## BILL OF LADING

		LADING			
SHIP FR	OM		TQLM-6522	Carrier Name:	
				TQAI	
TOTAL OTTALITY ASSURANCE	eight Charge Terms:	Truck	Trailer	Seal	
		Number:	Number:	Number(s)	
632c College Dr.		441420	530519	110111201(3)	
Marion, NC 28752 Collect:		Date: 05-13-2020 Time: 17:39:47			
Phone: 828-652-0799		Customer Job No.: 5547			
	2 and Doubers				
Tux. 020 032 0004		Customer P,	/O No.:		
CAS-MORGANTON Site 1 Shippping Dock		PO BOX 61050			
Address: 1103 JAMESTOWN ROAD		Name: c/o DATA LOGISTICS			
State/City/Zip:		Address: PO BOX 61050			
Cisco Code: TQAE	FOB:	City/State/Zip: FORT Meyers, FL 39906			
QQ CARRIER INFORMATION				RMATION	
PartNumber	Qty Shipped	0243			
0046_TRAY	1				
1036_KIT	12				
CC91 w/ 8057_KIT	2				
GM P1LL W/8110_KIT	10				
Shipper Signature/Date  Trailer Loaded:  By Shipper  By Driver  Freight Counted:  By Shipper  By Shipper  By Driver/pai contain  By Driver/Pie		llets said to	Recipi	ent Signature/Date	
This is to certify that the above nan materials are properly classified, packaged, marked and labeled, and in proper condition for transportati according to the applicable regulat of the DOT	are		materials ar packaged, n in proper co	rtify that the above named e properly classified, narked and labeled, and are andition for transportation to the applicable regulations	