



INVOICE

BILL TO:
EMERGE TRANSPORTATION
9055 E DEL CAMINO
SCOTTSDALE, AZ 85258

INVOICE DATE: 03/31/2025
INVOICE #: R83713
TERMS: NET 30
DUE DATE: 05/01/2025

DATE	CUSTOMER REF#	ORIGIN - DESTINATION	QUANTITY	RATE	AMOUNT
03/28/2025		3800 Leon Rd, Garland, TX 75041, USA - 5300 Holabird Ave, Baltimore, MD 21224			
		Freight Income	1	\$2,700.00	\$2,700.00

TOTAL
\$2,700.00

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



EmergeTech, Inc
PO BOX 14550
SCOTTSDALE, AZ 85267

RATE CONFIRMATION

SHIPMENT ID
S112906975

DATE/TIME
03/27/25 13:16 (MST)

FROM
CHAD WOMACK
Direct: (470) 922-5723
Office: (602) 635-1340
Fax: (888) 808-2230
Email: cwomack@emergemarket.com

CARRIER
ROYAL3 INC
Attn: KELLY -
Phone: (630) 485-7370
MC# 944686
DOT# 2828543

TOTAL RATE	\$ 2,700.00
Line Haul	\$ 2,223.30
Fuel Surcharge	\$ 476.70

DISPATCH NOTES

EQUIPMENT: VAN

WEIGHT: 22,000 LBS.

LOH: 1,362 MILES

ACCESSORIALS:

REFERENCE #: Customer Reference: 24074993-4084064, Delivery: 2101156615

STOPS

STOP 1 - PICKUP

REFERENCE #:

ADDRESS
Barrett Distribution
3800 Leon Road
Garland, TX 75041

LOADING TYPE
Live

APPOINTMENT TYPE
Appointment - Scheduled

SCHEDULED DATE/TIME
03/28/25 09:00 - 09:00 (CDT)

CONTACT
Randy Rosser
(972) 295-8788

STOP NOTES
Contact Barrett Distribution to schedule P/U appointment once delivery appointment is scheduled. Drivers will use Door 156. Trailers must be clean and odor free.

STOP 2 - DELIVERY

REFERENCE #:

ADDRESS
Johns Hopkins
5300 Holabird Ave
Baltimore, MD 21224

UNLOADING TYPE
Live

APPOINTMENT TYPE
FCFS

SCHEDULED DATE/TIME
03/31/25 08:00 - 12:00 (EDT)

CONTACT
Jay Adams
(410) 955-5154

STOP NOTES
email: jadams58@jhmi.edu

COMMODITIES

DESCRIPTION	UNIT	DIMENSIONS	HAZMAT
Medical Supplies 22,000 lbs	Pallet Unit Ct. - Pc. Ct. 15	- X - X - (L x W x H)	-

Tracking

Carrier Signature

Date

SHIPMENT ID MUST APPEAR ON ALL INVOICES

RATE CONFIRMATION



EmergeTech, Inc
PO BOX 14550
SCOTTSDALE, AZ 85267

SHIPMENT ID
S112906975

DATE/TIME
03/27/25 13:16 (MST)

Carrier must initiate and maintain P44 tracking via Emmerge for the entirety of the shipment. Failure to initiate P44 tracking may result in potential removal of the Emmerge platform permissions.

Payment Requirements

To qualify for any payment: **Onboarding with Loop is required for payment.** Carrier must complete payment onboarding from the secure email sent to your billing department from no-reply@loop.com. Please see our FAQ at [Loop: Carrier Audit and Payment FAQs](#) for further information about Loop and the onboarding process. To avoid processing delays, please ensure that the signed POD, BOL, Emmerge Rate Confirmation and Carrier Invoice is emailed as a single pdf to LoadDocs@emergemarket.com.

How to invoice: It is a strict requirement of this agreement that carrier must email the signed POD, BOL, Emmerge Rate Confirmation, and Carrier Invoice ("Freight Doc Package") to LoadDocs@emergemarket.com promptly upon delivery and in no event later than the 10th day after delivery is completed. If the Freight Doc Package is not emailed to LoadDocs@emergemarket.com on or before the 30th day after delivery is completed, Carrier agrees it forfeits all right to any payment for the delivery, under this or any other agreement with Emmerge. If the Freight Doc Package is not emailed to LoadDocs@emergemarket.com on or before the 5th day after delivery is completed, Carrier agrees that any payment it is due for the delivery will be reduced by \$100.

Please call Accounts Payable for any payments inquiry questions:

AP phone number: 888-736-7710 EXT 3

Cash Advance

Carriers may request a cash advance from Emmerge to be issued at Emmerge's sole discretion as a partial settlement to the agreed upon rate for any accessorial, including lumpers. All cash advances will be deducted from final settlement, including a transaction fee of \$15 for each individual advance.

Fuel

Fuel prices are subject to change and are based off of the EIA National Diesel Average on the day the shipment is picked up. Any changes in fuel price will be reflected within the shipment's details found in your Emmerge account. Please verify the financials of the shipment in your Emmerge account after the load picks up to avoid submitting incorrect invoices which will lead to disputes and delays in payment.

Customer Requirements

Carriers will allow two (2) free hours of loading and unloading time following the scheduled appointment unless stated otherwise above. Carrier must notify prior to entering detention or layover. Signed in and outtimes must be listed in order to be eligible for accessorial payment. Driver / Dispatch has 48 hours to send in ALL accessories documents to be paid. Carrier must immediately notify the broker of any and all paperwork discrepancies. Carrier must notify immediately once completely loaded and unloaded. Carrier agrees to provide advanced notice of any foreseeable issues that may result in rate reduction as applied by Shipper and/or Consignee. Re-Brokering of freight without proper authority will result in forfeiture of payment obligation to the carrier. Any temperature discrepancies between this Rate Confirmation and the BOL must be brought to the attention of the Shipper and written clarification must be provided prior to departing Shipper's location.

Emmerge Accessorial Agreement

Lumper: Approved with receipt provided to broker within 24 hours.

Detention: \$35/hr after 2 hours unless otherwise specified - up to and not exceeding layover.

Layover: \$150/day (\$250 reefer/team)

TONU: \$150 (\$250 for Team Drivers/Reefer) with on time arrival and GPS proof provided. No TONU if 8 hour notice is given.

Terms & Conditions

By participating in this transaction, you agree to abide by the Terms and Conditions located at <https://www.emergemarket.com/legal/details>.

Emmerge Communications

For After Hours tracking, please call (480) 681-0446 OR email afterhours@emergemarket.com

Carrier Signature

Date

SHIPMENT ID MUST APPEAR ON ALL INVOICES

Date: 03/28/2025 9:24:09

BILL OF LADING

Page 1 of 1

SHIP FROM

Name: NXSTAGE MEDICAL, INC.
Address: 3800 Leon Rd
City/St/Zip: Garland, TX 75041
SID#: 1692973-1

FOB: ☐

SHIP TO

Name: JOHN HOPKINS ENTERPRISE ATTN: 2000
Address: ATTN 9000 CSC
5300 HOLABIRD AVE SUITE A
City/St/Zip: BALTIMORE, MD 21224
Phone:
CID#:

FOB:

THIRD PARTY FREIGHT CHARGES BILL TO

Name: NXSTAGE C/O EN VISTA
Address: 11555 NORTH MERIDIAN STREET SUITE 300
City/St/Zip: CARMEL, TN 46032

Bill Of Lading Number: 12345678692973013



40212345678692973013

Whse Door Loc:

CARRIER NAME: EMERGE

Trailer number: X

Seal number(s): 29473457

SCAC: EMER

Pro Number: n/a

Pickup Time IN _____ OUT _____

Freight Charge Terms (freight charges are prepaid unless marked otherwise)

Prepaid ☒ Collect _____ 3rd Party _____

(check box)

Master Bill of Lading: with attached
underlying Bills of Lading

Due To Arrive:

CUSTOMER ORDER INFORMATION

CUSTOMER ORDER NUMBER	# PKGS	WEIGHT	PALLET/SLIP (CIRCLE ONE)	ADD'L SHIPR INFO
2101156615	17	22,500lbs	Y N	
			Y N	
			Y N	
			Y N	
			Y N	
GRAND TOTAL	17	22,500lbs		

CARRIER INFORMATION

HANDLING UNIT		PACKAGE		WEIGHT	H.M.	COMMODITY DESCRIPTION <small>Commodities requiring special or extraordinary care or treatment in handling or loading must be so marked and packaged as to ensure safe transportation with ordinary care. See Section 2(e) of NMFC Item 360</small>	LTL ONLY	
QTY	TYPE	QTY	TYPE	(lbs)	(X)		NMFC #	CLASS
17	PLT	17	CS	23,350		SOLUTIONS HEMODIALYSIS/SALINE	59370-00	55
17		17		23,350		GRAND TOTAL		

Where the rate is dependent of 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: ☐Prepaid: ☐Customer check acceptable: ☐

NOTE Liability Limitation for loss or damage in 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; and to all applicable state and federal regulations.

The carrier shall not make delivery of this shipment without payment of freight

A. Barrett as agent for shipper

SHIPPER SIGNATURE / DATE

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of

SE 3-28-25

Trailer Loaded: Freight Counted:

☒ By Shipper☐ By Shipper☐ By Driver☒ By Driver/pallets☐ 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 U.S. Department of Transportation emergency response guidebook or equivalent documentation in the vehicle.

Property described above is received in good order, except as noted.

☐ Trailer Inspected?

Kenneth Adams
3/31/25