


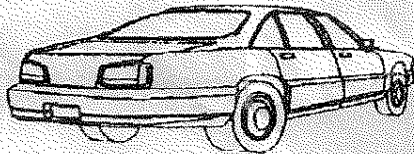
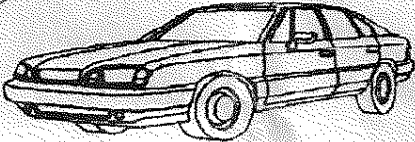
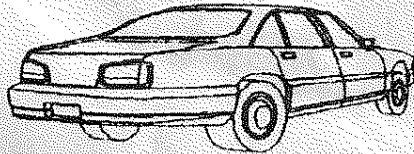

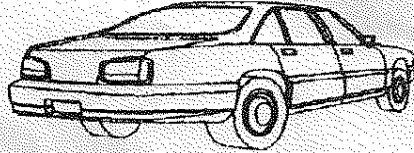
TRELL & TRELL ENT. LLC

P.O. BOX 16824
ATLANTA, GA 30321
404-593-1032 OFFICE
770-921-9552 FAX

COD AMT. \$ _____
INVOICE AMT \$ 300.00
ORDER ID: 8455 & 6391
CHECK # _____

Shipper: <u>SOBEN</u>		Consigned to: <u>6246</u>	
Address		Address	
City	State	City	State
Phone	Contact: <u>647435</u>	Phone	Contact
Load Date	<u>5876</u>	Delivery Date	

Remarks:

Year, Make, Description	VIN	Starting Miles	Keys <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Title <input type="checkbox"/> Y <input type="checkbox"/> N
<u>LEXUS 470</u>	<u>808455</u>			
Car 1				
 				
<u>LEXUS 350</u>	<u>026391</u>			
Car 2				
 				
Car 3				
 				

ORIGINAL

INSPECTION

Driver Signature _____

Shipper _____

Date _____

FINAL INSPECTION Damages which occurred in transit must be noted here and signed for by dealer and driver. ☐ No Transit

☐ Transit Damage as follows:

FINAL INSPECTION

Driver Signature _____

Receiver _____

RASMA BENTLEY

Date

07-09-12