



INVOICE

BILL TO:
CROWLEY LAND TRANSPORTATION SERVICES
LLC
9487 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

INVOICE DATE: 06/19/2025
INVOICE #: B96673
TERMS: NET 30
DUE DATE: 07/19/2025

| DATE | CUSTOMER REF# | ORIGIN - DESTINATION | QUANTITY | RATE | AMOUNT |
|------------|---------------|---|----------|------------|------------|
| 06/18/2025 | | 810 Ford Dr, Norfolk, VA 23523 - 1200 Mackey Ferry Road, Mount Vernon, IN 47620 | | | |
| | | Freight Income | 1 | \$1,450.00 | \$1,450.00 |

| |
|--------------|
| TOTAL |
| \$1,450.00 |

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

Crowley Land Transportation Services
9487 Regency Square Blvd
Jacksonville, FL 32225
904-977-0082



06/17/2025

Page 1

Rate Confirmation Order: 30047818

| | | | |
|-----------------------|--|-------------------------|------------|
| Carrier | Crowley Contact | Linehaul: | \$1,450.00 |
| Brz | Contact: Angela Smith | Fuel: | \$0.00 |
| Burbank, IL 604592734 | Phone: 513-407-5050 | Accessorial(s): | \$0.00 |
| | Email: Angela.I.Smith@crowley.com | Total Truck Pay: | \$1,450.00 |
| Hazmat: N | Weight: 43999.0lbs | Miles: | 779.0 |
| Temp: | Commodity: Non Haz Chemicals | Trailer: | Van (DAT) |

Pickup Number Call Crowley contact for pick up number.

| | | | |
|-------------|--|--------------------|-----------------|
| PU 1 | Name: Katoen Norfolk | Appt Start: | 06/18/2025 1300 |
| | Address: 810 Ford Dr | Appt End: | 06/18/2025 1300 |
| | NORFOLK, VA 23523 | | |
| SO 2 | Name: Sabic Plastics | Appt Start: | 06/20/2025 0700 |
| | Address: 1200 Mackey Ferry Road | Appt End: | 06/20/2025 1500 |
| | MOUNT VERNON, IN 47620 | | |

Carrier Instructions and Requirements: This form must be completed and returned before driver can be loaded.
Special instructions:

Please Sign: *Shawn Popovic*

(X) Accept

() Decline

Driver Name: Anis
Driver Cell: 919-798-2779
Driver Email:
Tractor #: 601
Trailer #: 155245

Attention: Angela Smith



Subcontracting: Carrier cannot subcontract this load without Crowley's written permission. Crowley may pay the delivering carrier directly, but the named Carrier remains primarily liable.

Temperature: If the shipper's requested temperature differs from the provided temperature, contact Crowley before loading.

Load Tracking: Drivers must accept digital tracking. Disputed detention charges will be waived if not using Crowley's tracking app. Drivers must check-call at key events: en-route to shipper, arrival at shipper, loaded at shipper, arrival at consignee, and departure from consignee. For multi-day transits, a daily location check-call is required.

OSDs and Accessorial Charges: Report all overages, shortages, damages (OSDs), and accessorial charges to Crowley immediately. Unreported OSDs may result in Carrier liability. Accessorial charges must be pre-approved in writing and supported by updated rate confirmation. Submit receipts within 24 hours with the carrier invoice.

Detention and Layover: Crowley pays \$25/hour in 15-minute increments for detention, starting after 2 hours from the appointment time. Layover is paid at \$150. Drivers must be on time and call an hour before detention starts. Unauthorized charges are void.

Delays and Missed Appointments: Unauthorized delivery delays will be charged to the Carrier, not exceeding actual charges against Crowley. Missed appointments without prior notice incur a \$100 charge.

Invoicing:

CROWLEY ACCEPTS ONE ORDER PER EMAIL. DO NOT SEND MULTIPLE ORDERS PER EMAIL

Carrier's invoice must include the Order# and be supported by proof of delivery, matching confirmations, and receipts. Detention times must be noted on the proof of delivery. Submit proof of delivery within 24 hours to adminlogistics@crowley.com. Please include Order# in the subject line to ensure proper receipt. Payment date is determined based on order closure and receipt of proof of delivery.

Invoicing Email Format:

Email: adminlogistics@crowley.com

Subject Line: Order number

Attachment: PDF Preferred

For payment updates and requests please email rsmcommpmtstatus@crowley.com

STRAIGHT BILL OF LADING - SHORT FORM - ORIGINAL - Not Negotiable

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the issue of this Bill of Lading.

Page 1 of 1

CONSIGNEE TO AND DESTINATION:

Sabic Innovative Plastics
c/o Warehouse Services Inc.
1200 Mackey Ferry Road
MOUNT VERNON IN 47620
USA
PO# 4802365057

SHIPPER'S NO. 80540233

SALES ORDER NO. # 363321 ME #

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 delivery 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 Uniform 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. Shipment hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, 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.

FROM: KRONOS (US), Inc.

AT: Norfolk

DATE SHIPPED:
2025/06/18IF CHARGES ARE TO BE PREPAID, WRITE OR
STAMP HERE TO BE PREPAIDFREIGHT TERMS:
PREPAID/ALLOWTHE CARRIER SHALL NOT MAKE DELIVERY OF
SHIPMENT WITHOUT PAYMENT OF FREIGHT AND
ALL OTHER LAWFUL CHARGES
SIGNATURE OF CONSIGNOR:PLEASE REMIT PREPAID FREIGHT BILLS TO:
KRONOS Worldwide C/O Transplace
PO Box 425
Lowell, AR 72745

CARRIER / ROUTE:

CAR / TRL. NO.:
CONTAINER ID:

TRL SIZE:

| DESCRIPTION | | GROSS WEIGHT | NET WEIGHT | |
|---|---|--------------|------------------------|------------------------|
| TITANIUM DIOXIDE KRONOS 2233 | | LB | 43,312 | 41,888 |
| Customer Code: 6009729 | | KG | 19,646 | 19,000 |
| PO Item# 20 | | | | |
| 760 Paper Bags with 1 PE-Layer (25 kg Stack | | | | |
| LOT: 0073660 | | | | |
| LOT: 0073698 | | | | |
| CARRIER: DELIVER | | | | |
| CARRIER: | | | | |
| WAREHOUSE RECEIVING HOURS ARE # MONDAY # FRIDAY, 7:00AM - 3:00PM | | | | |
| CST,FIRST COME, FIRST SERVICE. T: 812-297-5375 | | | | |
| CUST REF# 4802365057 | | | | |
| ** ATTN : CARRIER ** | | | | |
| In the event of a pick up or delivery delay, please contact Transplace Operations by Phone or | | | | |
| Email: 314-212-2935 KRONOSNA@transplace.com | | | | |
| IN CASE OF SPILLS, LEAKS, FIRE OR EXPOSURE CALL CHEMTREC 800-424-9300 DAY OR NIGHT | APPROPRIATE PLACARDS HAVE BEEN EITHER OFFERED OR PROVIDED | TOTAL: | 43,312 LB 19,646 KG | 41,888 LB 19,000 KG |

PERMANENT ADDRESS OF SHIPPER:

Katoen Natie Norfolk
810 Ford Drive
Norfolk VA
23520

This is to certify that 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.

SEAL NO:

036183X

CONSIGNEE AND DATE

X

SHIPPER OR AGENT

X

CARRIER AND DATE