## **SCHEDULE OF ACCOUNTS**

J.O.B.E. Client ID EHS

This is to certify that the parties named below are indebted to the undersigned in the sums set oppsite their respective names, for merchandise sold and delivered or for work and labor done and accepted.

Debtor's Name	DC	Misc	Ref#	Invoice 1	No. Inv. Date	Inv. Amount
M E DECKER TRANSPORTATION, INC.	SEH		68642	68642	02/16/2024	\$ 520.00
M E DECKER TRANSPORTATION, INC.	SEH		68646	68646	02/16/2024	\$ 520.00
M E DECKER TRANSPORTATION, INC.	SEH		68653	68653	02/20/2024	\$ 520.00
M E DECKER TRANSPORTATION, INC.	SEH		68654	68654	02/20/2024	\$ 520.00
	+					
	-					
						1
Do not Write in this box-J.O.B.E. Services, Inc. Use Only  Check No:					\$ 2,080.00  Reserve:  Computed Amt:  Reserve:  Chargeback:  Fuel:  Bank Charge:  Other:  Cash Payment:	
Timestamp: 20:24:49 Do you request a reserve i	refund?	Yes:	No: 🗸		<u> </u>	
Date: 2/20/2024 Seller: EAGLETON	HOT SH	IOT (A PARTNI	ERSHIP) By: eag	detonhotshot@vah	oo.com	

**Authorized Signature** 

**Company Name**