

540 W. Lambert Rd. Brea, CA 92821 USA Invoice No.

UC240441-2

Tel: 714-529-8400 Fax:714-529-9800

Sold to

Madre Labs, Inc.

301 N. Lake Ave. 6th Floor, Pasadena, CA 91101 Ship to Madre Labs

2497 Wright Blvd., Suite 200 Hebron, KY 41048

| Date Ordered | Purchase Order No. | Invoice Date | Terms/Due date | Date Shipped |
|--------------|--------------------|--------------|----------------|--------------|
| 09-27-2024 | 4500151202 | 12-19-2024 | Net 30 Days | 12-19-2024 |

| Quantity | Description | Unit Price | Total |
|----------|---|---------------|--------------|
| | EPA 480 DHA 320 TG 1000mg-30ct | \$4.01/bottle | \$108,129.65 |
| | | | |
| | | | - |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | - |
| | | | |
| | Please mail the check to the above addr | | |
| | Thank you !!! | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | 1 | Sub Total | |
| | | Shipping | |
| | | Net Total | \$108,129.65 |

| Received by | / |
|-------------|---|
|-------------|---|

- 1. 11/2% per month is added on any balance not paid within 30 days.
- 2. Returned merchandise not accepted after 45 days from invoice date.
- 3. 10% handling charge on all returned items.
- 4. All claims for damages, shortages, etc., must be made within 5 days after receipt of goods.
- 5. Prices subject to corrections. Open accounts payable monthly.

| | BILL O | | NG | | | | 60940866 | | | |
|--|--|----------------------------------|---|-------------------|--------|--|---|--|---|-----------------------|
| | | FROM | | | | Driver's signature acknowledges re- contract, if any, otherwise subject Freight, Inc. roles tariff. (see www.xp XPO | reipt of freight only. Recei to the terms, conditions po.com) | red shipment is s and limitations o | bject to terms of a writ I liability set forth in X | ten PO |
| Name: | QN Labs | | | | | APO IIIIIIII | | 97-81 | -0246 | |
| Address: | 12640 MOO | RE ST,, | | | | District to the state of the st | | | | |
| City/State/Zip: | CERRITOS, | CA, 907 | 703 | | | Pick up date: 12/1 Trailer #: | 19/2024 | Sea | al #: | |
| Patricia Martinez | | P: 5629 | 9215990 Ext. | | | | | | | |
| Stop Notes: | SI | IP TO | | , 7 . T. W. | | | REFERENCE | NFORMA | TION | |
| Name: | iHerb, LLC H | IBH | | | | Reference Name | 01 11 1001 071 | | Value | * |
| Address: | 2497 Wright | | | | 1 | | OL # 12816710 PO# 45001513 | | | |
| | | | | | | Orc | der # 45001512 | 202 | | |
| City/State/Zip: | HEBRON, K | Y, 41048 | 8 | | | | | | | |
| Receiving Stop Notes: | | P: 5139 | 9060745 Ext. | | | | | | | |
| | D PARTY FREIO | HT CHAR | RGES BILL TO | | | | | | | |
| Echo Global Logi | | | | | | | | | | |
| 00 West Chicago Chicago, IL 6065 | |) | | | | | | | | |
| reight Charge Term | s: | T | | | | | | | | |
| Prepaid X | | | Acct #: | | | | | | | |
| Srd Party X | | Quote | ID: | | | | | | | |
| Special Instructions | | | | | | Shipper Instruct Pickup #: | ions | <u>Co</u> Deliver | nsignee Instr / #: | uctions |
| Pickup #: 450015120 Destination: Delivery | 2 PO #: 45001 | 51202 Ori | gin: Pickup # 30 | 06769. E STACK | 1 | Loc Type: Busines Special Services: | S | Loc Ty | be: Busine Services: | ess |
| | ••• | - | | | | Opecial Gervices. | | Орсока | OCI VICCO. | |
| ECHO is not liable for a | ny accessorial cha | rges unless | pre-approved by E | cho or note | d | | | | | |
| on this bill of lading. LTL or Partial Only | ·: | | | | | | | | | |
| # of Pallets: 6 P | allet Type: | | | kable: No | 0 | | | | | |
| Pallet Dimensions: | | L: | W: H: | CARRIE | RIN | FORMATION | | | | |
| HANDLING UNIT | PACKA | | | НМ | OD | COMMODITY | | vastian . | LTL (| |
| QTY TYPE 6 Pallets | | YPE | WEIGHT 3990 lb | (X) | (X) | Commodities requiring special of in handling or stowing must be stowing must be stowing the story of the stor | or additional care or at | ed as t | NMFC# | 92.5 |
| 6 | 6 | inote in the | 3990 lb | All States | | GRAND | TOTAL | | | STATE OF THE |
| | | | | | . | COD Amounts & | | | | |
| Where the rate is dependent on va- ne property as follows: "The agre accessing | ive, shippers are required ed or declared value of the | property is spec | axy in writing the agreed of effically stated by the shipp | er to be not | ,1 | | ollect: | Pre | paid: | |
| NOTE Liability Limit | ation for loss of | damage | in this shipmen | t may be | applic | customer check a | |) and (B). | | |
| ECEIVED, subject to individually nd shipper, if applicable, otherwis | determined rates or conta e to the rates, classificatio | ds that have been and rules that | en agreed upon in writing b have been established by | etween the carri | er | The carrier shall not make delivery of th | | | nd all other lawful cha | mes, (Section 7) |
| valable to the shipper, on reques | t, and to all applicable stat | e and federal reg | gulations. | | | | | | Shippe | r Signature |
| SHIPPER SIGNATUR This is to certify that the above-nar lassified, described, packaged, monotion for transportation accord the Department of Typgropalating. | ned materials are properly arked, and labeled and are | in proper | ailer Loaded: By Shipper By Driver | 1 1 | y Ship | | CARRIER S Carrier acknowled certif is emergend has no Deput me equivajent depum | y response infor | RE / PICKUP ckages and movired per on was mide av- son immensy respon- tives. | labile and/or carreir |
| Shipper: Morro | Date: | 11-24 | By Driver | | | nr/Pieces | Carrigh | 11 1 | 0 | le: |
| | | - | | | | / | - L I I | 11 1 / | 0/1 | |
| () | ILTS | | | | | | | MM | VY | WYVI |

Quality Nutrition Labs LLC

12640 Moore Street Cerritos, CA 90703 Tel: 562-921-5990

SHIP TO:

Uni-Caps, LLC C/O iHerb Hebron Hub 2497 Wright Blvd., Suite 200 Hebron, KY 41048

PACKING LIST

Date:

12/10/2024

Account #

Packing List # 306769

| Cust. P.O. | S.O. No. | File No. | Ship Date | FOB | Ship \ | /ia | |
|------------|----------|---|--|---------------|---------|-------|--|
| UCQN23-055 | 204401 | 2023-10-029 | 12/10/2024 | Cerritos, CA | CPU | | |
| Item No. | P/N | | Description | | Shipped | Cases | |
| | | IHERB PO #45001512 | 02 / SHIP TO: IHERB HE | BRON HUB | | | |
| GUNI-00033 | | TG 1000mg 30ct (Ome | dre Labs (CGN-01251) E ga 800 Pharmaceutical C ite HDPE/ 38mm Smooth | Grade, German | 26,965 | 180 | |
| | | LOT UC240441 MFG 09/2024 EXP 09/2027 179 CS @ 150 BTLS/C | | IIX IA | 2 -3 | | |

Buyer shall immediately inspect goods upon receipt. Seller shall recognize no claims for defective goods, shortages, or for any other cause, unless claims are received by Seller within 15 days after delivery of the goods. Failure to make such written claim shall be construed as an acceptance of said goods.

| Work Order# | J24038 |
|-------------|--------|
|-------------|--------|

WHITE-Billing

CANARY-Shipping

5 PLTS @ 707 LBS/PLT - 40 x 48 x 57" 1 PLT @ 455 LBS - 40 x 48 x 45"

TOTAL 6 PLTS

PINK-Customer

| Rec'd | Ву: | Date: | Cases/Pallets: |
|-------|-----|-------|----------------|
| | | | |