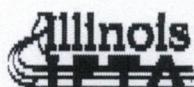


Confirmation Number: 0-243-199-024
Date Submitted: 01/31/2024
Date Printed: 01/31/2024



MFUT-15 IFTA Quarterly Return

Legal Name: HIGHTECH
DBA Name:
Account ID: 2012286208
Filing Period: 12/31/2023
Due Date: 01/31/2024

Step 1: Filing Status (Check all that apply.) You must file a return even if there was no activity.

Quarterly filing Amended No operation Cancel fuel license, effective _____

Step 2: Fuel Usage Summary

A	B	C
---	---	---

Fuel Type Total miles traveled Total fuel consumed Avg. fleet MPG
(See Fuel everywhere everywhere (2 decimal places)
Type Table)

$$D \quad 27386 \quad + \quad 4642 \quad = \quad 5.90$$

Step 3: Jurisdiction Details (Round to nearest gallon and mile. Indicate credit in brackets.)

D Juris- diction (See Fuel Type Table)	E Fuel type	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
Grand Total		27386	27386	4641	4642	-1			246.55	0.00

Step 4: Preparer Information

Name of Person Preparing Return: MYKHAYLO

Title: P

Phone number: (773) 988-3629

Email: hightechmb@gmail.com

Fuel Type Table

D - Diesel	G - Gasoline
GH - Gasohol	P - Propane
E - Ethanol	E85 - E85
M - Methanol	M85 - M85
B - Biodiesel	A55 - A55
EL - Electricity	HD - Hydrogen
LNG - Liquid Natural Gas	
CNG - Compressed Natural Gas	

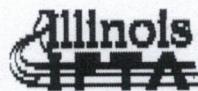
Step 5: Tax or Credit Calculation

- 1 Tax or credit due - write the Column L grand total. 1 \$ 246.55
- 2 Penalty (See instructions.) 2 \$ 0.00
- 3 Interest - write the Column M grand total. 3 \$ 0.00
- 4 Add Lines 1, 2, and 3. Indicate a credit in brackets. 4 \$ 246.55
- 5 Balance due from preceding quarter. 5 \$ 0.00
- 6 Credit carried forward from preceding quarter. 6 \$ 0.00
- 7 Add Lines 4, 5, and 6. This is your cumulative total due or refund claimed. 7 \$ 246.55

Step 3: Jurisdiction Details

D Juris- diction	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
CT	D	217	217	37	0	37	0.492	0.000	\$ 18.20	\$ 0.00
IL	D	3498	3498	593	199	394	0.788	0.000	\$ 310.47	\$ 0.00
IN	D	4621	4621	783	1075	-292	0.570	0.000	\$ -166.44	\$ 0.00
IA	D	860	860	146	50	96	0.325	0.000	\$ 31.20	\$ 0.00
KY	D	374	374	63	41	22	0.257	0.000	\$ 5.65	\$ 0.00
KY	D	0	0	63	0	63	0.000	0.124	\$ 7.81	\$ 0.00
MD	D	72	72	12	0	12	0.478	0.000	\$ 5.73	\$ 0.00
MA	D	177	177	30	0	30	0.240	0.000	\$ 7.20	\$ 0.00
MI	D	1579	1579	268	170	98	0.516	0.000	\$ 50.57	\$ 0.00
MN	D	858	858	145	0	145	0.285	0.000	\$ 41.33	\$ 0.00
MO	D	231	231	39	203	-164	0.245	0.000	\$ -40.18	\$ 0.00
NH	D	43	43	7	0	7	0.222	0.000	\$ 1.55	\$ 0.00
NJ	D	522	522	88	0	88	0.493	0.000	\$ 43.38	\$ 0.00
NY	D	2552	2552	433	155	278	0.404	0.000	\$ 112.17	\$ 0.00
ND	D	26	26	4	0	4	0.230	0.000	\$ 0.92	\$ 0.00
OH	D	5174	5174	877	1061	-184	0.470	0.000	\$ -86.48	\$ 0.00
PA	D	4254	4254	721	520	201	0.785	0.000	\$ 157.79	\$ 0.00
WI	D	2328	2328	395	1168	-773	0.329	0.000	\$ -254.32	\$ 0.00

Confirmation Number: 0-434-227-504
Date Submitted: 04/30/2024
Date Printed: 04/30/2024



MFUT-15 IFTA Quarterly Return

Legal Name: HIGHTECH
DBA Name:
Account ID: 2012286208
Filing Period: 03/31/2024
Due Date: 04/30/2024

Step 1: Filing Status (Check all that apply.) You must file a return even if there was no activity.

Quarterly filing Amended No operation Cancel fuel license, effective _____

Step 2: Fuel Usage Summary

A B C

Fuel Type	Total miles traveled (See Fuel everywhere Type Table)	Total fuel consumed everywhere	Avg. fleet MPG (2 decimal places)
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D 25007 ÷ 4151 = 6.02

Step 3: Jurisdiction Details (Round to nearest gallon and mile. Indicate credit in brackets.)

D Juris- diction (See Fuel Type Table)	E Fuel type	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
Grand Total		25007	25007	4153	4151	2			163.25	0.00

Step 4: Preparer Information

Name of Person Preparing Return: MYKHAYLO BALABAN

Title: P

Phone number: (773) 988-3629

Email: hightechmb@gmail.com

Fuel Type Table

D - Diesel	G - Gasoline
GH - Gasohol	P - Propane
E - Ethanol	E85 - E85
M - Methanol	M85 - M85
B - Biodiesel	A55 - A55
EL - Electricity	HD - Hydrogen
LNG - Liquid Natural Gas	
CNG - Compressed Natural Gas	

Step 5: Tax or Credit Calculation

- 1 Tax or credit due - write the Column L grand total.
- 2 Penalty (See instructions.)
- 3 Interest - write the Column M grand total.
- 4 Add Lines 1, 2, and 3. Indicate a credit in brackets.
- 5 Balance due from preceding quarter.
- 6 Credit carried forward from preceding quarter.
- 7 Add Lines 4, 5, and 6. This is your cumulative total due or refund claimed.

1	\$	163.25
2	\$	0.00
3	\$	0.00
4	\$	163.25
5	\$	0.00
6	\$	0.00
7	\$	163.25

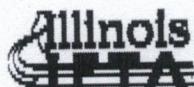
Step 3: Jurisdiction Details

D Juris- diction	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
CT D 717 717 119 0 119 0.492 0.000 \$ 58.55 \$ 0.00										
DE D 24 24 4 0 4 0.220 0.000 \$ 0.88 \$ 0.00										
IL D 3217 3217 534 284 250 0.741 0.000 \$ 185.25 \$ 0.00										
IN D 3693 3693 613 1407 -794 0.570 0.000 \$ -452.58 \$ 0.00										
IA D 8 8 1 0 1 0.325 0.000 \$ 0.33 \$ 0.00										
KY D 127 127 21 0 21 0.257 0.000 \$ 5.40 \$ 0.00										
KY D 0 0 21 0 21 0.000 0.124 \$ 2.60 \$ 0.00										
MA D 752 752 125 93 32 0.240 0.000 \$ 7.68 \$ 0.00										
MI D 548 548 91 120 -29 0.495 0.000 \$ -14.36 \$ 0.00										
MN D 864 864 144 142 2 0.285 0.000 \$ 0.57 \$ 0.00										
MO D 117 117 19 0 19 0.245 0.000 \$ 4.66 \$ 0.00										
NH D 139 139 23 0 23 0.222 0.000 \$ 5.11 \$ 0.00										
NJ D 810 810 135 0 135 0.493 0.000 \$ 66.56 \$ 0.00										
NY D 2605 2605 433 332 101 0.396 0.000 \$ 39.95 \$ 0.00										
ND D 549 549 91 189 -98 0.230 0.000 \$ -22.54 \$ 0.00										
OH D 4584 4584 761 1177 -416 0.470 0.000 \$ -195.52 \$ 0.00										
PA D 5442 5442 904 267 637 0.741 0.000 \$ 472.02 \$ 0.00										
RI D 42 42 7 0 7 0.370 0.000 \$ 2.59 \$ 0.00										
WV D 13 13 2 0 2 0.357 0.000 \$ 0.71 \$ 0.00										
WI D 756 756 126 140 -14 0.329 0.000 \$ -4.61 \$ 0.00										

Confirmation Number: 0-794-273-744

Date Submitted: 10/31/2023

Date Printed: 10/31/2023



MFUT-15 IFTA Quarterly Return

Legal Name: HIGHTECH
DBA Name:
Account ID: 2012286208
Filing Period: 09/30/2023
Due Date: 10/31/2023

Step 1: Tell us your filing status (Check all that apply.) You must file a return even if there was no activity

Quarterly filing Amended No operation Cancel fuel license, effective _____

Step 2: Figure your miles per gallon

A	B	C	
Fuel Type (See Fuel Type Table)	Total miles traveled everywhere	Total fuel consumed everywhere	Avg. fleet MPG (2 decimal places)

$$D \quad 22894 \quad + \quad 3663 \quad = \quad 6.25$$

Step 3: Figure your tax due or credit claimed (Round to nearest gallon and mile. Indicate credit in brackets.)

D Jurisdiction (See Fuel Type Table)	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Surcharge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
Grand Total	22894	22894	3662	3663	-1				152.90	0.00

Fuel Type Table

D - Diesel	G - Gasoline
GH - Gasohol	P - Propane
E - Ethanol	E85 - E85
M - Methanol	M85 - M85
B - Biodiesel	A55 - A55
EL - Electricity	HD - Hydrogen
LNG - Liquid Natural Gas	
CNG - Compressed Natural Gas	

Step 4: Figure your total tax due or refund claimed

- 1 Tax or credit due - write the Column L grand total.
- 2 Penalty (See instructions.)
- 3 Interest - write the Column M grand total.
- 4 Add Lines 1, 2, and 3. Indicate a credit in brackets.
- 5 Balance due from preceding quarter.
- 6 Credit carried forward from preceding quarter.
- 7 Add Lines 4, 5, and 6. This is your cumulative total due or refund claimed.

1	\$	152.90
2	\$	0.00
3	\$	0.00
4	\$	152.90
5	\$	0.00
6	\$	0.00
7	\$	152.90

Step 3: Figure your tax due or credit claimed (Round to nearest gallon and mile. Indicate credit in brackets.)

D Juris- diction	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
CT	D	203	203	32	0	32	0.4920	0.0000	\$ 15.74	\$ 0.00
IL	D	3674	3674	588	261	327	0.7880	0.0000	\$ 257.68	\$ 0.00
IN	D	4198	4198	672	811	-139	0.5700	0.0000	\$ -79.23	\$ 0.00
IA	D	257	257	41	0	41	0.3250	0.0000	\$ 13.33	\$ 0.00
MA	D	138	138	22	0	22	0.2400	0.0000	\$ 5.28	\$ 0.00
MI	D	915	915	146	177	-31	0.5020	0.0000	\$ -15.56	\$ 0.00
MN	D	1948	1948	312	0	312	0.2850	0.0000	\$ 88.92	\$ 0.00
MO	D	254	254	41	0	41	0.2450	0.0000	\$ 10.05	\$ 0.00
NJ	D	138	138	22	0	22	0.4840	0.0000	\$ 10.65	\$ 0.00
NY	D	1053	1053	168	76	92	0.4035	0.0000	\$ 37.12	\$ 0.00
ND	D	564	564	90	120	-30	0.2300	0.0000	\$ -6.90	\$ 0.00
OH	D	2595	2595	415	467	-52	0.4700	0.0000	\$ -24.44	\$ 0.00
PA	D	1875	1875	300	190	110	0.7850	0.0000	\$ 86.35	\$ 0.00
WI	D	5082	5082	813	1561	-748	0.3290	0.0000	\$ -246.09	\$ 0.00

DO NOT

Confirmation Number: 1-487-427-376

Date Submitted: 07/31/2024

Date Printed: 07/31/2024

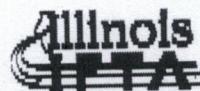
Legal Name: HIGHTECH

DBA Name:

Account ID: 2012286208

Filing Period: 06/30/2024

Due Date: 07/31/2024

**MFUT-15 IFTA Quarterly Return****Step 1: Filing Status** (Check all that apply.) You must file a return even if there was no activity.

Quarterly filing Amended No operation Cancel fuel license, effective _____

Step 2: Fuel Usage Summary**A B C**

Fuel Type (See Fuel Type Table)	Total miles traveled everywhere	Total fuel consumed everywhere	Avg. fleet MPG (2 decimal places)
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$$D \quad 11489 \quad \div \quad 2060 \quad = \quad 5.58$$

Step 3: Jurisdiction Details (Round to nearest gallon and mile. Indicate credit in brackets.)

D Juris- diction (See Fuel Type Table)	E Fuel type	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
Grand Total		11489	11489	2059	2060	-1			166.71	0.00

Step 4: Preparer Information

Name of Person Preparing Return: MIKHAYLO BALABAN

Title: P

Phone number: (773) 988-3629

Email: hightechmb@gmail.com

Fuel Type Table

D - Diesel	G - Gasoline
GH - Gasohol	P - Propane
E - Ethanol	E85 - E85
M - Methanol	M85 - M85
B - Biodiesel	A55 - A55
EL - Electricity	HD - Hydrogen
LNG - Liquid Natural Gas	
CNG - Compressed Natural Gas	

Step 5: Tax or Credit Calculation

- 1 Tax or credit due - write the Column L grand total.
- 2 Penalty (See instructions.)
- 3 Interest - write the Column M grand total.
- 4 Add Lines 1, 2, and 3. Indicate a credit in brackets.
- 5 Balance due from preceding quarter.
- 6 Credit carried forward from preceding quarter.
- 7 Add Lines 4, 5, and 6. This is your cumulative total due or refund claimed.

1 \$	166.71
2 \$	0.00
3 \$	0.00
4 \$	166.71
5 \$	0.00
6 \$	0.00
7 \$	166.71

Step 3: Jurisdiction Details

D Juris- diction	E Fuel type (See Fuel Type Table)	F Total miles	G Taxable miles (Divide Column G by Step 1, Column C)	H Taxable gallons	I Tax-paid gallons	J Net taxable gallons (Subtract Column I from Column H)	K Tax rate	L Sur- charge rate	M Tax or credit due (Multiply Column J by Column K)	N Interest due
IL	D	1842	1842	330	76	254	0.741	0.000	\$ 188.21	\$ 0.00
IN	D	2162	2162	387	367	20	0.570	0.000	\$ 11.40	\$ 0.00
IA	D	129	129	23	0	23	0.325	0.000	\$ 7.48	\$ 0.00
KY	D	41	41	7	0	7	0.257	0.000	\$ 1.80	\$ 0.00
KY	D	0	0	7	0	7	0.000	0.124	\$ 0.87	\$ 0.00
MN	D	1107	1107	198	142	56	0.285	0.000	\$ 15.96	\$ 0.00
MO	D	1	1	0	0	0	0.245	0.000	\$ 0.00	\$ 0.00
NJ	D	104	104	19	0	19	0.493	0.000	\$ 9.37	\$ 0.00
NY	D	770	770	138	292	-154	0.396	0.000	\$ -60.91	\$ 0.00
ND	D	606	606	109	130	-21	0.230	0.000	\$ -4.83	\$ 0.00
OH	D	1621	1621	291	250	41	0.470	0.000	\$ 19.27	\$ 0.00
PA	D	800	800	143	0	143	0.741	0.000	\$ 105.96	\$ 0.00
WV	D	20	20	4	0	4	0.357	0.000	\$ 1.43	\$ 0.00
WI	D	2286	2286	410	803	-393	0.329	0.000	\$ -129.30	\$ 0.00



VOLVO	2016	4V4NC9EH8GN933744	Date						
Vehicle Make	Vehicle Year	Vehicle Identification Number (VIN)							
Name of Seller (Current Registered Owner)		Name of Buyer							
Complete Address of Seller		Complete Address of Buyer							
City	State	ZIP	City	State	ZIP				
Under penalties of perjury, I hereby certify that the foregoing is true and correct under the laws of the United States.									
Seller's Signature		Printed Name of Seller		Date					
<p style="text-align: center;">DOMETER READING</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td colspan="2" style="text-align: center;">NO TENTS</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. WARNING - DOMETER DISCREPANCY. </td> </tr> </table> <p>1 certify to the best of my knowledge that the odometer reading is the actual mileage unless one of the following statements is checked:</p> <p>Name of Purchaser Street City State Zip Dealer's Name Date of Sale No.</p> <p>The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted, and has been transferred to the following printed name and address:</p> <p>Promised Name (same as signature) Signature of Buyer/Agent</p> <p>I am aware of the above odometer certification made by the seller/agent.</p> <p>Agents Signature Signature of Seller/Agent</p>						NO TENTS		<input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. WARNING - DOMETER DISCREPANCY.	
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<p style="text-align: center;">DOMETER READING</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td colspan="2" style="text-align: center;">NO TENTS</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. WARNING - DOMETER DISCREPANCY. </td> </tr> </table> <p>1 certify to the best of my knowledge that the odometer reading is the actual mileage unless one of the following statements is checked:</p> <p>Name of Purchaser Street City State Zip Dealer's Name Date of Sale No.</p> <p>The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted, and has been transferred to the following printed name and address:</p> <p>Promised Name (same as signature) Signature of Buyer/Agent</p> <p>I am aware of the above odometer certification made by the seller/agent.</p> <p>Agents Signature Signature of Seller/Agent</p>						NO TENTS		<input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. WARNING - DOMETER DISCREPANCY.	
NO TENTS									
<input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. WARNING - DOMETER DISCREPANCY.									

DEALER ONLY

SECOND REASSIGNMENT
DEALER ONLYFIRST REASSIGNMENT
DEALER ONLY

DEALER ONLY

Progressive
P.O. Box 94739
Cleveland, OH 44101
1-800-895-2886

PROGRESSIVE
COMMERCIAL

Policy number: 01313551

Underwritten by:
Artisan and Truckers Casualty Co
NAIC Number: 10194
October 27, 2021
Page 1 of 2

Trailer
info

ETA
3 years
less
your
general
specifications

Certificate of Insurance

Certificate Holder

HIGHTECH INTERPRODUCTION INC
829 N LINCOLN AVE
PARK RIDGE, IL 60068

Insured

HIGHTECH INTERPRODUCTION INC
829 N LINCOLN AVE
PARK RIDGE, IL 60068

Agent

PROG COMMERCIAL
PO BOX 94739
CLEVELAND, OH 44101

This document certifies that insurance policies identified below have been issued by the designated insurer to the insured named above for the period(s) indicated. This Certificate is issued for information purposes only. It confers no rights upon the certificate holder and does not change, alter, modify, or extend the coverages afforded by the policies listed below. The coverages afforded by the policies listed below are subject to all the terms, exclusions, limitations, endorsements, and conditions of these policies. Liability coverage may not apply to all scheduled vehicles.

Policy Effective Date: Oct 31, 2021

Policy Expiration Date: Oct 31, 2022

Insurance coverage(s)

	Limits
Bodily Injury/Property Damage	\$1,000,000 Combined Single Limit
Uninsured Motorist Bodily Injury	\$25,000/\$50,000
Underinsured Motorist Bodily Injury	\$25,000/\$50,000

Motor Truck Cargo coverage part

Description	Limits	Deductible
Motor Truck Cargo	\$100,000	\$1,000

Description of Location/Vehicles/Special Items

Scheduled autos only

	Stated Amount
Medical Payments	\$10,000
Comprehensive	\$1,000 Ded
Collision	\$1,000 Ded
2011 DORSEY Trailer 1UYV\$2539BG018703	
	Stated Amount
Comprehensive	\$1,000 Ded
Collision	\$1,000 Ded

1UYV\$2539BG018703





P.O. Box 94739
Cleveland, OH 44101
Telephone: 800-444-4487
progressive.com

Date: October 14, 2024

State: IL

Policy #: 01313551

Insured: HIGTECH INTERPRODUCTION INC

DBA:

Coverage Dates: 10/31/2019 - 10/31/2023

Re: Loss History

There have been no losses on the policy term(s)/date(s) listed

There have been losses on the policy term(s)/date(s) listed

If you have any questions regarding your loss history, please contact us at:
1-800-444-4487

We comply with the state insurance laws that regulate the provision of loss history information. Unless required by law we provide a list of claims and the paid amounts only.

Thank you,
Commercial Lines Customer Care

Date of Loss	Claim Number	Claim Status	Coverage	Pay Out	Vehicle Make/Model	Driver	Reserves
2022-07-08	22-3154207	CLSD CWP CLSD CLSD	COLL PD COLL PD	\$20,146.40 \$0.00 \$16,002.14 \$6,431.57	11 UTILITY TRAILER	BALABAN, MYKHAYLO	
2022-03-31	22-3875350	CLSD CLSD CLSD	COLL COLL PD	\$14,972.23 \$11,093.53 \$3,074.99	00 KW T20	BALABAN, MYKHAYLO	

Policy	Insured	Agent	Eff-Date	Exp-Date	As Of					
GRT10726A	HIGHTECH INTERPRODUCTION INC	JOE MORTEN & SON INC (TN-RA-U TRUST)	10/31/2023	10/31/2024	10/07/2024					
Claim #	Coverage	Loss Date	LTE RPT	Driver	Loss ST	Reserve	Paid Loss	Subro/Salvage Recoveries	Incurred Losses	Paid Loss Adjustment Expenses
000-00-T18692	Broad Form Cargo	03/19/2024	Y	MYKHAYLO BALABAN	IL	7,722.00	0.00	0.00	7,722.00	0.00
Cargo - Loss Date 03/19/2024										
024-08-003022	Collision Coverage -Veh	08/20/2024	08/21/2024	N	MYKHAYLO BALABAN	IN	0.00	38,447.66	0.00	38,447.66
024-08-003022	Collision Coverage -Veh	08/20/2024	08/21/2024	N	MYKHAYLO BALABAN	IN	0.00	0.00	0.00	0.00
024-08-003022	Liability - Prop	08/20/2024	08/21/2024	N	MYKHAYLO BALABAN	IN	0.00	0.00	0.00	0.00
024-08-003022	Liability - Prop	08/20/2024	08/21/2024	N	MYKHAYLO BALABAN	IN	0.00	0.00	0.00	0.00
024-08-003022	Broad Form Cargo	08/20/2024	08/21/2024	N	MYKHAYLO BALABAN	IN	5,833.04	16.96	0.00	5,850.00
Cargo - Loss Date 08/20/2024										
Cargo TOTALING						13,555.04	38,464.62	0.00	52,019.66	0.00
2	POLICY ACCIDENTS TOTALING					13,555.04	38,464.62	0.00	52,019.66	0.00