NUI C4087 PRINT NA	NUMBER MBER 78 AME Poudel			DATE	16 Cases PRINT NAME Alex SIGNATURE DESCRIPTION FIRMS NAME RECEIVED SEAL INTACT?	Ba	SIGNEE	DATE VES/C
TRAILER TRAILER SEAL NUI C4087 PRINT NA	NUMBER MBER 78 AME Poudel			15: DATE 1/27/202	16 Cases PRINT NAME Alex SIGNATURE DESCRIPTION FIRMS NAME RECEIVED SEAL INTACT?	Ba	SIGNEE	DATE VES/C
TRAILER TRAILER SEAL NUI C4087 PRINT NJ Indra F SIGNATU	NUMBER MBER 78 AME Poudel			15: DATE 1/27/202	PRINT NAME ALEX PRINT NAME ALEX SIGNATURE DELESCO FIRMS NAME RECEIVED SEAL INTACT? S YES NC ARRIER	Ba	SIGNEE MM SEAL NUMBER	DATE VZS/Z RECEIVED
TRAILER TRAILER SEAL NUI C4087 PRINT NJ Indra F SIGNATU	NUMBER MBER 78 AME Poudel			15: DATE 1/27/202	PRINT NAME ALEX PRINT NAME ALEX SIGNATURE DELESCO FIRMS NAME RECEIVED SEAL INTACT? S YES NC ARRIER	Ba	SIGNEE MM SEAL NUMBER	DATE VZS/Z RECEIVED
TRAILER TRAILER SEAL NUI C4087 PRINT NA Indra F SIGNATU	INSTRUCTIONS NUMBER 78 AME Poudel See Ame NAME AME AME AME AME POUDEL NAME AME AME AME AME AME AME AME AME AME	SHIPPER		15: DATE 1/27/202 C/	PRINT NAME ALEX PRINT NAME ALEX SIGNATURE DELESCO FIRMS NAME RECEIVED SEAL INTACT? S YES NC ARRIER	Ba	SIGNEE	
TRAILER TRAILER SEAL NUI C4087 PRINT N/ Indra F SIGNATU J CARRIER RU DATE OF 1/27/2	INSTRUCTIONS NUMBER 78 AME Poudel See Ame NAME AME AME AME AME POUDEL NAME AME AME AME AME AME AME AME AME AME	SHIPPER	port	15: DATE 1/27/202 C/	PRINT NAME ALAX SIGNATURE FIRMS NAME FIRMS NAME RECEIVED SEAL INTACT? S (YES) NO ARRIER PRINT NAME DRIVER SIGNATURE	Ba	SIGNEE MM SEAL NUMBER	