

UNIFORM STRAIGHT BILL OF LADING

Original - Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM:SHIPPER'S BOL#DATE**2460639352**

01/09/2023

COMPANY NAME

MEDLINE INDUSTRIES LP
5701 PROMONTORY PARKWAY
C46
TRACY, CA 95377

CARRIER SCAC**RTRE**

Seal No _____

Trailer No _____

CARRIER Pro No _____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

<u>DESCRIPTION</u>	<u>PIECES</u>	<u>WEIGHT</u>	<u>Shipper's Reference</u>	<u>Consignee's PO</u>	<u>Packing List</u>
Medical Supplies FAK70	2	3	8126058922	27395321	Yes
CONSIGNMENT TO:	CUSTOMER NAME & ADDRESS		8126198824	27395321	Yes
0001057006	DEMAND PLANNING G401 780 QUARRY RD 1010 PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

<u>BILLABLE ACCESSORIALS</u>	<u>SPECIAL DELIVERY INSTRUCTIONS</u>
Freight is prepaid unless otherwise noted. <input type="checkbox"/> Check Box if Collect	COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee
Collect on Delivery \$ _____ and remit to: _____ Street _____ City _____ State _____	

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)
PO BOX 61050
Ft Myers, FL 33906** Date _____

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No

civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience intervening, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted. *AUGUSTA PRICE* **Consignee Signature** *[Signature]* Date **1/9/23** Pieces **2**
Consignee (Print Name) **Shrink Wrap Intact** Yes No **Medline Tape Intact** Yes No **Packing List Intact** Yes No

10:30 AM

UNIFORM STRAIGHT BILL OF LADING
Original - Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM:	SHIPPER'S BOL#	DATE	COMPANY NAME	CARRIER SCAC	RTRE
	2460639442	01/09/2023	MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	Seal No _____ Trailer No _____ CARRIER Pro No _____	

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	43	465	8126363724	27397099	Yes
CONSIGNMENT TO:	CUSTOMER NAME & ADDRESS		8126391724	27397203	Yes
0001057006	SH SM 300P S MATERIALS H0541A 820 QUARRY RD 1954 SHC- MAIN DOCK PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
	REQ REC HRS: 8PM-10PM. IF GOING TO BE DELAYED PLEASE CALL SIMON @ 650-313-8578 OR OLU @ 650-785-1274

Freight is prepaid unless otherwise noted.

Check Box if Collect

Collect on Delivery \$ _____ and remit to: _____
Street _____ City _____ State _____

COD Charges paid by

Shipper
 Consignee

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)
PO BOX 61050
Ft Myers, FL 33906** Date _____

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No

civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contact, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) JATN UNKE MUNI Consignee Signature [Signature]

Date 1/9/23 Pieces 43
Packing List Intact Yes No

Shrink Wrap Intact Yes No Medline Tape Intact Yes No

UNIFORM STRAIGHT BILL of LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM:				
<u>SHIPPERS BOL#</u>	<u>DATE</u>	<u>COMPANY NAME</u>	<u>CARRIER SCAC</u>	<u>RTRE</u>
2460639657	01/10/2023	MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	Seal No Trailer No CARRIER Pro No	_____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to the destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

<u>DESCRIPTION</u>	<u>PIECES</u>	<u>WEIGHT</u>	<u>Shipper's Reference</u>	<u>Consignee's PO</u>	Packing List
Medical Supplies FAK70	14	345	8126559518	27398089	Yes
<u>CONSIGNER TO:</u>	<u>CUSTOMER NAME & ADDRESS</u>				
0001057006	DS 300P GF H0541A SURG MATLS 820 QUARRY RD 1949 SHC- MAIN DOCK PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
Freight is prepaid unless otherwise noted.	
<input type="checkbox"/> Check Box if Collect Collect on Delivery \$ _____ and remit to: _____ Street _____ City _____ State _____	
COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee	
For collect shipments; if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. <hr/> (Signature of consignor)	
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.	
CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT Agent per _____	
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation. Shipper per _____	
Mail all freight bills to:	Medline Industries, Inc. C/O Data2Logistics (MEDL.01) PO BOX 61050 Ft Myers, FL 33906
	Date

- FL Movers FL 35900**

 1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.
 2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:
 - I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
 - II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
 - III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.
 3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.
 4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.
Consignee (Print Name) Agustin Jalmes Consignee Signature [Signature] Date 1-10-23 Pieces 14
Shrink Wrap Intact Yes No Medline Tape Intact Yes No Packing List Intact Yes No

2 2

SHIPPER'S BOL# 2460639657

Originally printed on 1/10/23 at 2:36PM.

Page 1 of 1

UNIFORM STRAIGHT BILL of LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM:	SHIPPER'S BOL#	DATE	COMPANY NAME	CARRIER SCAC	RTRE
	2460639676	01/10/2023	MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	Seal No _____ Trailer No _____ CARRIER Pro No _____	

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to the destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	1	13	8126583335	27398155	Yes
CONSIGNER TO:	CUSTOMER NAME & ADDRESS				
0001057006	DS 300P GF H0541A SURG MATLS 820 QUARRY RD 1949 SHC- MAIN DOCK PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS		
Freight is prepaid unless otherwise noted.			
<input type="checkbox"/> Check Box if Collect		COD Charges paid by	
Collect on Delivery \$ _____ and remit to: _____		<input type="checkbox"/> Shipper	
Street _____	City _____	State _____	<input type="checkbox"/> Consignee
For collect shipments; if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.			
(Signature of consignor)			
Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.			
CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT			
Agent per _____			
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation. Shipper per _____			
Mail all freight bills to:	Medline Industries, Inc. C/O Data2Logistics (MEDL01) PO BOX 61050 Ft Myers, FL 33906	Date	

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the carrier to be paid for the movement and the valid ten-digit shipper order number or work order number.
- III. Inbound shipments and collect shipments to a shipper facility: valid ten-digit shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the carrier will normally be handled in single line service. Handling of a shipment by carrier and a connecting carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.
Consignee (Print Name) MARY LAMM Consignee Signature M. Lamm Date 01/10/2023 Pieces 1

Shrink Wrap Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Medline Tape Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Packing List Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--------------------	------------------------------	-----------------------------	---------------------	------------------------------	-----------------------------	---------------------	------------------------------	-----------------------------

*ETA
6:40 PM*

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM: SHIPPER'S BOL# 2460639675	DATE 01/10/2023	COMPANY NAME MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	CARRIER SCAC RTRE
			Seal No _____
			Trailer No _____
			CARRIER Pro No _____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to the destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	1	1	8126584856	27398139	Yes
CONSIGNER TO:	CUSTOMER NAME & ADDRESS				
0001057006	S OPC RECEIVING DOCK RWC 430 BROADWAY ST 2015 REDWOOD CITY, CA 94063 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS		
Freight is prepaid unless otherwise noted. <input type="checkbox"/> Check Box if Collect Collect on Delivery \$ _____ and remit to: _____ Street _____ City _____ State _____		COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee	
For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. (Signature of consignor)			

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT _____
Agent per _____
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)** _____ Date _____
PO BOX 61050
Ft Myers, FL 33906

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.
Consignee (Print Name) *John M. Heuer* Consignee Signature *[Signature]* Date *01/10/2023* Pieces *1*
Shrink Wrap Intact Yes No Medline Tape Intact Yes No
Packing List Intact Yes No

GT 7:20 PM

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM:	SHIPPER'S BOL#	DATE	COMPANY NAME	CARRIER SCAC	RTRE
	2460640045	01/11/2023	MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	Seal No _____ Trailer No _____ CARRIER Pro No _____	

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to the destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	11	169	8126861665	27399313	Yes
CONSIGNER TO:	CUSTOMER NAME & ADDRESS				
0001057006	DS 300P GF H0541A SURG MATLS 820 QUARRY RD 1949 SHC- MAIN DOCK PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
Freight is prepaid unless otherwise noted. <input type="checkbox"/> Check Box if Collect	COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee
Collect on Delivery \$ _____ and remit to: Street _____ City _____ State _____	
For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges. (Signature of consignor)	

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)** Date _____
PO BOX 61050
Ft Myers, FL 33906

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No

civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments, the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments, the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility, valid ten-digit Shipper purchase order number, work order number, or return goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) Dani Consignee Signature [Signature]

Date 01/11/2023 Pieces 11

Shrink Wrap Intact Yes No Medline Tape Intact Yes No Packing List Intact Yes No

*ETP
9:05 PM
Som
Aroya*

UNIFORM STRAIGHT BILL OF LADING
Original - Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM:

SHIPPER'S BOL#
2090510568

DATE
01/11/2023

COMPANY NAME
**MEDLINE INDUSTRIES LP
1960 W. MIRO WAY
C09
RIALTO, CA 92376**

CARRIER SCAC RTRE

Seal No _____
Trailer No _____
CARRIER Pro No _____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

<u>DESCRIPTION</u>	<u>PIECES</u>	<u>WEIGHT</u>	<u>Shipper's Reference</u>	<u>Consignee's PO</u>	<u>Packing List</u>
Medical Supplies FAK70	4	140			
CONSIGNER TO:	<u>CUSTOMER NAME & ADDRESS</u>				
0001002150	USC ARCADIA HOSPITAL (BULK) 300 W HUNTINGTON DR USC ARCADIA HOSPITAL ARCADIA, CA 91007 626-898-8546				

For all OSAD issues please send an email to carrierdisposition@medline.com

<u>BILLABLE ACCESSORIALS</u>	<u>SPECIAL DELIVERY INSTRUCTIONS</u>
LIFT GATE	IF DELIVERY PAST 0300AM PLEASE CALL 626-898-8546. IF NO ONE ANSWERS PLEASE CALL DAN SHAY 626 898-8754

Freight is prepaid unless otherwise noted.

Check Box if Collect

COD Charges paid by

Shipper
 Consignee

Collect on Delivery \$ _____ and remit to: _____
Street _____ City _____ State _____

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)
PO BOX 61050
Ft Myers, FL 33906** Date _____

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) Anthony Gonzalez Consignee Signature ABG

Date 1-11-23 Pieces 4

Shrink Wrap Intact Yes No Medline Tape Intact Yes No Packing List Intact Yes No

SHIPPER'S BOL# **2090510568**

Originally printed on 1/11/23 at 5:25PM.

Page 1 of 1

PLU S-37pm **01-11-23**

Delivery 6:34pm

UNIFORM STRAIGHT BILL OF LADING
Original - Not Negotiable

PALLETS

4

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM: <u>SHIPPER'S BOL#</u> 2090510569	DATE 01/11/2023	COMPANY NAME MEDLINE INDUSTRIES LP 1960 W. MIRO WAY C09 RIALTO, CA 92376	CARRIER SCAC RTRE	RTRE
			Seal No	_____
			Trailer No	_____
			CARRIER Pro No	_____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List	
Medical Supplies FAK70	110	2,244	8126856560	4515553	Yes	
CONSIGNER TO: 0001002521	CUSTOMER NAME & ADDRESS HUNTINGTON MEMORIAL HOSPITAL (BULK) 100 W CALIFORNIA BLVD RT13 PASADENA, CA 91105 626-397-5000					

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
	KELLY SILVER 626-397-3238 IF LATE, CALL ROB KNIGHT: (213) 925-4189

Freight is prepaid unless otherwise noted.

Check Box if Collect

Collect on Delivery \$ _____ and remit to: _____
Street _____ City _____ State _____

COD Charges paid by

Shipper
 Consignee

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)** _____ Date _____
PO BOX 61050
Ft Myers, FL 33906

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) GRANDA Consignee Signature RAYMOND

Date 1-11-23 Pieces 4 Pallets

Shrink Wrap Intact Yes No Medline Tape Intact Yes No Packing List Intact Yes No

p/l 5:37pm

01-11-23 Delivery

7:17pm

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM:	DATE	COMPANY NAME	CARRIER SCAC	RTRE
SHIPPER'S BOL# 2090510570	01/11/2023	MEDLINE INDUSTRIES LP 1960 W. MIRO WAY C09 RIALTO, CA 92376	Seal No Trailer No CARRIER Pro No	

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	6	31		8126859036	Yes
CONSIGNER TO: 0001222851	CUSTOMER NAME & ADDRESS GREATER EL MONTE HOSPITAL 1701 SANTA ANITA AVE SOUTH EL MONTE, CA 91733 626-350-7908				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
LIFT GATE	CALL 626.579.7777 X8031. ASK FOR THE HOUSE SUPERVISOR TO OPEN THE GATE

Freight is prepaid unless otherwise noted.

Check Box if Collect

Collect on Delivery \$ _____ and remit to: _____
Street _____ City _____ State _____

COD Charges paid by

Shipper
 Consignee

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)** Date _____
PO BOX 61050
Ft Myers, FL 33906

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill. No

civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) Abigail Clavealla Consignee Signature Anneliese

Date 1-11-23 Pieces 6

Shrink Wrap Intact <input type="checkbox"/> Yes	Medline Tape Intact <input type="checkbox"/> Yes	Packing List Intact <input type="checkbox"/> Yes
No	No	No

SHIPPER'S BOL# 2090510570

Originally printed on 1/11/23 at 5:25PM.

Page 1 of 1

P/U 5:37pm

01-11-23

Delivery 8:08pm

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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;

FROM: <u>SHIPPER'S BOL#</u> 2460640288	DATE 01/12/2023	COMPANY NAME MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	CARRIER SCAC Seal No _____	RTRE Trailer No _____
			CARRIER Pro No CARRIER Pro No _____	

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

<u>DESCRIPTION</u>	<u>PIECES</u>	<u>WEIGHT</u>	<u>Shipper's Reference</u>	<u>Consignee's PO</u>	<u>Packing List</u>
Medical Supplies FAK70	1	6	8126943708	27379352	Yes
CONSIGNER TO:	CUSTOMER NAME & ADDRESS				
0001057006	DS 300P GF H0541A SURG MATLS 820 QUARRY RD 1949 SHC– MAIN DOCK PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
Freight is prepaid unless otherwise noted. <input type="checkbox"/> Check Box if Collect Collect on Delivery \$ _____ and remit to: _____ Street _____ City _____ State _____	COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consigner, the consigner shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consigner)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT	Agent per _____
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation. Shipper per _____	
Mail all freight bills to: Medline Industries, Inc. C/O Data2Logistics (MEDL01) PO BOX 61050 Ft Myers, FL 33906	Date _____

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

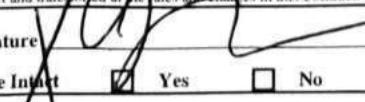
No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.	Date 1/12/23	Pieces 1
Consignee (Print Name) Augustin J M	Consignee Signature 	
Shrink Wrap Intact <input type="checkbox"/> Yes <input type="checkbox"/> No	Medline Tape Intact <input type="checkbox"/> Yes <input type="checkbox"/> No	Packing List Intact <input type="checkbox"/> Yes <input type="checkbox"/> No

9:45am

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM:	DATE	COMPANY NAME	CARRIER SCAC	RTRE
SHIPPERS BOL# 2090511405	01/13/2023	MEDLINE INDUSTRIES LP 1960 W. MIRO WAY C09 RIALTO, CA 92376	Seal No Trailer No CARRIER Pro No	_____

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

DESCRIPTION	PIECES	WEIGHT	Shipper's Reference	Consignee's PO	Packing List
Medical Supplies FAK70	350	8,431	8127999852	6796725-0-KECK	Yes
CONSIGNER TO: 0001303382	CUSTOMER NAME & ADDRESS		8128002937	6796726-0-KECK	Yes
	KECK WAREHOUSE INVENTORY 1500 SAN PABLO ST LOS ANGELES, CA 90033 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
	AFTER HOURS CONTACT PERSON: RAQUEL AGUIRRE - 323-442-9119 OR 562-228-58 39 ANNE HESTON 323 442-8466

Freight is prepaid unless otherwise noted.

Check Box if Collect

Collect on Delivery \$ _____ and remit to: _____
Street _____ City _____ State _____

COD Charges paid by

Shipper
 Consignee

For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement:
The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of consignor)

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT

Agent per _____

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation.
Shipper per _____

Mail all freight bills to: **Medline Industries, Inc. C/O Data2Logistics (MEDL01)
PO BOX 61050
Ft Myers, FL 33906** Date _____

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted.

Consignee (Print Name) *Raquel Aguirre* Consignee Signature *R Aguirre*

Date *1-14-23* Pieces *9 PAWS*

Shrink Wrap Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Medline Tape Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Packing List Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No
---------------------------	------------------------------	-----------------------------	----------------------------	------------------------------	-----------------------------	----------------------------	------------------------------	-----------------------------

SHIPPERS BOL# **2090511405**

Originally printed on 1/13/23 at 9:45PM.

Page 1 of 1

UNIFORM STRAIGHT BILL OF LADING
Original – Not Negotiable

PALLETS

RECEIVED, subject to individually determined rates or contracts that have been agreed to 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:

FROM:	DATE	COMPANY NAME	CARRIER SCAC	RTRE
<u>SHIPPERS BOL#</u>	01/13/2023	MEDLINE INDUSTRIES LP 5701 PROMONTORY PARKWAY C46 TRACY, CA 95377	Seal No _____ Trailer No _____ CARRIER Pro No _____	
<u>2460640620</u>				

The property described below is received by the carrier in apparent good order, except as noted (contents and condition of packages unknown) marked, consigned, and destined as shown below, which said carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to all conditions not prohibited by law, whether herein contained, including the conditions on the back hereof or contained in a separate contract, the contract terms to govern, which are hereby agreed to by the shipper and accepted for himself or his assigns.

<u>DESCRIPTION</u>	<u>PIECES</u>	<u>WEIGHT</u>	<u>Shipper's Reference</u>	<u>Consignee's PO</u>	<u>Packing List</u>
Medical Supplies FAK70	1	1	8127430336	27395321	Yes
CONSIGNER TO:	CUSTOMER NAME & ADDRESS				
0001057006	DEMAND PLANNING G401 780 QUARRY RD 1010 PALO ALTO, CA 94304 999-999-9999				

For all OSAD issues please send an email to carrierdisposition@medline.com

BILLABLE ACCESSORIALS	SPECIAL DELIVERY INSTRUCTIONS
Freight is prepaid unless otherwise noted.	
<input type="checkbox"/> Check Box if Collect Collect on Delivery \$ _____ and remit to: _____ Street _____ City _____ State _____	
COD Charges paid by <input type="checkbox"/> Shipper <input type="checkbox"/> Consignee	
For collect shipments: if this shipment is to be delivered to the consignee, without recourse on the consignor, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all other lawful charges.	
(Signature of consignor)	

Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was available and/or carrier has Department of Transportation emergency response guidebook or equivalent in vehicle.

CARRIER'S SIGNATURE CONFIRMS RECEIPT OF PIECE COUNT	Agent per _____	
This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable regulations of Department of Transportation. Shipper per _____		
Mail all freight bills to:	Medline Industries, Inc. C/O Data2Logistics (MEDL01)	Date _____
	PO BOX 61050	
	Ft Myers, FL 33906	

1. Carrier agrees to cancel all transportation charges on shipments for which an original freight bill is not presented to Shipper within 180 days after the date of shipment. Carrier shall not submit a freight bill for additional charges claimed to be due on any shipment after 180 days from the date of the original freight bill. Any claim by shipper for overcharge on any freight bill must be sent within 180 days from the date of payment of that freight bill.

No civil action for collection of undercharge or overcharge claims may be brought unless such action is instituted within 18 months after the claim accrues. Where carrier asserts a timely claim for undercharges, shipper is not to contest Carrier claim within 180 days in order to have the right to defend against a later action for recovery of such charges.

2. Carrier shall bill (invoice) the shipper within 15 business days of the completion of the movement of the cargo so as to provide for the receipt by Shipper of the bill (invoice) within 15 business days of the completion of the movement of the cargo. Each carrier invoice and all documentation prepared by the Carrier evidencing shipments under this contract, shall contain the following information and/or documentation which information and documentation are conditions precedent to payment:

- I. In the case of outbound shipments: the SCAC of the Carrier to be paid for the movement and complete and valid bill of lading number.
- II. In the case of third party shipments: the SCAC of the Carrier to be paid for the movement and the valid ten-digit Shipper order number or work order number.
- III. Inbound shipments and collect shipments to a Shipper facility: valid ten-digit Shipper purchase order number, work order number, or returns goods authorization number and the SCAC of the carrier to be paid for the movement, and valid and complete bill of lading.

3. Pursuant to 49 U.S.C. & 14101 (b), the parties expressly waive any and all provisions of the ICC Termination Act of 1995, U.S. Code Title 49, Subtitle IV, Part B, and of the regulation thereunder, to the extent that such provisions conflict with the terms of this Contract or the parties' course of performance hereunder.

4. It is the intent of the parties unless additional carriers are specifically named herein, that shipments tendered to the Carrier will normally be handled in single line service. Handling of a shipment by Carrier and a connecting Carrier will be considered convenience interlining, and such shipments will be covered by this Contract and transported at the rates and charges in this Contract.

Freight received in good order unless otherwise noted	Consignee (Print Name)	Consignee Signature	Date _____	Pieces _____				
Shrink Wrap Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Medline Tape Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Packing List Intact	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*ET A
10:35 PM*