

| DOCUMENTO DE OPERACIÓN PARA DESPACHO ADUANERO (DODA).   |          |                                 | Página 1 de 1   |
|---|----------|---------------------------------|---|
| No. DE INTEGRACIÓN:<br>136979948  |          | PATENTE O AUTORIZACIÓN:<br>3905 |   |
| FECHA DE EMISIÓN: 2025-11-07 13:24:56   |          |                                 |  |
| N° TOTAL DE PEDIMENTOS Y/O AVISOS CONSOLIDADOS DE LA OPERACIÓN: 1   |          |                                 |   |
| CONTENEDORES/EQUIPO DE FERROCARRIL/N° ECONÓMICO DEL VEHÍCULO:   | CANDADOS | SECCIÓN ADUANERA DE DESPACHO:   |   |
| HMKD807196  |          | 240 NUEVO LAREDO, TAMAULIPAS.   |   |
| CADENA ORIGINAL:   240 3905 1 5007386 136979948 PC10039 HMKD807196 2025-11-07 13:24:57  |          |                                 |   |
| FOLIO FISCAL DE CFDI CON COMPLEMENTO CARTA PORTE:   |          |                                 |   |
| 68684844-F61B-43A6-893D-FDF513716408  |          |                                 |   |
| FIRMA DEL REPRESENTANTE LEGAL, AGENTE ADUANAL, AGENCIA ADUANAL O APODERADO:   |          |                                 |   |
| N° DE SERIE DEL CERTIFICADO: 00001000000702745377   |          |                                 |   |
| <b>SELLO DIGITAL:</b> Fs7M7d2eKahFbCenHXoTCiQiIbVm+OQQs+yyQss5KYFERuLh2FhhBpq8fZogoHwaLRrKGqTyUyICgcuB/gwcXxd6wpKRxCs2PF1WzqDEm5ZreJQLldjPTcR0iKaLfmDuW2OsOhP0WdOGuiz80EvNctfnWhBcEQwkNiTnQ1FOc9RgHLcV174YL2XNQ1Q51cnAnsv6I65+NnoDB0/GGLYUwYgdu0TGmZ1TlvRrnc/5ojwXAgcH2hBUuxudcCCehAbM17MIZHZHxqgdfsawgxTBZcsflZf2e9r+gofpqy+2VajpK5J4M+wwfJ/0DwUfgsj2UrxjL6HJeIDTCLTx4Co0BSg== |          |                                 |   |
| SELLO DEL SAT:  |          |                                 |   |
| N° DE SERIE DEL CERTIFICADO: 20000108888800000031   |          |                                 |   |
| <b>SELLO DIGITAL:</b> Qu1QkYH4p0RdxJ3hBUSrpnsvI4c+y35cHT6EE7DvBFsmu6+NRK/9RswH/VKZ9xLL4kTrmH0VfJZmR3ICoA/yICP/vCuM90vw85rx6Pcljj2WBHwX1Xtgl+BvLTDinS+Ru8Vo3/wGJcfUkbe2yHvZX0uRh+wyg1HLMWky+D8hvE=   |          |                                 |   |

11/7/25

EA2528800

7:00

0000269

0000262

HMKD 807196

EP

DECLARO BAJO PROTESTA DE DECIR VERDAD, EN LOS TÉRMINOS DE LO DISPUESTO POR EL ARTÍCULO 81 DE LA LEY, REPRESENTANTE LEGAL, AGENTE ADUANAL, AGENCIA ADUANAL O APODERADO.

ALEJANDRO PEREZ HERRERA

\*La fecha y hora de emisión corresponden a la hora centro del país

DEPARTMENT OF HOMELAND SECURITY  
U.S. Customs and Border Protection

OMB No. 1651-0024  
Exp. 04-30-2015

**ENTRY/IMMEDIATE DELIVERY**

CARMICHAEL INTERNATIONAL SERVICE  
8402 EL GATO ROAD  
LAREDO, TX

BOX NO.

19 CFR 142.3, 142.16, 142.22, 142.24

|   |                                      |                                    |  |   |  |   |  |
|---|--------------------------------------|------------------------------------|--|---|--|---|--|
| 1. ARRIVAL DATE<br>110525   |                                      | 2. ELECTED ENTRY DATE              |  | 3. ENTRY TYPE CODE/NAME<br>01 FREE & DUTIA                        |  | 4. ENTRY NUMBER<br>442-8253411-2        |  |
| 5. PORT<br>2304   |                                      | 6. SINGLE TRANS. BOND              |  | 7. BROKER/IMPORTER FILE NUMBER<br>01880125008374000               |  |   |  |
|   |                                      | 8. COSIGNEE NUMBER<br>93-382831100 |  | 9. IMPORTER NUMBER<br>SAME  |  |   |  |
| 10. ULTIMATE CONSIGNEE NAME<br>VANTIVE US HEALTHCARE<br>510 LAKE COOK RD<br>DEERFIELD, IL 60015 |                                      |                                    |  | 11. IMPORTER OF RECORD NAME<br>SAME                               |  |   |  |
| 12. CARRIER CODE<br>AXPG ARALO EXPRESS S A  |                                      | 13. VOYAGE/FLIGHT/TRIP             |  | 14. LOCATION OF GOODS-CODE(S), NAME(S)<br>V641 WORLD TRADE BRIDGE |  |   |  |
| 15. VESSEL CODE/NAME  |                                      |                                    |  |   |  |   |  |
| 16. U.S. PORT OF UNLADING<br>2304   |                                      | 17. MANIFEST NUMBER                |  | 18. G.O. NUMBER   |  | 19. TOTAL VALUE                         |  |
| 20. DESCRIPTION OF MERCHANDISE<br>DIANEAL LOW CAL 2.5% DEX 6L/6L                                |                                      |                                    |  |   |  |   |  |
| 21. IT/BL/AWB CODE<br>M   | 22. IT/BL/AWB NO.<br>AXPG44282534112 | 23. MANIFEST QUANTITY<br>20        |  | 24. H.S. NUMBER<br>99030104<br>99030127<br>3004909270             |  | 25. COUNTRY OF ORIGIN<br>MX<br>MX<br>MX | 26. MANUFACTURER ID.<br>MXBAXSA50JIU<br>MXBAXSA50JIU<br>MXBAXSA50JIU |
|   |                                      |                                    |  |   |  |   |  |
|   |                                      |                                    |  |   |  |   |  |
|   |                                      |                                    |  |   |  |   |  |
|   |                                      |                                    |  |   |  |   |  |

**27. CERTIFICATION**

I hereby make application for entry/immediate delivery. I certify that the above information is accurate, the bond is sufficient, valid, and current, and that all requirements of 19 CFR Part 142 have been met.

SIGNATURE OF APPLICANT  
**X** CARMICHAEL INTER ATTORNEY IN-FACT

PHONE NO. DATE 956-722-8900  
FAX 2132500710 11/05/25

**29. BROKER OR OTHER GOVT. AGENCY USE**

**28. CBP USE ONLY**

OTHER AGENCY ACTION REQUIRED, NAMELY:

CBP EXAMINATION REQUIRED.

ENTRY REJECTED, BECAUSE:

INVOICE EF571391  
TRAILER HMKD807196  
GW 19306 KG  
LID 207069

*Handwritten signature/initials*

|                      |           |      |
|----------------------|-----------|------|
| DELIVERY AUTHORIZED: | SIGNATURE | DATE |
|----------------------|-----------|------|

Paperwork Reduction Act Statement: An agency may not conduct or sponsor an information collection and a person is not required to respond to this information unless it displays a current valid OMB control number and an expiration date. The control number for this collection is 1651-0024. The estimated average time to complete this application is 15 minutes. If you have any comments regarding the burden estimate you can write to U.S. Customs and Border Protection, Office of Regulations and Rulings, 799 9th Street, NW., Washington, DC 20229.



|                      |            |
|----------------------|------------|
| Código               | F2101006-6 |
| Revisión             | C          |
| Páginas              | 1 de 1     |
| Fecha de efectividad | 09 MAY 25  |

REGISTRO DE CONOCIMIENTO DE EMBARQUE / BILL OF LADING

FECHA / DATE: 03 nov 25

REFERENCIA NO. / OUR REF. NO. 8232983

ORIGINAL - NO NEGOCIABLE / ORIGINAL - NOT NEGOTIABLE

SE CERTIFICA QUE LA PROPIEDAD DE ESTE RECIBO FUE IMPORTADA EN / IT IS CERTIFIED THAT THE PROPERTY IN THIS RECEIPT WAS IMPORTED IN THE

| EMBARCADOR / SHIPPER   | TRANSPORTISTA ORIGINARIO / ORIGINATING CARRIER |
|--|--|
| COMPañÍA / COMPANY NAME: BAXTER, S.A. DE C.V.<br>DIRECCIÓN / ADDRESS: AVENIDA DE LOS 50 METROS No. 2<br>CIUDAD, ESTADO, CP / CITY, STATE, ZC CIVAC, JIUTEPEC MORELOS C.P. 62578<br>CONTACTO / CONTACT: Campos Flores Augusto<br>TELEFONO / PHONE NUMBER: MEXICO, TEL.: (777) 329-60-00                     | JB HUNT  |
|  | ADUANA / FROM PORT OF                          |
|  | <b>NUEVO LAREDO</b>                            |
| CONSIGNADO A / CONSIGNED TO  | AGENTE ADUANAL / CUSTOMS BROKER                |
| COMPañÍA / COMPANY NAME: VANTIVE US HEALTHCARE LLC<br>DIRECCIÓN / ADDRESS: 7CI CINCINNATI, OHIO (CAH DC), 5532 SPELLMIRE DRIVE, CINCINNATI,<br>CIUDAD, ESTADO, CP / CITY, STATE, ZC Cincinnati, OH 45246-4856<br>CONTACTO / CONTACT: GMB-CincinnatiReceiv@cardinalhealth.com<br>TELEFONO / PHONE NUMBER: 0 | MOVERS   |
|  | TRANSPORTISTA IMPORTADOR / IMPORT CARRIER      |
|  | JB HUNT  |

| DESTINO / DESTINY | CONTENEDOR NO. / CONTAINER NO. | SELLO / SEAL       |
|-------------------|--------------------------------|--------------------|
| Cincinnati, OH    | HMKD807196                     | 0000269<br>0000262 |

| NO PALLETS / NO. OF PALLETS | DESCRIPCION DE ARTICULOS, MARCAS ESPECIALES / DESCRIPTION OF ARTICLES, SPECIAL MARKS | PESO (LBS) / WEIGHT (LBS) | LEAN ID | PO       |
|-----------------------------|--|---------------------------|---------|----------|
| 20                          | DIANEAL LOW CAL 2.5% DEX 6L/6L<br><br>ON STATUS                                      | 42,562.47                 | 207069  | 62956828 |

CON CITA EL: AGENDE CITA / With appointment On: SCHEDULE APPOINTMENT

RECIBIDO POR / RECEIVED BY

Sujeto a las tarifas legalmente vigentes en la fecha de emisión de este conocimiento de embarque / Subject to the lawfully filed tariffs in affect on the date of the issue of this Bill of lading

FIRMA / SIGNATURE

REALIZADO POR: A. Campos 03 nov 25

