



INVOICE

BILL TO:

SPECIALTY FREIGHT SERVICES INC
2 POULSON AVENUE
ESSINGTON, PA 19029

INVOICE DATE: 06/05/2025**INVOICE #:** B94321**TERMS:** NET 30**DUE DATE:** 07/05/2025

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|------------------|---|----------|----------|----------|
| 06/04/2025 | | 201 Prospect Dr, Winchester, VA 22603, USA - 2150 Stanley Rd, Suite 151, Plainfield, IN 46168 | | | |
| | | Freight Income | 1 | \$900.00 | \$900.00 |

TOTAL

\$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



LOAD - RATE CONFIRMATION

PHL-TRUCKLOAD W/OUT SFSC

1 POULSON AVE.

ESSINGTON, PA 19029

Phone: 610-521-7653 Email: tl@specialty-

REFERENCE NO: 477599

DATE: 6/4/2025

HAWB#: 477599

CARRIER: RIKI TRANSPORT INC DBA BRZ

CONTACT:

PHONE: 1-708-303-5150

FAX:

PIECES: 17

WEIGHT: 22000.

COMMODITY DESCRIPTION: MEDICAL SUPPLIES

REQUIRED EQUIPMENT:

CUSTOMS BROKER:

| SHIPPER | CONSIGNEE |
|---|--|
| THERMO FISHER 201 PROSPECT DR WINCHESTER, VA 22603 PHONE: 540-327-4208 FAX: 540-550-1960 CONTACT: GARRY GRAHAM | SIEMENS HEALTHCARE DIAGNOSTICS, INC. 2150 STANLEY RD. SUITE 151 PLAINFIELD, IN 46168 PHONE: 317-754-4477 FAX: CONTACT: CHRIS |
| CLOSE TIME 10:30 AM | |
| PICK-UP TIME 6/4/2025 10:30 AM - 10:30 AM | DELIVERY TIME 6/5/2025 at 6:00 AM |
| PICK-UP INSTRUCTIONS 53' DRY VAN OR REEFER PICK UP WEDNESDAY 6/4 @ 10:30AM DELIVER THURSDAY 6/5 @ 6AM | DELIVERY INSTRUCTIONS 53' DRY VAN OR REEFER PICK UP WEDNESDAY 6/4 @ 10:30AM DELIVER THURSDAY 6/5 @ 6AM |

AGREED RATE \$ 900.00

- Authorized Personnel must read, sign, and return this document immediately. A minimum \$250 per day fine will be assessed for being late on pickup and/or delivery.
- Carrier agrees it will not consolidate, double broker, or sub-contract its obligation to transport this shipment unless previously authorized by Broker. If carrier violates this provision it will result in a minimum reduction of 50% on the agreed upon rate. Rate is predicated on exclusive use of carriers own equipment at the max legal weight allowed by DOT unless otherwise noted above. Any partial load is to be assumed non stackable unless otherwise stated in writing by broker. Failure to comply will result in a rate reduction.
- Detention Eligibility & Rate: Carrier must notify Broker (1) hour prior to detainment at shipper or consignee and must be noted in writing on BOL then signed off by the shipper/consignee. Failure to do so will result in non-payment on accessorial charge. Detention Rate: \$40 per Hour. Layover Rate: \$160 Daily
- Signed POD is to be sent within 3 days after delivery occurs and can be emailed to POD@specialty-freight.com. POD will be rejected if Signatures, Dates, and Times are not clearly visible on the document sent. Always have consignee print name after signing POD. PODs not submitted within 3 days will receive a minimum penalty of 3% with a 1% increase daily. Driver photos if clearly taken are an acceptable form of POD.
- By accepting the terms and conditions of this Load-Rate Confirmation, the carrier hereby waives its rights to place a lien on the transported freight and/or claim payment of its freight charges from the shipper, consignee, or Brokers clients. Any attempt to place a lien on the freight will be considered an act of conversion and will result in fines/penalties to the Carrier which can exceed the agreed rate.
- Any negligence on the carrier's part causing a financial impact will be charged to the carrier in full.

X _____
Signature

Carrier Pro#

Steve Tatum 06/04/2025

Fax To: Nicole Donohue

Fax#:

| From: Fisher Scientific Company LLC* 201 Prospect Dr. Winchester, VA 22603 | | ORIGINAL BILL OF LADING STRAIGHT BILL OF LADING — SHORT FORM — ORIGINAL — NOT NEGOTIOABLE RECEIVED Subject to the classifications and lawfully filed tariffs in effect in the date of the issue of this Bill of Lading | | | | B/L Number 06-04-2025 405PM 06 --04 : 2025 (mmddyy) --- xx xx A or P Date Format --- Time Letter A or P | | | | |
|---|--------------------------|---|--|---|--------------|--|----------------------------|------------------|-------------|---------------|
| DATE 06-04-2025 | PAGE 1 OF 1 | FREIGHT PREPAID Except when box at right is checked | COLLECT <input type="checkbox"/> | CARRIER BRZ | NO 810506 | ROUTE/DEL CARRIER TRAILER | SEAL 001339 | | | |
| ORDER NO 55998464 | | THE PROPERTY DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITION OF CONTENTS OF PACKAGES UNKNOWN), MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID CARRIER (THE WORD CARRIER BEING UNDERSTOOD THROUGHOUT THIS CONTRACT AS MEANING ANY PERSON OR CORPORATION IN POSSESSION OF THE PROPERTY UNDER THE CONTRACT) AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROUTE, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION. IT IS MUTUALLY AGREED, AS TO EACH CARRIER OF ALL OR ANY OF SAID PROPERTY OVER ALL OR ANY PORTION OF SAID ROUTE TO DESTINATION, AND AS TO EACH PARTY AT ANY TIME INTERESTED IN ALL OR ANY OF SAID PROPERTY, THAT EVERY SERVICE TO BE PERFORMED HEREUNDER SHALL BE SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE UNIFORM DOMESTIC STRAIGHT BILL OF LADING SET FORTH (1) IN OFFICIAL SOUTHERN, WESTERN AND ILLINOIS FREIGHT CLASSIFICATION IN EFFECT ON THE DATE HEREOF, IF THIS IS A RAIL OR A RAIL-WATER SHIPMENT, OR (2) IN THE APPLICABLE MOTOR CARRIER CLASSIFICATION OR TARIFF IF THIS IS A MOTOR CARRIER SHIPMENT. SHIPPER HEREBY CERTIFIES THAT HE IS FAMILIAR WITH ALL THE TERMS AND CONDITIONS OF THE SAID BILL OF LADING, INCLUDING THOSE ON THE BACK THEREOF, SET FORTH IN THE CLASSIFICATION OR TARIFF WHICH GOVERNS THE TRANSPORTATION OF THIS SHIPMENT, AND THE SAID TERMS AND CONDITIONS ARE HEREBY AGREED TO BY THE SHIPPER AND ACCEPTED FOR HIMSELF AND HIS ASSIGNS. | | | | | | | | |
| CUSTOMER ORDER NO 2610469586 | | | | | | | | | | |
| CONSIGNED TO | | | | | | | | | | |
| SIEMENS HEALTHCARE DIAGNOSTICS 2150 STANLEY ROAD SUITE 151 PLAINFIELD IN 46168 | | Received \$_____ to apply in prepayment of the charges on the property described hereon _____ Agent or Cashier Per _____ (The signature here acknowledges only the amount prepaid) Charges Advanced \$_____ | | Subject to Section 7 of conditions, of applicable Bill of Lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement: <i>The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges</i> _____ (Signature of Consignor) | | CALL CHEMTREC FOR ASSISTANCE IN A TRANSPORTATION EMERGENCY INVOLVING CHEMICALS CALL (INSIDE CONTINENTAL U.S.) Registered Name or Contract Number CCN623534 800-424-9300 703-527-3887 | | | | |
| H M | IDENTIFICATION NUMBER | DESCRIPTION OF ARTICLES If Hazardous Material — Proper Shipping Name (Chemicals and Acids — RVNX — \$1.90 / LB) | HAZARD CLASS* (Abbreviations Not Permitted) | PACKING GROUP | EXCEPTIONS | EXEMPTIONS | **WEIGHT (Sub to Corr.) | CLASS OR RATE | NO. PKGS | TYPE PKGS. |
| <input type="checkbox"/> | | ADVIA DIFF TIMEPAC | | | | | 25831 | L B S | 17 | |
| <input type="checkbox"/> | | | | | | | | L B S | | |
| <input type="checkbox"/> | | | | | | | | L B S | | |
| <input type="checkbox"/> | | | | | | | | L B S | | |
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| <input type="checkbox"/> | | | | | | | | L B S | | |
| <input type="checkbox"/> | | | | | | | | L B S | | |
| <input type="checkbox"/> | | DO NOT DOUBLE STACK | | | | | | L B S | | |
| <input type="checkbox"/> | | USE LOAD LOCKS | | | | | 25831 | L B S | 17 | |
| <input type="checkbox"/> | | | | | | | | L B S | | |

FISHER SCIENTIFIC COMPANY LLC Shipper —
 Per _____ Date 06-04-2025

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 the Department of Transportation.
 The shipment is within the limitations prescribed for Passenger/Cargo only Aircraft.

† Permanent post-office address of shipper: SEE ADDRESS ABOVE
 * a division of Fisher Scientific Company, LLC, a part of Thermo Fisher Scientific

This shipment part of a daily
 tender of _____
 LTL shipments.

Per _____ Date _____

**If the shipment moves between two ports by a carrier by water, the law requires that the bill of lading shall state whether it is carrier's or shipper's weight.
 BY SIGNING THIS BILL OF LADING, THE CARRIER AGREES TO KEEP A COPY OF THE EMERGENCY RESPONSE GUIDE WITH THIS BILL OF LADING.

Agent _____ Per _____ AGENT
 MUST SIGN ORIGINAL BILL OF LADING AND MUST DETACH AND RETAIN THE SHIPPING ORDER

Form No. 3458 Rev. 01