

VERATEX, INC.
P.O. Box 682
New York, NY 10108-0682

Phone: 1-212-683-9300
Fax: 1-212-889-5573

I N V O I C E

DATE: 04/08/2016 INVOICE: 31217
CUST#: 2918
TERMS: NET 30 FOB MILL SALESMAN: HSE
NC

SOLD TO

RESTORATIVE MEDICAL INC.
332 EAST BROADWAY
BRANDENBURG, KY 40108

SHIPPED TO

SAME

B/L# 28604 VIA FEDEX GROUND 1 CASES

QUANTITY	DESCRIPTION	PRICE	AMOUNT
250.000 LIN	V200 WHITE 60" POLYESTER MESH	1.330 LIN	332.50
	OUR ORDER: 17510/1		LOT#: 19287/18287100
	CUSTOMER ORDER: 2177		

CASES: 4550606

332.50

This invoice is payable to VERATEX, INC. ONLY

All knitted goods are subject to imperfections. Examination must be made before goods have been processed or cut as no claims will be recognized at any time after goods have been processed or cut.
Continuing guaranty under The Textile Fiber Products Identification Act filed with the Federal Trade Commission.

UNIFORM STRAIGHT BILL OF LADING ORIGINAL - NOT NEGOTIABLE - Short Form
 RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading.

Carrier: CFG65
 FEDEX GROUND

Date: 04/08/2016 Shipper No. 0000028604

From:
 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 Classifications 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, 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.

Consigned To:		(Destination)	Bill Freight To:		Freight Charges		
RESTORATIVE MEDICAL INC.			RESTORATIVE MEDICAL INC.		Collect		
332 EAST BROADWAY			332 EAST BROADWAY		Subject to Section 7 of the agreement between Shipper and Carrier, if the shipment is to be delivered to the consignee without recourse of the consignor, the consignor shall sign the following statement.		
BRADENBURG, KY 40108 US			BRADENBURG, KY 40108 US				
Sold To:					The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.		
VERATEX							
Qty	Unit Type	Gross Lbs	Gross Kgs	NMFC Desc of Materials	yards	Meters	(Signature of Shipper)
1	ROLL	47.0	21.3	ITM 49265 SUB9 CLASS70	250.00	228.6	C.O.D. SHIPMENT
1		47.0	21.3		250.00	228.6	
							C.O.D. Amt. _____
							Collection Fee _____
							Total Charges _____
							C.O.D. CHARGE TO BE PAID BY _____

Special Instructions:

BILL FREIGHT TO:
 FEDEX GROUND ACCT# 50246898
 RESTORATIVE MEDICAL INC.
 PLEASE INSURE \$400

Invoice: Date: 07Apr16 SHIPPING: 0.00
 Customer: Wgt: 47.00 LBS SPECIAL: 0.00
 Dapt: COD: HANDLING: 0.00
 PO Number: DV: 0.00 TOTAL: 0.00

DETAILS ON ATTACHED PACKING LIST
 0002055783 (18860).

Svcs: GND BLL RCP
 TRCK: 650014684121

MUST RIDE FLAT DO NOT STAND ON END

PACKING SLIPS MUST ACCOMPANY SHIPMENT

*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.
 NOTE - Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per _____.
 The fibre boxes used for this shipment conform to the specifications set forth in the box maker's certification thereon, and all other requirements of the Consolidated Freight Classification.

Permanent Address of Shipper:

GLEN RAVEN TECHNICAL FABRICS, LLC
 PARK AVENUE PLANT
 1831 NORTH PARK AVENUE
 GLEN RAVEN, NC 27217 US

Pro Number 650014684121

Shipper, Per Signature
 not available

Consignee

Date

Received in good order except as noted above

FOR ACCT OF --- GLEN RAVEN TECHNICAL FABRICS

SHIP TO: RESTORATIVE MEDICAL INC.
332 EAST BROADWAY
BRADENBURG, KY 40108
UNITED STATES

DATE SHIPPED: 04/08/2016
SHIPPED VIA: FEDEX GROUND

PACKING SLIP#: 0002055783

REF S.O# 0026928000

CASE#	PIECE#	WIDTH	GRADE	LBS	KG	LENGTH	ALT LENGTH	OTHER REFERENCE
FC V200-F60-10965		VERATX.V10209P.WHITE.POLY				WHITE		MO#: 0018287100
004550606	NR23-4893-1	60	012	47.00	21.32	250.00 YD	228.60 M	19287
WORK ORDER TOTALS:			1 PCS	47.00	21.32	250.00	228.60	
SALES ORDER TOTALS:			1 PCS	47.00	21.32	250.00	228.60	

BILL FREIGHT TO:
FEDEX GROUND ACCT# 50246898
RESTORATIVE MEDICAL INC.
PLEASE INSURE \$400

GRAND TOTALS: 1 PCS 47.00 21.32 250.00 228.60

SHIPMENT