



INVOICE

BILL TO:
TOTAL
125 RIVERVIEW DRIVE
RICHLAND, MS 39218-9485

INVOICE DATE: 02/21/2025
INVOICE #: B77854
TERMS: NET 30
DUE DATE: 03/21/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
02/18/2025		4550 W Watkins St, Phoenix, AZ 85043 - 1400 Cavalier Blvd, Chesapeake, VA 23323			
		Freight Income	1	\$4,500.00	\$4,500.00

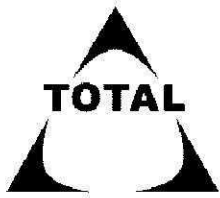
TOTAL
\$4,500.00

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



Order #: 2078834
Movement #: 564235
PRO: 65:7225749:0
Carrier Rep: Maria Olivo
Phone: 601-439-6921
Email: molivo@totalms.com

Carrier Load Confirmation

For after-hours and weekend support, please contact 601-439-6994 or TLIKsupport@totalms.com

Carrier Information	Trailer Type	Reference Numbers
Carrier Code: RIKBUR	Dry-Van Trailer	BOL: 65:7225749:0
Carrier: BRZ		Pick up #:
Attn: STEVE TATUM		Weight: 43000.0
Phone: (708) 303-5150		
DOT: 3119062		

Stop Information

PU 1	Live load	Pieces	Weight
INTUITIVE SURGICAL INC	Earliest date: 02/18/2025 0800		
4550 W WATKINS ST	Latest date: 02/18/2025 1400		
PHOENIX	AZ 85043		
Commodity: FAK			
Miles: 2290.0			

SO 2	Live unload	Pieces	Weight
EXPEDITORS	Earliest date: 02/21/2025 0800		
1400 CAVALIER BLVD	Latest date: 02/21/2025 0800		
CHESAPEAKE	VA 23323		
Commodity: FAK			
Miles: 2290.0			

Payment	Carrier Freight Pay:	\$4,500.00
	Total Carrier Pay:	\$4,500.00

Remarks:

Special instructions:

Standard Operational Comments

- * Carrier's written acceptance or commencement of any work or service under this Carrier Load Confirmation Sheet (Confirmation) constitutes Carrier's acceptance of these terms and conditions in addition to the terms and conditions in Carrier's Broker-Carrier Agreement located in Carrier's account at: <https://highway.com/go/us-xpress>
- * Driver must say they are picking up and delivering for Total Transportation.
- * Carrier must review the Bill of Lading to ensure all terms are met and the information matches what is on this Confirmation. Any costs incurred by Total Transportation due to Carrier's failure to notify Total Transportation of any discrepancies while at the shipper will be the Carrier's responsibility.
- * Carrier is responsible for inspecting the cargo at pickup and delivery unless pre-sealed by the customer or a drop and hook.
- * Under no circumstances shall Carrier remove a seal without written approval from Total Transportation or the respective customer. In the event Carrier discovers a broken seal, Carrier must immediately notify Total Transportation and must adhere to any broken seal instructions. Failure to adhere to such instructions can lead to a rejected shipment and Carrier shall be liable for the full value of the shipment.
- * Any overages, shortages, and damages must be reported to Total Transportation at time of incident and noted on the Bill of Lading. **OS&D notification should be sent to: LogisticsOSD@usxpress.com, TLIK@totalms.com** and the Carrier Sales Rep's email listed on this Confirmation.
- * For temperature-controlled shipments: Carrier is responsible for setting and maintaining the temperature according to the customer's specifications as listed on the Bill of Lading. Failure to transport within these specifications may result in the product being deemed adulterated and rejected and Carrier shall be liable for the full value of the shipment.
- * For shipments transported into, out of, or through the state of California, Carrier confirms that its equipment is in compliance with CARB regulation.
- * All loads require Macropoint digital tracking unless otherwise directed by Total Transportation.

Lumper

- * Carrier must notify Total Transportation immediately of lumper requests and receive prior approval/authorization to get a full reimbursement.
- * Carrier must provide a signed lumper receipt to the Carrier Sales Rep listed on this Confirmation within 24 hours to receive payment for a lumper service.

Detention

- * Digital Tracking is required to receive detention pay.
- * 2 hours free from appointment time at shipper and receiver.
- * **Carrier must notify Total Transportation at least thirty (30) minutes prior to detention taking effect.**
- * In/Out times must be documented on Bill of Lading by the customer.

If the customer refuses, carrier must get the name of that person and report it to Total Transportation immediately.

- * Late arrival at pickup or delivery will automatically disqualify carrier from receiving payment for detention.

Please Sign: *Steve Tatum*

(X) Accept

() Decline

Driver Name:

Driver Cell:

Driver Email:

Tractor #:

Trailer #:



U.S. XPRESS
LOGISTICS



TriumphPay

Payment Options

Same Day

2.5% QP

5-Day

1.5% QP

Standard

30 Days

Factoring: 40 Days

Please Send Invoices* to:

U.S. Xpress

Standard Pay: logisticsap@usxpress.com

Quick Pay: logisticsqp@usxpress.com

Total Transportation

Standard Pay: logisticsap@totalms.com

Quick Pay: logisticsqp@totalms.com

Standard Mail: Not Recommended (Days To Pay Increased):

U.S. Xpress, Attn: Accts Payable
4080 Jenkins Rd, Chattanooga, TN 37323

**Paid within terms from date of receipt of all correct paperwork.*

Payment Inquiries:

Visit TriumphPay.com or call 469.312.7222



Need Support?

Scan the QR code below or
visit support.triumphpay.com

Contact Us

U.S. Xpress

4080 Jenkins Road
Chattanooga, TN 37421
Phone: (423) 510-6583
MC# 188121
Federal Tax ID: # 62-1255088
Surety Bond: # 702-188121

Total Transportation

124 Riverview Drive
Richland, MS 39218
Phone: (601) 936-2104
MC# 239097
Federal Tax ID: # 04-3643789
Surety Bond: # 929446280

Sign Up/Register your account and connect with U.S. Xpress & Total Transportation by logging into:

www.triumphpay.com

Ship Date	Origin	Dest
02/14/25	PHX	ORF

Contract of Carriage

For Service Conditions, please refer to:

https://www.expeditors.com/Transcon_Service_Conditions

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SHIPPER INFORMATION

Shipper Account # **G2201257**

Shipper Name (From) **Intuitive Surgical, Inc.**

Address **4550 W Watkins St
Suite 120**

City **Phoenix** State **AZ** Country **US** Code **85043**

Contact **Anysia Lara** Phone **623-239-8823**

Shipper Reference **1705592353**

CONSIGNEE INFORMATION

Consignee Account # **G3985365**

Consignee Name (To) **Expeditors International**

Address **1400 Cavalier Boulevard
Suite J & K**

City **Chesapeake** State **VA** Country **US** Code **23323**

Contact **Mr. Ian Savereux** Phone **757-853-7776**

Consignee Reference **1705592353**

Payment Method ☐ Prepaid ☐ Collect ☒ 3rd Party If no payment method is selected, Shipper will be billed for all charges.

THIRD PARTY INFORMATION

Third Party Account # **G0323851**

Third Party Name (To) **Intuitive Surgical, Inc.**

Address **1020 Kifer Rd**

City **Sunnyvale** State **CA** Country **US** Code **94086**

Contact **David McAllister** Phone **408-523-2100**

Third Party Billing Reference

Service Requested **Dedicated**

Handling Information **DR 49**

If no service level is selected, shipment moves Next Day or actual service provided.

Special Instructions **truck 3119062
trailer W94942**

IECES	DESCRIPTION	ACTUAL WEIGHT	LENGTH	WIDTH	HEIGHT
20	MEDICAL EQUIPMENT		48	40	48
20	TOTAL PIECES	TOTAL WEIGHT	20000		

Declared Value for Carriage **\$N.V.D.**

Expeditors liability for loss or damage shall be limited per the reverse hereof unless a higher amount is specified here.

Amount of Insurance **\$NIL**

Insurance if insurance is requested in accordance with the conditions hereof, indicate amount to be insured here.

International Customs Value **\$N.V.D.**

Does this shipment contain dangerous goods? ONE BOX MUST BE CHECKED

☒ No ☐ Yes - as per attached Shippers Declaration ☐ Yes - Shippers Declaration Not Required

SHIPPER HEREBY CONSENTS TO A SEARCH OR INSPECTION OF THE CARGO PURSUANT TO ANY APPLICABLE LAW OR REGULATION, INCLUDING 49 C.F.R. 1548.9(b)

Shipper's Signature **[Signature]**

Print Name **[Signature]**

Date / Time **2-21-25 2:30 PM**

Received By: **[Signature]**

I certify the goods have been received in good order and condition.

Print Name **[Signature]**

Date **2-21-25** Time **2:30 PM**

Received By:

I certify the goods have been received in good order and condition.

Print Name

Date Time

Received By:

I certify the goods have been received in good order and condition.

Print Name

Date Time



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An original version of this image, which can always be generated upon request, sets forth terms and conditions of service on the reverse side of this page.

All services provided are subject to these terms and conditions.

ELECTRONIC IMAGE
SUBJECT TO TERMS AND CONDITIONS