

SHIP FROM	
Name:	GENEREX SYSTEMS INC.
Address:	109 Magnolia Park Drive
City/State/Zip:	Mooresville NC 28117
Expected Ship Date:	10/21/2025
Shipping Hours:	08:00-16:30
SID#:	FOB: <input type="checkbox"/>
Pickup/Delivery Number:	PROPACOP PO 1019 / Invoice 91006294
Contact Info:	Joy McKeon 7049661577
References:	PROPACOP PO 1019 / Invoice 91006294 100426008

SHIP TO	
Name:	GAVA IFC C/O PROPACOP SPA
Address:	1611-1617NW 82 ave
City/State/Zip:	Miami FL 33126
Shipping Hours:	09:00-16:00
CID#:	FOB: <input type="checkbox"/>
Pickup/Delivery Number:	
Contact Info:	Receiving Team 3054709911
References:	DELIVERY P/U NUMBER: 609

SPECIAL INSTRUCTIONS:  
PU: PROPACOP PO 1019 / Invoice 91006294  
Del: NO NEED TO WAIT IN LINE FOR DELIVERY, JUST ASK FOR XAVIER QUINTANA. TELL HIM IT IS A GAVA SHIPMENT AND HE WILL GUIDE THE DRIVER TO PRIORITY DOO

Accessorials:  
Non Stackable

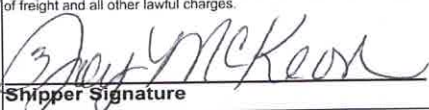
CUSTOMER PO NUMBER:  
DELIVERY P/U NUMBER: 609  
ORDER NUMBER:


<b>Bill of Lading Number:</b> SHP6367708	
<input type="checkbox"/> Master Bill of Lading: with attached underlying Bills of Lading	
Underlying Bill of Lading Numbers:	
<b>CARRIER NAME:</b>	R+L Carriers (LTL)
Carrier Comments:	
Service Class:	Standard Service
Quote/Contract Id:	RLCA_BA:6224856
Carrier Instructions:	For Accessorial Authorizations please contact BASINGEN GROUP: opscarriers@basingen.com, ph: (305) 420-5177
Messages:	
Trailer Number:	
Seal Number(s):	
<b>SCAC:</b>	RLCA
<b>Freight Charge Terms (freight charges are prepaid unless marked otherwise):</b> Prepaid <input type="checkbox"/> Collect <input type="checkbox"/> Third Party <input checked="" type="checkbox"/>	
<b>THIRD PARTY FREIGHT CHARGES BILL TO</b>	
Name:	BASINGEN GROUP
Address:	9737 NW 41st Street # 465
City/State/Zip:	Doral FL 33178

**21936794-4** SHIPPERS COPY  
This shipment is subject solely to the terms and conditions of Carrier's Individual and Collective Tariffs, including Limitations of Liability and the Uniform Straight Bill of Lading, NMFC 100 series.

CARRIER INFORMATION							
HANDLING UNIT		PACKAGE				LTL ONLY	
QTY	TYPE	QTY	TYPE	WEIGHT	HM (X)	COMMODITY DESCRIPTION	NMFC #
1	Pallets (49L x 49W x 30H in)			375 lbs		Controllers w/hardware (Quoted by density)	100
1				375 lbs		GRAND TOTAL	

Per \_\_\_\_\_

<b>SHIPPER SIGNATURE / DATE</b> 10/21/25 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.  Shipper Signature	The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.	<b>Trailer Loaded Freight Counted</b> <input type="checkbox"/> By Shipper <input type="checkbox"/> By Driver <input type="checkbox"/> By Driver/pallets said to contain: <input type="checkbox"/> By Driver/Pieces:
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<b>CARRIER SIGNATURE / PICKUP DATE</b> Carrier acknowledges receipt of packages and required placards. Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent documentation in the vehicle. Property described above is received in good order, except as noted. 	<b>CONSIGNEE SIGNATURE / DELIVERY DATE</b>
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