SHIP METHOD:	Ground	STOP#:	of
BOL NUMBER:	209199	SHIPMENT:	1221193
CUSTOMER:	LNS Pack & Hold	WBS:	N.007195.C.06
PROJECT:	BVN3Z85D9		
ORIGIN:	Redman Van & Storage	DESTINATION:	CENTURY LINK-MIDVALE
Contact:	LYNN CHANDLER	Address:	55 EAST 7800 SOUTH
Phone:	801-972-4420 EXT 338		
Address:	2589 south 2570 west	City, State, Zip:	MIDVALE, UT 84047
		Primary Contact:	RUSS BENSON-CL
City, State, Zip:	west valley city, UT 84119	Primary Phone:	801-214-4364
CARRIER:		Secondary Contact:	CURT OAKESON-CL
Phone:		Secondary Phone:	801-707-7583
Address:		01	
		Chav	<b>27</b>
City, State, Zip:		1/0/0	
SPECIAL INSTR	UCTIONS:	Chav	1V <del>1</del> 1
0			
SHIPMENTEVAL	LUATION / CONFIRMATION:		
Service Type:	ST TT V HH	Date Requested:	10/23/2015
Loader Name		Time Requested:	Between 8:00 AM - 11:00 AM
Driver/Helper Name:		Start Date / Time:	11 So am OCT 2 3 2015
Truck/Number:		Actual Arrival Time:	12:15 pm OCT 2 3 2015
Miles Traveled:	al miles	Depart. Date/Time;	12:30 Pm OCT 23 2015
On site time:	15 mins	Finish Date/Time:	12: SD PMOCT 2 3 2015
- /		a little of the carrier of the conference	1000 1000 20 2013
YES NO	Did your shipment arrive on time?		
YES NO NIA	If there were any changes to the delivery schedule, were you notified?		
YES NO	Did you receive all carton numbers listed on the Bill of Lading?		
YES NO	Did we have the appropriate tool(s) for delivery?		
YES NO	Did we meet your expectations?		
Receiver Name:	456 717020		
Receiver Signature:	Sist	i rega	
**ATTENTION	RECEIVER - You must inventory total	I carton count and initial	receipt or each carton number.
	Any discrepancies must be noted	at this time in the comm	ents section.
	Please notate any damage is	n the Comments section	below.
COMMENTS:	- Motre ONK	4 person	16 IN OFFICE
1	must call b	where comi	na
	,	V	