SCHEDULE OF ACCOUNTS

J.O.B.E. Client ID

This is to certify that the parties named below are indebted to the undersigned in the sums set oppsite their

EHS

respective names, for merchandise sold and delivered or for work and labor done and accepted.

Debtor's Name	DC	Misc	Ref#	Invoice I	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
Do not Write in this box-J.O.B.E. Services, Inc. Use Only Check No:					Total: \$ 2,080.00 Reserve:		
					Computed Amt: Reserve:		
					Fuel:		
					Bank Charge:		
					Other:		
					Cash Payment:		
					Timestamp: 20:24:49 Do you request a reserve refund? Yes: No:		
Date: 2/20/2024 Seller: EAGLETON HOT SHOT (A PARTNERSHIP) By: eagletonhotshot@yahoo.com							
Company Name Authorized Signature							