

INVOICE

"Committed To Excellent Services"
Viking Express Freight c/o Jobe Services Dept. 22
PO BOX 4346
Houston, TX 77210-4346

INVOICE# GH-1344 Date: 03-19-24

BILL TO: Grogan – Hazel Steel P.O. Box 40068 Houston, TX 77240

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-15-24	TICKET#13028	AZZ	GROGAN-HAZEL	\$150.00
03-15-24	TICKET#13016	S.W.G.	GROGAN-HAZEL	\$175.00

Make all checks payable to VIKING EXPRESS

TOTAL FREIGHT CHARGES DUE IN 7 DAYS. If you have any questions concerning this invoice call 832-256-6501. THANK YOU FOR YOUR BUSINESS!

Total Amount Due \$325.00

Express

VIKING EXPRESS FREIGHT SERVICES

P.O. Box 40892 Houston, Texas 77240 Tel: (832) 256-6501

vikingexpress2003@yahoo.com

Control #	
NO.	13028
DATE 3/	15/24

CHARGES		,	TYPE OF DI	ELIVERY	
□ PREPAID □	COLLECT BILL TO	24 Hrs. / 7 days a week	☐ 1HR	□2HR	□4HR
SHIPPER A	22	CONSIGNEE (3RO	GAN HA.	ZK (STEEL
	103 FAIRBANI	ADDRESS 1054-	FISHER	RO	
CITY HOUN	10N TX 7706	4 CITY HOUSEN	, /		
ATTN / P.O.		ATTN / P.O.			
NO PCS.	DE	SCRIPTION AND MARKS	WEIGHT	RA [*]	ΓE
11			970		
/					
		PO 112 00			
		1 4200			
			TOTAL WEIGHT		
BILL TO:			SB/GN		
TIME	START ENI	DING TOTAL MILES	PIPE RACK		
NOT RESPONSI	BLE FOR FREIGHT CLAIMS AFTER SEE FOR CONCEALED DAMAGES	R 48 HRS	C.O.D. AMOUNT		
	AD WALLIE UNITES BEFECTFIED HE		AFTER HOURS		
	DRIVER & NO.	The state of the s	TOTAL	#150	GA



VIKING EXPRESS FREIGHT SERVICES

P.O. Box 40892 Houston, Texas 77240 Tel: (832) 256-6501

vikingexpress2003@yahoo.com

Control	#	_
NO.	13016	
DATE	15/24	

CHARGES		TYPE OF D	ELIVERY	
□ PREPAID □ COLLECT □ BILL TO	24 Hrs. / 7 days a week	☐ 1HR	□2HR 🤫	□4HR
SHIPPER SOUTHWEST GI	ALVANZING CONSIGNEE GRO	GAN HA.	20/	
ADDRESS	ADDRESS /054-	FISHER	RL	
CITY HOUSTOW 7	X CITY HOBUS	You The		
ATTN / P.O.	ATTN / P.O.			
NO PCS. DESC	RIPTION AND MARKS	WEIGHT	RATI	E
4 GARIWIRCO	10615		Ar.	
4 SMALL FAL A	NSICS	-		
4 SMAllen CABO	BOHS 4 478M			
	# 1005C	/		
		TOTAL WEIGHT		
BILL TO:		SB/GN		
TIME START ENDING	G TOTAL MILES	PIPE RACK		
NOT RESPONSIBLE FOR FREIGHT CLAIMS AFTER 48 NOT RESPONSIBLE FOR CONCEALED DAMAGES	0 1 105/	C.O.D. AMOUNT		
\$50 DECLARED VALUE UNLESS SPECIFIED HERE	RECEIVED IN GOODICENDITION	AFTER HOURS		
्रिम्प्राम् भीन्त्रित	1	TOTAL CHARGES	\$ 175	O O



INVOICE

"Committed To Excellent Services"
Viking Express Freight c/o Jobe Services Dept. 22
PO Box 4346
Houston, TX 77210-4346

INVOICE# TPW-934 DATE: 03-19-24

BILL TO: TEXAS PIPE WORKS P.O. BOX 2937 LONGVIEW, TX 75606

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-13-24	11852 TK#1	TEXAS PIPE SUPPY	TEXAS PIPE WORKS	\$900.00
	11852 TK#1	WAIT TIME	4 HRS BILLABLE	\$300.00

•

Total Amount Due

\$1,200.00

Make all checks payable to VIKING EXPRESSTOTAL FREIGHT CHARGES DUE IN 7 DAYS. If you have any questions concerning this invoice, call 832-256-6501.

THANK YOU FOR YOUR BUSINESS!

3113 WTK#1 Po#1852 Texas Pipe & Supply Co.

PACKING LIST

VISIT OUR WEBSITE -

2330 HOLMES ROAD HOUSTON, TX 77	7051-1008 USA	THERETO BID.	•	www.texaspipe	.com
PHONE: (713) 799-9235 FAX: (713)	799-8701				· 4G
DALLAS TEXAS MOSSIE, ALABAMA	AUDULESEX, NEW RERRY AUDULESEX, NEW RERRY	S TEXAS PIPE 8		Y CO	141
WEST CHESTER, ONEO BRIDGETON, MISSIOURI	DECATUR OF ORTH CAROLINA DECATUR OF ORGIA	# 2330 HOLMES	ROAD		
PAGE ORDER DAT	E ORDER NO.	HOUSTON TX	77051-	1098	S.
CI#2241608 1 03/12/2	339784				
WHS. SALES LOC SHIP DATE					
01 01 03/12/2	115875	6 WILL CALL -	PICK U	P ADDRESS:	70.0
21544		s 2330 HOLMES			985
TEXAS PIPE WORKS INC		H M-TH 7AM-3:3	OPM/FR	I 7AM-2:30PM	1
PO BOX 2937			77051-		
LONGVIEW TX 75606 UNITED STAT					
AP TEL/FAX: 903 297-7833 903 29	7-9240				
		6			
ORDERED BY CUSTOMER P.O. NO.					
ORDERED BY CUSTOMER P.O. NO. MATT TERRELL 0011852		SHIPPED VIA VIKING 106	S.	ALES REPRESENTATIVE	
0011001	IT TERMS				
0.00 33611 LBS SHIP			IGINATION	arr r nan	
COMMENTS:	TING FOINT	DF		GILLESP	
Ent: ricardoz				ARBON STEEL W	
Enc. 11cardoz				articulates may be	
			to	your health. F	or more
			li li	nformation refer to	M.S.D.S.
					4
QUANTITY ORDERED QUANTITY SHIPPED		ITEM DESCRIPTION			LINE
1176 00 -	3" STD 0.32	ITEM DESCRIPTION		1	WEIGHT/UOM
	ORL	2° PIPE ERW A53 G	R B P	7	Ln 1
HEATS: (9 J) 86697 SAHA		13310	P) ////	6	
(6 J) 86698 SAHA	THAT THAT	TAND 28P			
(3 J) 86956 SAHA	MUNT MUNT	TAND	, JAC		
(3 J) 86958 SAHA	THAI THAI	LAND	ノ		
(4 J) 86971 SAHA	THAI THAI	LAND	(1)		
(3 J) 86976 SAHA	THAI THAI	LAND	-61		of a
(5 0) 003/0 SANA	. IDAL THAL	LAND 02/	13/21		
		10			_
Package No.	Pka Tame	Woight Dog in	Dles		
rackage No.	rkg Type	Weight Pcs in	Pkg		çí cu
	LOOSE	33,611	20		
	10001	33,011	28		
	TOTALS:	33,611	20		8.21
	TOTALS:	33,011	28		
Ta 1121	1 -				
Time In: 11:30	am				
,					
1. 1151	2				
out: 6:15/	repri.				
		,			
					-
Note - Where the rate is dependent on value, shippers are required to state specific or declared value of the property.	ally in writing the agreed Su	blect to Section 7 of the conditions, if this shipment is t	a be delivered to the		
The agreed or declared value of the property is hereby specifically stated by the shi		nilpnes without recourse on the consigner, the consigner rethert. The carrier shall not make delivery of this ships reight and all other levelul phanass.	ores sign the following mant without payme	COD Amt \$	
	ppor to so not accessing	-		FREIGHT 3	heck box if
per		(Signature of Consignor)		CHARGES X 9	harges are
RECEIVED, subject to the classifications and https://www.html.gov/minted-tariffs indicated above which said the contract agrees to agree to ag	of the issue of this Bill of Lad carrier, [the word carrier being	ing, the property described above in apparent g	ood order, except	as noted [contents and condition	of contents of
Shipper hereby certifies that he is femiliar with all the bill of lading terms and condition	s in the governing classification	n and the said terms and conditions are benefit	annual to be the	shipper and accorded to binned	using terms and
Interstate Commerce Commission, and in offset on the date of discount shows, and	quict to the classification and ta	intts in effect on the date hereof and to the term	s and conditions of	of the Uniform Express Receipt, pri	escribed by the
TEXAS PIPE & SUPPLY MUST BE NOTIFIED OF CAMAGES OR SHORTAGES WI RECEIVED THE ABOVE SHIPMENT IN GOOD ORDER; BY SIGNING THIS BELL OF	THIN 24 HRS. OF RECEIPT OF IF LADING CARRIER ACRE	OF PIPE.	MI DOLLE	Marian Maria	
RECEIVED THE ABOVE SHIPMENT IN GOOD ORDER; BY SIGNING THIS BELL O	1/24	x D.L d.	III.	WITHIN THIS BILL OF LADING	
CONSIGNEE	ATT	RECEIVED BY (CAPPIER)	THE	DATE	-
	47:30A	N. Till 1000 D.M.		DATE	



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2729 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67 ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-13-24	1001055379	MILLER MAYS	WAY ENGINEERING	\$200.00
			15% FSC	\$30.00

Total Amount Due \$230.00

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bill	of Lading - Short Form - Original - Not	Negotiable	BOL NO: 1001055379		
Shipperi Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 03-13-2024 PRO #: Sales Order #: 17606241 PO #: F2812-27139 Trip #: 1055377	Carrier: VIKING Payment Term: Absorbed		
Consignee Address: Country: Contact Name: Phone No: Fax No:	Way Engineering-UH Football Op Center 3700 Cullen Blvd Houston, TX 77004 USA Sean 832-322-1671	Third Party Billing Information S Zurn Ind. C/O Cass Information S PO Box 67 Saint Louis, MO 63166			
Pickup Rema Package Type Pallet Total: Shipper Certif shipping name a	Package Qty Pieces Description 1 0 210 - Spec Drain - Metal Dra 1 0 ication : I hereby certify that the contents of this core and are classified, packaged, marked and labeled and mental regulations.	ins 2,168 lbs 50.0 0.000 2168 signment are fully and accurately			
Driver's Signa	oture:	Date:	Trailer#:		
Drivers Certification: Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle. Subject to Section 7 of cenditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.					
	Signature o	of Consignor			
Cosignee Sign	WAY EM-	Print Name:			
NOTE Liability Li	mitation for loss or damage in this shipment may be	applicable. See 49 U.S.C ŧ 1470	6(c)(1)(A) and (B)		



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

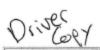
INVOICE# REX- 2730 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67 ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-12-24	1001054451	MILLER MAYS	WAY ENGINEERING	\$200.00
			15% FSC	\$30.00

Total Amount Due \$230.00

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bill	of Lading - Short Form - Original - Not	Negotiable	BOL NO: 1001054451		
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 03-12-2024 PRO #: Sales Order #: 17606241 PO #: F2812-27139 Trip #: 1054449	Carrier: VIKING Payment Term: Absorbed		
Consignee Address: Country: Contact Name: Phone No: Fax No:	Way Engineering-UH Football Op Center 3700 Cullen Blvd Houston, TX 77004 USA Sean 832-322-1671	Third Party Billing Information Zurn Ind. C/O Cass Information S PO Box 67 Saint Louis, MO 63166			
Pickup Rema Package Type Pallet Total: Shipper Certifi shipping name a national government	Package Qty Pieces Description 1 0 210 - Spec Drain - Metal Dra 1 0 Ication: I hereby certify that the contents of this conductor and are classified, packaged, marked and labeled and nental regulations.	ins 2,162 lbs 50.0 0.000 2162 signment are fully and accurately	/ land/air according to applicable		
Shipper's Sigr	nature:	Date:	Trailer#:		
Driver's Signature:					
	Signature o	f Consignor			
Cosignee Sign	nature	Print Name	me Eve		
Company Nan	ne:	. Date:	_		
NOTE Liability Lin	nitation for loss or damage in this shipment may be a	applicable. See 49 U.S.C Á§ 14706	5(c)(1)(A) and (B)		

On Maria

Ol



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2731 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67

ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-14-24	1001056437	MILLER MAYS	KILGORE	\$250.00
			15% FSC	\$37.50

Total Amount Due \$287.50

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bill of Lading - Short Form - Original - Not Negotiable BOL NO: 1001056437					
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 03-14-2024 PRO #: Sales Order #: 17643441 PO #: \$4505418 Trip #: 1056435	Carrier: VIKING Payment Term: Absorbed		
Consignee Address: Country: Contact Name: Phone No: Fax No:	Kilgore-MD anderson 1MC 7007 Bertner Ave Houston, TX 77030 USA Jesus 956 533 3900	Third Party Billing Information Zum Ind. C/O Cass Information Sy PO Box 67 Saint Louis, MO 63166			
Pickup Rema		Delivery Remarks:	Width (ft) Height (ft) NMFC		
Package Type Package Qty Pieces Description Weight Class Length (ft) Width (ft) Height (ft) NMFC Pallet 2					
Driver's Signa	ature:	Date:	Trailer#:		
Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle. Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the					
consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.					
Signature of Consignor					
Cosignee Signature: Print Name:					
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C ŧ 14706(c)(1)(A) and (B)					



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2732 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67 ST. LOUIS, MO 63166

P.O. Number	Shipper	Consignee	Amount
1001057533	MILLER MAYS	TD KINCAID	\$375.00
		15% FSC	\$56.25
			1001057533 MILLER MAYS TD KINCAID

Total Amount Due \$431.25

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bill	of Lading -	Short	Form - Original - Not	Negotiabl	е	BOL N	0: 1001057533
Shipperi Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timl Houston, TX 77 USA		ing #130	PRO #:	Pate: 03-15-2024 r #: 17567506 2-22745-1	Carrier: V (Payment Ter	
Consignee Address: Country: Contact Name: Phone No: Fax No:	TD Kinkaid 201 Kinkaid Sci Piney Point Villi USA Rerie 346-657-7324		7024		Billing Information S Cass Information S 10 63166		,
Comments/S Pickup Rema	pecial instruct	ions:		Delivery Ren	narks:		
Package Type	Package Qty		Description 210 - Spec Drain - Metal Dra		Class Length (f	t) Width (ft) H	eight (ft) NMFC 0.000 50810.2
Shipper Certification: I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations. Shipper's Signature: Date: 3/15/24 Trailer#:							
Carrier certifies	cation :Carrier a	onse info	dges receipt of packages in rmation and required placar rehicle.	Date: . good order, co ds were made	ndition and quantit	Trailer#: y unless otherwis rrier has the D.O	se stated hereon. .T. emergency
consignor, the c	onsignor shall sk	an the fol	cable bill of lading. If this shi lowing statement. The carrie 0106 with problems.	pment is to be er shall not mai	delivered to the co ke delivery of this s	onsignee without hipment without	recourse on the payment of freight
Cosignee Sigr	nature:	2/	Signature o		Print Name:		
Company Nar	ne:			. ,	Date:		
NOTE Liability Lir	mitation for loss	or damaç	ge in this shipment may be a	applicable. See	49 U.S.C ŧ 1470	δ(c)(1)(A) and (B)
		NORTH CONTRACTOR					



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

INVOICE# REX- 2733 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67 ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-18-24	1001058849	MILLER MAYS	GREY MECH	\$250.00
			15% FSC	\$37.50

Total Amount Due \$287.50

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bil	Negotiable BOL NO: 1001058849				
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 03-18-2024 Carrier: VIKING PRO #: Payment Term: Absorbed Sales Order #: 17652104 PO #: F190-15115 Trip #: 1058847			
Consignee Address: Country: Contact Name: Phone No: Fax No:	Gray Mech-7705-Teen engineering + Tech C 23055 springwoods Village Pkwy Spring, TX 77389 USA Chris 346-465-4423	Third Party Billing Information : Zurn Ind. C/O Cass Information Systems PO Box 67 Saint Louis, MO 63166			
Pickup Rema		Delivery Remarks:			
Package Type Package Qty Pieces Description Weight Class Length (ft) Width (ft) Height (ft) NMFC Pallet 1 0 210 - Spec Drain - Metal Drains 3,287 lbs 50.0 0.000 0.000 0.000 50810.2 Total: 1 0 3287 Shipper Certification: I hereby certify that the contents of this consignment are fully and accurately described above by proper Shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations. Shipper's Signature: Date: 3/18/24 Trailer#:					
Driver's Signature: Date: Trailer#: Drivers Certification :Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.					
Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.					
Cosignee Signature: Supplier Duncan Print Name: HRIS DUNCAN Company Name: Date: 3/8/24 NOTE Liability Limitation for loss of damage in this shipment may be applicable. See 49 U.S.C ŧ 14706(c)(1)(A) and (B)					



INVOICE

"Committed To Excellent Services"
Remit: Viking Express Freight Services, LLC
c/o J.O.B.E. Service, Inc. Dept.22
PO Box 4346 Houston, TX 77210-4346

Email: arprocess@jsifactoring.com

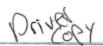
INVOICE# REX- 2734 DATE: 03-19-24

BILL TO: Zurn NMP Processing c/o Cass Information Systems P.O. BOX 67 ST. LOUIS, MO 63166

Ship Date	P.O. Number	Shipper	Consignee	Amount
03-13-24	1001055769	MILLER MAYS	AFTON	\$130.00
			15% FSC	\$19.50

Total Amount Due \$149.50

Make all checks payable to VIKING EXPRESS TOTAL FREIGHT CHARGES DUE IN 7 DAYS.



Straight Bill of Lading - Short Form - Original - Not Negotiable BOL NO: 1001055769					
Shipper: Address: Country: Contact Name: Phone No: Fax No:	Miller Mays 4660 Pine Timbers Building #130 Houston, TX 77041 USA	Customer Reference Shipment Date: 03-13-2024 PRO #: Sales Order #: 17647127 PO #: Need PO Trip #: 1055767	Carrier: VIK)MG Payment Term: Absorbed		
Consignee Address: Country: Contact Name: Phone No: Fax No:	Afton-Aldine ISD Thome stadium 1865 Aldine Bender Rd Houston, TX 77032 USA Gerardo 713-380-0720	Third Party Billing Informatio Zurn Ind. C/O Cass Information S PO Box 67 Saint Louis, MO 63166			
Comments/Sp Pickup Rema	oecial Instructions: rks:	Delivery Remarks:			
Package Type Package Qty Pieces Description Weight Class Length (ft) Width (ft) Height (ft) NMFC Bundle 3 0 210 - Spec Drain - Metal Drains 119 lbs 50.0 0.000 0.000 0.000 50810.2 Total: 3 0 119 Shipper Certification: I hereby certify that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled and in proper condition for carriage by land/air according to applicable national governmental regulations.					
Shipper's Sign	nature: Such BL	Date: 3/13/71)	Trailer#:		
Driver's Signa	ture:	Date:	Trailer#:		
Drivers Certification : Carrier acknowledges receipt of packages in good order, condition and quantity unless otherwise stated hereon. Carrier certifies emergency response information and required placards were made available and/or carrier has the D.O.T. emergency response guidebook or equivalent in the vehicle.					
Subject to Section 7 of conditions of applicable bill of lading. If this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement. The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges. Call 414-808-0106 with problems.					
Signature of Consignor					
Cosignee Signature: Reves Print Name: Rul Reves					
Company Name: AFTON Date:					
NOTE Liability Limitation for loss or damage in this shipment may be applicable. See 49 U.S.C ŧ 14706(c)(1)(A) and (B)					