

REDMAN VAN & STORAGE CO.

| TIME STARTED | |
|--------------|--|
| | |

285557

2571 West 2590 South, Salt Lake City, Utah (801) 972-4420 855 South 500 West, Salt Lake City, Utah (801) 328-8581 285557

| DATE TIM | ME ORDERED C.O.C |). CHARGE | PER | ORDER TAKEN BY | ORDER DATE | EST. COST | NO. ROOMS | | | |
|---|---|----------------------------|--|---------------------------|---|---------------------------------------|-------------------|--|--|--|
| 81814 BM | A 6-12 NO | CHARGE | | JACIE | 08-13-14 | | 1 | | | |
| INSURÂNCE FLIGHT/STAIRS | PACKING RANGE | REFRIG | AUTO | WASHER AUTO | DRYER PIANO | FREEZER | EST. WEIGHT | | | |
| REG | | | | | | | 500 | | | |
| THE FRUTH GR | OUP | | | REDMA | N VAN & STG | MAIN OFFI | CF | | | |
| SHIP 2500 S DECKE | R LAKE BLVD | | | | W. 2590 SOUT | | | | | |
| SLC, UT 8410 | | | | | | | | | | |
| / | | | / | | LAKE CITY, | 84119 | | | | |
| GARY RIDDLE | | 01-463- | 7800 | ATTN: | | | 4420 | | | |
| LOT# | IL JT | TYPE | | * | EITHER | NO. NUMB | ER OF PERSONNEL 2 | | | |
| STI 2750 RM025800 | | | | EST PACK DE | D. NEW USED | NAME | IN TIME OU | | | |
| BILL | CALL ext 315 | 72 | | 3.0 | O.h. | - | | | | |
| , 0000 | TIME 1 9 | 2 | | 4.5 | 900 | DWa | naga | | | |
| SPECIAL INSTRUCTIONS | | SON | | MIRROR | 01. | | | | | |
| PICK UP COPIER | | | | W. ROBE TAPE | | 1 3 | | | | |
| VERIFY SERIAL NU CORNERBOARD AND | IMBER SHRINKWRAP | | | SNGL. | MVer | AIAM | | | | |
| WINLINDUARD AND | SHRINKWKAP | | | KING QUEEN | | CVIVI | | | | |
| | | | | | venti | SUNA | - | | | |
| | | | | TOTAL PACK | ING | | | | | |
| | | | | | | | | | | |
| | | | | M | phday | | | | | |
| ★ ★ IMPORTANT | | | and the section of the section of the section of | | | | | | | |
| THE RESPONSIBILITY OF THIS CONTENTS IS LIMITED TO 60 | (SIXTY) CENTS PER F | OUND PER A | BTICLE A | | | | | | | |
| HIGHER VALUE MAY BE DEC ADDITIONAL PROTECTION V HIGHER VALUE ASSUMES 600 | VILL BE ASSESSED. I | A HIGHER F FAILURE TO I | RATE FOR DECLARE | NON PRODU | JCTIVE TIME (DRIVER I | MUST EXPLAIN) | | | | |
| SHIPMENT IS RELEASED AT 6 | | | | COMPUTATION OF CHARGES | NO. OF REG. O.T. RE MEN HRS. HOURS PE | EG RATE O.T. RATE ER HOUR PER HOUR | Totals | | | |
| DECLARED VALUE IS GREATE | | CUSTOME | R SIG. | MAN & VAN | | | | | | |
| CUSTOMER REQUESTS: | DEPRECIATED VALU | | | PACKING CC | DETE | | | | | |
| NOTE: ADDITIONAL PREMIUM | PROTECTION FOR \$ REPLACEMENT COS | 3 | | | PROTECTION CHARG | FS | | | | |
| MUST BE PAID TO COV- ER A HIGHER VALUE | PROTECTION FOR \$ | | | | HARGES (PER |) | | | | |
| DECLARED. AMOUNTS DECLARED WITHOUT | DECLARED VALUE MUST EQUAL COST OF ENTIRE SHIPMENT | | | OTHER (PLEASE EXPLAIN) | | | | | | |
| PREMIUM PAYMENT WILL BE INVALID. | | TIME ARRIVED | CUST. | | | TOTAL COST | | | | |
| CUSTOMER | an. | P.M. | 1 | TERMS ARE ARRANGEM | PREPAID OR UPON CENTS MUST BE APP | OMPLETION OF I | MOVE. CREDIT | | | |
| SIGNATURE X PRINT NAME BYCA | da Nideur | TIME | CUST. | TERMS ARE BE BILLED AT | NET 7 DAYS OF RECEI 11/2% PER MONTH OF | PT OF INVOICE. IN V PAST DUE ACCO | NTEREST WILL | | | |
| GOODS RECEIVED IN GOOD CONDITION CUSTOMER SIGNATURE ACKNOWLEDGES DITIONS ON REVERSE SIDE. | EXCEPT AS NOTED. | DEPART // YA.M. P.M. | INITIAL | AMOUNTS, | AL ACTION IS NECES CUSTOMER AGREES ND COLLECTION COST | SARY TO COLLE S TO PAY ATTO | CT PAST DUE | | | |



P.O. Box 80520 Fort Wayne, IN 46898-0520

AREA CODE (260) 429-3801 BILL OF LADING & FREIGHT BILL

CONTRACT

| TABLE PARTICULAR PARTICULAR STEAR AND REQUISIONS OF PRINCE AND RECORD PARTICULAR PARTICU | • | BOOKER CODE/ | | TOTAL ESTIMATED* | 05 00 | 12/8850 | MC 497943 AGREED | | ATES | | |
|--|---------------------------------------|--|-------------------------------|--------------------------------------|-------------------------|--|--|--|--|--|--|
| PET 989321-11 SOLD PET 251 251 254 | TARIFF/SECTION | | ESTIMATOR | | T VEHICLE NO. | DUD | OR PER | IOD OF T | IME | ACTUAL | PICKUP D |
| CONTROL STATE AND A STATE OF THE STATE OF TH | | 7A19Z7A10 | | | | | 198715 197 | | | | |
| TOTAL SUMMET TO CLASSIFICATIONS, TAILEYS, RILLS, AND RECOULTIONS, CONTROL OF THE WARDS AND RECOULT TO CLASSIFICATIONS, TAILEYS, RILLS, AND RECOULT TO CLASSIFICATIONS, TAILEYS, AND RECOULT TO CLASSIFICATIONS, THE WARD OF STANDER HERROW ON ON THE REVERSE SET OF THE WARD OF STANDER HERROW ON ON THE REVERSE SET OF THE WARD OF STANDER HERROW ON ON THE WARDS AND THE WARD OF STANDER HERROW ON ON THE WARDS AND THE WARD OF STANDER HERROW ON ON THE WARDS AND THE WARDS A | F SHIPPER THE | FRUITILGRE, | | | | NoTIP NOTIP PHONE | ү Г. С. А.Р. У | ernol. | - American | 801-46. EXT | - 780 301 |
| The APPLICABLE TARIFF THE APPLICABLE TO CARLET THE APPLICABLE TO THE AP | SHIPPER REM | 1.1 | | ZIP ZIP | 33139 | PHONE | ASSET | | | | |
| CONT 2 STANDARD TO STANDARD SAME PHONE B PARTIES AS A VALUATION COMPANDED TO CAME AND A STANDARD STATEMENT OF STANDARD STANDARD STATEMENT OF STANDARD S | EREOF IN EFFECT ON T | PRINTED OR STAMPED H HE DATE OF ISSUE OF TH | EREON OR ON HIS BILL OF LA | THE REVERSE SIDE | THE APPLICABLE | TARIFF. | ARE ESTIMA | TES ONLY | Y. ACTUAL C | HARGES ARE | BASED U |
| CRT Origin Orig | 0 | | | 12 ADDR. 10 W F 194 | TOTAL TO L | TX (3 (2 TX) | 74937NO. | 1 TIM | TYCAY C | YAN 371 | 4 |
| TAPENS SATISTICS OF THE STATE O | C CNT | (per teriff) ma | rigin B | STI at Carrier Carrier Carr | ier shall bill above pa | ty | GR | _ | ORIGINA | L RE | WEIGH |
| SECH WRITE S/N ON TRY, AS-WELL AS CHECKIN Shipper Signature X DWALD AND AND AND AND AND AND AND AND AND AN | : A FIN** GED: COPIE ALUATION (| ERS: PACKAG)F \$85 | ING LO | ose | | S be | hipper: The tare e entered on the hipment consists s | weight of the | loading your ship | pment on the vehic | le. |
| DATE PTS ID/INITIALS LOCATION TIME DATE DATE Van Crew(#): Initials ST Initial | 'S ECH ' | WRITE S/H | ON- TH | V. AS WELE | AS CHECK | ING S | | SHIPPE Expedite | R'S SIGNATUR | RE FOR SPECIAL | SERVICES |
| DATE PTS ID/INITIALS LOCATION TIME Van Crew(#): Initials Understand in the ability contained in the applicable term the Carrier and conditions and limit of lability contained in the applicable term the Carrier angenerative that registered the site with Carrier and colation Carriers and conditions and limit of lability contained in the applicable term the Carrier angenerative that registered the site with Carrier and colation Carriers and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of limits in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the applicable term to carrier and conditions and limit of lability contained in the decing of lability contained in the decing o | | | | | DTIFIED A | SAFX | | | | 21 | Si C |
| DATE PTS ID/INITIALS LOCATION TIME (**) TIME VALUATION STATEMENT Dhis. shipment is released to Carrier upon the terms and conditions and limit of liability contained in the applicable tariff, unless otherwise noted hereon I authorized Carrier representative. If the shipper rimust contact the Carrier representative, if the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative. If the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative but regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. The shipper must contact the Carrier representative. The shipper must contact the Carrier representative. But regististed the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the shipper must contact the Carrier representative. But registered the carrier representative. But registered the carrier re | | | | Yodmooda, t | THIL AF | X_ | | cu. ft. ve | ahicle | | . ft. vehicle |
| VALUATION STATEMENT This shipment is released to Carrier upon the terms and conditions and limit of liability contained in the applicable tariff, unless otherwise noted hereon authorized Carrier representative. If the shipper desired control to Carrier approach for the increased industry carrier and obtain Carrier approach for such increased carrier sile authorized Carrier representative. We the shipper desired for shipper described for shipper desired for shipper described for shipper de | DATE | PTS ID/INITIAL | S L | OCATION | TIME | X_ | | | | cu. | ft. |
| of liability contained in the applicable tariff, unless otherwise noted hereon in the shipper presentative. If the shipper desires to increase Carrier's list the shipper approval for such increased liability. CARRI DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. ST: Arrive: Depart: Van Crew(#): Initials DRIVER IS NOT AUTHORIZED TO CHANGE THE TERMS AND CONDITION. SHEWER TO CARRIER THE TERMS AND CONDITION. SHEWER TO CARRIER THE TERMS AND CONDITION. ANAME PHONE # DATE PHONE # DATE AUTHORIZED TO ADTE PERCECCIAT PROCESSORIALS DRIVER THE TERMS AND CONDITION. AUTHORIZED TO ADTE PAYMENT RECEIVED TO CONSIGNEE PRINTED NAME ACTUAL DELIVERY CONSIGNEE PRINT | | | | | | This | shinment is rele | | | | ns and limit |
| IG: Arrive: Depart: Van Crew(#): Initials INICLUDING WITHOUT LIMITATION CARRIERS LIABILITY, APPLICABLE TO SHIPMENT. Carrier shall have no liability above the released value contained tariff if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. BHONE # DATE T. NAME PHONE # DATE AL PIECE COUNT PER ATTACHED GOOD PHONE # DATE AL PIECE COUNT PER ATTACHED FOR UP COOD PROVE PICKUP AGENT OR HAULER AUTHORIZED PICKUP COOD TATE AUTHORIZED PICKUP COOD ON TRACT NO. APP DATE APP DATE PAYMENT RECEIVED BY 1st of the shas been received in apparent good condition except as on other shipping documents. PAYMENT RECEIVED TO SHIPMENT. Carrier shall have no liability above the released value contained tariff if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. PECE COUNT PER ATTACHED AUTHORIZED PAYMENT BY DATE AUTHORIZED POLY OF THE ACCURATION. APP DATE CONTRACT NO. DELIVERY ACKNOWLEDGEMENT: All listed services were rendered a property described has been received in apparent good condition except as on other shipping documents. PAYMENT RECEIVED CONSIGNEE PRINTED NAME ACTUAL DELIVERY COUNT OF THE ACCURATION OF THE ACCU | | | | | | of lia | ability contained lorized Carrier rep shipper must co Carrier and obta | in the application in the application of the Carrier's | cable tariff, unle If the shipper d arrier representa approval for su | ess otherwise note lesires to increase ative that registere ich increased liabi | d hereon to Carrier's lia ed the ship lity. CARRI |
| ST: Arrive: Depart: Van Crew(#): Initials and sufficient as not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased liability and the shas not paid the increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if Carrier has not agreed in advance to such increased rate applicable thereto. Initials and if if an initials described has been received in apparent good condition except and other should be an initial such as a not paid the increased rate applicable thereto. Initials and if if an initial such as a not paid the increased rate applicable thereto. Initials and if if | IG: Arrive: | Depart: | | | | | LUDING WITHOU | IT LIMITATI | ON CARRIER'S | LIABILITY, APPLI | CABLE TO |
| G. NAME PHONE # DATE TIT. NAME PHONE # DATE R- PHONE # DATE PHONE # DATE MUST BE COMPLETED BY FIRST PICKUP AGENT OR HAULER AUTHORIZED PICK UP CODE PICK UP CODE APU DATE DATE PAYMENT RECEIVED D BY 2nd D BY 2nd D BY 2nd D BY 3rd D BY 4rd D BY 5rd D BY 4rd D BY 5rd D BY 4rd D BY 5rd D | ST: Arrive: | Depart: | | | 1 | tariff | if Carrier has no | t agreed in | advance to such | increased liability | |
| PHONE # DATE MUST BE COMPLETED BY FIRST PICKUP AGENT OR HAULER AUTHORIZED PICK UP COOR PICK UP COOR PICK UP COOR AUTHORIZED PICK UP COOR PICK UP CO | | | | | | 1103 | not para the more | 10000 1010 0 | | | |
| TAL PIECE COUNT PER ATTACHED SCRIPTIVE INVENTORY IS: MUST BE COMPLETED BY FIRST PICKUP AGENT OR HAULER | | | | | | — r | er orden orden energen den blede op de senten en e | en caraciti schille condination | The second secon | | |
| D BY 1st CODE APU DATE PAYMENT RECEIVED D BY 2nd CODE DATE DATE NO. D BY 3rd CODE DATE DATE DATE DATE DATE DATE DATE DA | TAL PIECE COUNT | | √ { | MUST BE COMPLETED AGENT OR HAULER | | P | X | | and the control of th | | CON |
| PAYMENT RECEIVED CONSIGNEE PRINTED NAME ACTUAL DELIVERY D BY 2nd CODE DATE AMOUNT NET WEIGHT MILES RATE CHARGES CODE DATE DATE DATE DATE CODE CODE DATE CODE CODE DATE CODE CODE DATE CODE COD COD | ED BY 1st | | UNT | PICK UP CODE | | | property describ | ed has been | received in appa | ed services were arent good condition | rendered ar n except as |
| D BY 2rd | set off n & code | DATE _ | | | IVED | | NEIGNEE BOINT | ED NAME | | ACTUAL DE | LIVERYD |
| DATE | | CODE | | вү | | | | | DATE | | |
| D BY 3rd | | DATE _ | | AMOUNT | | | | | HAIE | OHANGES | 000 |
| A code | et off | | | | | | 171 | 773 | | | |
| D BY 4th | & code | | | BANK | | | | _ | | *. | |
| A code DATE ADDRESS THE LEGEN OF THE LEGEN O | et off | | | NAME | OTHER | ACCESSO | PIALS-LIST | PE QTY. | | | |
| ADDITIONAL 93 1 DR | 1 & code | | | ADDRESS | | | | V(1) | | | 1117 |
| | conv. | CODE _ | | | | Address of the Addres | | 01 | | | 77.57 |
| | | | | | 1112 | 16 3. 1 1. 1. | The state of the s | 131 | 4 | | |
| TOTAL CHARGES | | | | | | lag. | | | | | |

Original - If charges are C.O.D., record collection, and give thi conv to shipper. Otherwise, driver mail this copy to Ft. Wayne

PAGE NO.

NO. OF PAGES



VISUAL COPIER/SORTER INVENTORY FIRST HAULER www.stidelivers.com HAULER CODE # TRAILER # CONTRACT SHIPPER'S NAME MAKE MODE **EXCEPTION SYMBOLS** LOCATION SYMBOL CP - Packed By Carrier DBS - Disassembled By Shipper BE-Bent D - Dented M - Marred SO - Soiled 1. Arm 9. Side BR - Broken PBS - Packed By F-Faded R - Rubbed MCU - Mechanical Condition T-Torn 2. Bottom Shipper 6. Leg 10. Top BU-Burned G-Gouged RU - Rusted W - Badly Worn 3. Corner 7. Rear 11. Veneer CH - Chipped L-Loose CD - Carrier CU - Contents and Conditions SC - Scratched Z-Cracked 4. Front 8. Right Disassembled 12. Edge NOTE: The omission of these symbols indicates good condition for normal wear. 13. Center ITEM INVENTORY TRACKING NUMBERS NO. ITEM DESCRIPTION AND CONDITION EXCEPTIONS (IF ANY) AT DESTINATION ORIGIN CONDITION INDICATE CHANGES (IF ANY) AT DESTINATION FRONT FRONT LEFT SIDE When necessary, draw in appropriate configuration RIGHT SIDE

WHEELED SORTERS & FINISHERS MUST BE DETACHED BY SHIPPER

CONTRACTOR, CARRIER OR AUTHORIZED AGENT (DRIVER)

SHIPPER OR AUTHORIZED AGENT

- SEND TO STI DO BOY 80520 FORT WAVNE IN 46898-0520 AFTER FINAL DELIVERY