

**Kelvion**

KELVION  
FAX 414-421-0712  
9845 SOUTH 57th ST  
FRANKLIN WI 53132414-421-4666

Invoice Number: RF0000106052

Page: 1 of 2

Date: 4/29/2021

Salesperson: MARTINEZ, CHRIS  
Regular Invoice

Tax ID 1: 20-4954856

Currency: USD US Dollar

Tax ID 1: 760395655

C002720

B HITEC POWER PROTECTION  
I 25707 SOUTH WEST FREEWAY  
L ROSENBERG TX 77471  
L USA  
T  
O

3  
S IBM CANADA  
H C/O COGECO  
IP 17500 ROUTE TRANSCANADIENNE  
T QUEBEC  
O KIRKLAND QC H9J 3A3  
CANADA

Fax: 281-239-6117

*Redore*

Order	Purchase Order	Packages	Prepaid	Weight	Ship Via	Terms
CR00000237	1284831				TO BE DETERMINED	NET 30 DAYS
Line/Rel	Qty Ordered	Qty Shipped	Back Order	Unit Price	Extended Price	
1	1.000	1.000	0.000	75,352.00000	75,352.00	

CI:

Item: R36658

Description: RAD,SHB95-6/8-50C-4/3P, ST,LL,GV

U/M: EA

Date Shipped: 4/29/2021

2	1.000	1.000	0.000	1,973.00000	1,973.00
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CI:

Item: P14920

Description: STARTR,MTR, 50HP,COMBO,3/60/480,SPEC

U/M: EA

Date Shipped: 4/29/2021

3	2.000	2.000	0.000	347.50000	695.00
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CI:

Item: P13419

Description: BRAID,CONN,5.00 FLG,5.00 FLG,16.00

U/M: EA

Date Shipped: 4/29/2021

*810,532-1087*  
**Valerie**  
Raymond  
valerie.raymond@kelvion.com  
Bill Calvert  
317-409-2687

**Kelvion**

KELVION  
FAX 414-421-0712  
9845 SOUTH 57th ST  
FRANKLIN WI 53132414-421-4666

**Invoice Number:** RF0000106052**Page:** 2 of 2**Date:** 4/29/2021**Salesperson:** MARTINEZ, CHRIS  
Regular Invoice**Tax ID 1:** 20-4954856**Tax ID 1:** 760395655**Currency:** USD US Dollar

C002720

**B** HITEC POWER PROTECTION  
**I** 25707 SOUTH WEST FREEWAY  
**L** ROSENBERG TX 77471  
**L** USA  
**T**  
**O**

**3**  
**S** IBM CANADA  
**H** C/O COGECO  
**IP** 17500 ROUTE TRANSCANADIENNE  
**T** QUEBEC  
**O** KIRKLAND QC H9J 3A3  
CANADA

**Fax:** 281-239-6117

Order	Purchase Order	Packages	Prepaid	Weight	Ship Via	Terms
CR00000237	1284831				TO BE DETERMINED	NET 30 DAYS
Line/Rel	Qty Ordered	Qty Shipped	Back Order	Unit Price	Extended Price	
4	2.000	2.000	0.000	281.00000	562.00	

**CI:****Item:** P13420**Description:** BRAID,CONN,4.00 FLG,4.00 FLG,16.00**U/M:** EA**Date Shipped:** 4/29/2021

REMIT TO: KELVION

..... PO BOX 5173

..... CAROL STREAM, IL 60197-5173

<b>Sales Amount</b>	78,582.00
<b>Misc Charges</b>	0.00
<b>Freight</b>	0.00
<b>Sales Tax</b>	0.00
	0.00
<b>Prepaid Amount</b>	0.00
<b>Total</b>	78,582.00

# Packing Slip Report

Kelvion



4/29/2021 9:05:38 AM

From Warehouse: MAIN

Page: 1

From:

Packing Slip: 29420

KELVION  
9845 South 57TH St  
Franklin WI 53132

414 / 421-4666

Bill To: C002720

Ship To: (3)

HITEC POWER PROTECTION  
25707 SOUTH WEST FREEWAY  
ROSENBERG TX 77471  
USA

IBM CANADA  
C/O COGECO  
17500 ROUTE TRANSCANADIENNE  
QUEBEC  
KIRKLAND QC H9J 3A3  
CANADA

Order Contact:

Pack Date	Order#	Cust PO	Ship Via	Weight	Packages#
4/29/2021	CR00000237	1284831	TO BE DETERMINED	0.00	0
Line/Release	Item	UM	Qty Ordered	Qty To Pack	
1	R36658 RAD,SHB95-6/8-50C-4/3P, ST,LL,GV	EA	1	1	
2	P14920 STARTR,MTR, 50HP,COMBO,3/60/480,SPEC	EA	1	1	
3	P13419 BRAID,CONN,5.00 FLG,5.00 FLG,16.00	EA	2	2	
4	P13420 BRAID,CONN,4.00 FLG,4.00 FLG,16.00	EA	2	2	

RF

KELVION

glosim

Page 1 of 1

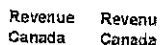


Revenue Canada  
Revenu Canada

CANADA CUSTOMS INVOICE  
FACTURE DES DOUANES CANADIENNES

Page 1 of 1

<b>1 Vendor (Name and Address) - Vendeur (Nom et adresse)</b> Hitec Power Protection Inc 25707 Southwest Freeway Rosenberg 77471-5678		<b>2 Date of Direct Shipment to Canada - Date d'expédition directe vers le Canada</b> 19/08/19 (9.811952/50011807)	
<b>4 Consignee (Name and Address) - Destinataire (Nom et adresse)</b> IBM Canada Ltd 3600 Steeles Avenue East Markham, ON CA L3R 9Z7		<b>5 Purchaser's Name and Address (if other than Consignee) - Nom et adresse de l'acheteur (S'il diffère du destinataire)</b> IBM CANADA LTD ( ) 4175, 14th Avenue Markham, (Ontario) CANADA L3R 5R5	
<b>6 Country of Transshipment - Pays de transbordement</b>		<b>7 Country of Origin of Goods - Pays d'origine des marchandises</b> USA, Texas, United States	
<b>8 Transportation: Give Mode and Place of Direct Shipment to Canada - Transport: Préciser mode et point d'expédition directe vers le Canada</b>		<b>9 Conditions of Sale and Terms of Payment (i.e. Sale, Consignment, Shipment, Landed Goods, etc.) - Conditions de vente et modalités de paiement (p. ex. vente, expédition en consignation, location de marchandises, etc.)</b> EXW	
<b>10 Currency of Settlement - Devise du paiement</b> USD US Dollar			
<b>11 Net Wt. Pkgs. - Poids net des colis</b>	<b>12 Specification of Commodities (name of packages, Marks and Numbers, General Description and Characteristics, i.e. Grade, Quality) - Désignation des articles (Nature des colis, marques et numéros, description générale et caractéristiques, p. ex. Classe, Qualité)</b> 11PACERATIONOVER REMOVED FROM 1000 0000 0000 0000 21000000000000 REMOVED FROM 1000 0000 0000 0000 List of all PO numbers 00000000 00000000 00000000 00000000 00000000	<b>13 Quantity (State Unit) - Quantité (Préciser l'unité)</b> 1.000 1.000	<b>14 Unit Price - Prix unitaire</b> 1000.0000 1000.0000
<b>15 Total Weight - Poids Total</b> Net Gross - Brut		<b>16 Invoice Total - Total de la facture</b> Net Gross - Brut	
<b>17 If any of fields 1 to 13 are included on an attached commercial invoice, check this box - Si tout renseignement relatif aux zones 1 à 13 figure sur une des factures commerciales ci-jointes, cocher cette case</b> Commercial Invoice No. / No. de la facture commerciale 00000000		<input type="checkbox"/>	
<b>18 Exporter's Name and Address (if other than Vendor) - Nom et adresse de l'exportateur (S'il diffère du Vendeur)</b>		<b>19 Originator (Name and address) - Expéditeur d'origine (Nom et adresse)</b>	
<b>20 Department Rulings (if applicable) - Décisions du Ministère (S'il y a lieu)</b>		<b>21 If fields 23 to 25 are not applicable, check this box - Si les zones 23 à 25 sont sans objet, cocher cette case</b> <input checked="" type="checkbox"/>	
<b>22 If included in field 17 indicate amount: - Si compris dans le total à la zone 17, préciser:</b> (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada - Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada (ii) Costs for construction, erection and assembly incurred after importation into Canada - Les coûts de construction, d'érection et d'assemblage après importation au Canada (iii) Export packing - Le coût de l'emballage d'exportation		<b>23 If not included in field 17 indicate amount: - Si non compris dans le total à la zone 17, préciser:</b> (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada - Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada (ii) Amounts for commissions other than buying commissions - Les commissions autres que celles versées pour l'achat (iii) Export packing - Le coût de l'emballage d'exportation	
<b>24 Check (if applicable): - Cocher (S'il y a lieu):</b> (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser - Des redevances ou produits ont été ou seront versés par l'acheteur (ii) Amounts for commissions other than buying commissions - Les commissions autres que celles versées pour l'achat		<input type="checkbox"/>	



CANADA CUSTOMS INVOICE  
FACTURE DES DOUANES CANADIENNES

Page 2 of 2

Canada		Canada		CANADA CUSTOMS INVOICE		FACTURE DES DOUANES CANADIENNES		Page 2 of 2	
1 Vendor (Filing Address) - Vendeur (Nom et adresse) <b>Hitec Power Protection Inc</b>				3 Other references (Include Purchaser Order No) Autres références (Inclure le no de commande de l'acheteur)  <b>00023838</b>					
3 Consignee (Name only) - Destinataire (Nom seulement) <b>IBM Canada Ltd</b>									
4 Purchaser if other than consignee and/or importer (Name only) Acheteur, s'il diffère de: destinataire et (ou) de l'importateur (nom seulement) <b>IBM CANADA LTD ( )</b>									
5 Tariffs Taxes		6 Specifications of commodities Description des articles				7 Quantity (Unit) Quantité (Unité)		8 Selling Price/Prix de vente	
		000000 000000 000000 11 00000000 00000000 00000000						Unit Price Prix unitaire Total	



**HITEC**  
Power  
Protection

IBM  
3600 Steeles Avenue East  
Markham, Ontario  
L3R 9Z7  
Phone: (425) 622-2988

**Hitec Power Protection, Inc.**  
25707 Southwest Fwy  
Rosenberg, Tx 77471-3678  
U.S.A.  
Phone: (281) 239-6116

Pick Up From: ROCORE  
9845 South 57th St  
Franklin, WI 53132

Delivery/Ship To: IBM Canada Ltd care of Cogeco Peer 1  
17500 Route Trans-Canada Hwy  
H9J 3A3 Kirkland, Quebec (QC)

Purchase Order No.: 5005241678 Project Number:  
Description of Goods Intecorm should be DAF Kirkland Freight term is PPD  
and/or Services Replacement Radiator and snow hood

2214754 A

Date: 4/23/2019

ITEM	HTS CODE	QTY	UNIT OF MEASURE	IDENTIFICATION	DIMENSIONS (in) - LENGTH, WIDTH, HEIGHT	TOTAL WEIGHT (lbs.)	DESCRIPTION	COUNTRY OF ORIGIN	TOTAL VALUE (USD)
1	8530.30.90	1	EA	R36616 (Radiator)	143L x 115W x 137H	11,215	Radiator SHB95	USA	71,054
2		1	EA	Radiator Cover	137L x 72W x 61H	500	Rad Snow Hood	USA	1,500
3									
4									
								Total Value	72,554
Authorized Signature:									
Bradley Hill									

# Straight Bill of Lading

ORIGINAL NOT NEGOTIABLE

Interfreight Harmonized Logistics Inc. 371 Sherman Blvd Inwood, NY 11096 Phone# 516-371-0775 Fax# 516-371-8880

Date: 05/06/21

Carrier: ZMAC TRANSPORTATION SOLUT

Reference#: HITEC SHIPMENT

From: Shipper: ROCORE

Consignee: AMERICAN ERECTING AND IRON WORKS

Street: 9845 S. 57TH STREET

Street: 2108 CLARK STREET

City: FRAKLIN State: WI Zip code: 53132

CITY: RACINE WI ###

Contact: GLORIA SIMON Phone# 262 799 0170

Contact: MATT KLAUS Phone# 262 770 0042

No. of Units & container type	Basic description	Total Quantity (Weight, Volume, Gallons, Etc)	Weight (Subject to Correcting)	Rate	Charges For Carriage
1 SKID	OPEN MACHINE DIMS 143 X 105 X 136"	11000 LBS			
1 SKID	OPEN MACHINE DIMS 141 X 84 X 60"	1700 LBS			
	PICK UP TOMORROW 5/7/2021 AND STORE FOR 1 WEEK INSIDE WAREHOUSE				
TOTAL 2 PIECES		12700 LBS			

The Liability of Interfreight Harmonized Logistics Inc. limited to fifty dollars (\$50.00) per shipment per our terms and conditions:  
Interfreight Harmonized Logistics Inc. As a property broker FMCSA# MC-841836

The cargo described above, in apparent good order and condition, except as noted (contents and condition of contents of packages unknown) marked, consigned, and destined as shown below, which Carrier agrees to carry to destination, if on its route, or otherwise to deliver to another carrier on the route to destination. Every service to be performed hereunder shall be subject to this straight bill of lading and Carrier's contract Terms and Conditions on the reverse hereof. Carrier's tariffs, rules and regulations, which are expressly incorporated herein by reference and have been established by Carrier, which are hereby agreed to by the shipper/consignor

WAVIER. In consideration of the amount of your freight charges and our corresponding level of liability, you agree to a waiver, as defined under 49 U.S.C. section 14101(b), of our general liability and the minimum periods for filing of claims and civil actions, as defined under 49 U.S.C. section 14705(a)(1) and (e)(1), and any successor statutes.

RELEASE VALUE/LIMITATION OF LIABILITY: You agree that the limit of liability set forth below in this paragraph is reasonable under the circumstances surrounding the transportation of the Goods. You agree that we will only be liable for the loss or damage resulting from negligence or fault. You agree that in consideration of our rate for the transportation of the Goods, which rate is, in part, dependent upon the value of the Goods, that our liability for any loss, damage, expense, or delay to the Goods be limited to \$0.50 per pound multiplied by the weight of the Goods actually lost, damaged, or delayed, or to \$50 per shipment of Goods, whichever is greater, unless you declare higher value for the Goods on the front page of this straight bill of lading and you pay the additional applicable freight charges.

Freight charges are PREPAID unless marked collect  
CHECK BOX IF COLLECT ☒ (X)

FOR FREIGHT COLLECT SHIPMENTS:  
If this shipment is to be delivered to the consignee, without recourse on the consignee, the consignor shall sign the following statement: The carrier may decline to make delivery of this shipment without payment of freight and all the other lawful charges.

(Signature of Consignor)

Declared value for carriage, if any: US\$

## Shipper Certification

This is to certify that the above named materials are properly classified, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the DOT

Per Gloria Simon Date: 5/7

## Carrier Certification

Carrier acknowledges receipt of packages and required placards.  
Carrier certifies emergency response information was made available and/or carrier has the DOT emergency response guidebook or equivalent document in the vehicle

Per C. V. D. Date: 5/7/21

**Michelle Harr**

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**From:** Church, Joy <Joy.Church@kelvion.com>  
**Sent:** Monday, August 9, 2021 1:51 PM  
**To:** US Accounts Payable  
**Subject:** Kelvion Bank Information  
**Attachments:** DB 06.2021.pdf; Signed W-9 Kelvion Inc (Rocore Holdings address) (002).pdf

Joy Church  
Accounts Receivable Specialist  
2401 Directors Row, Suite R  
Indianapolis, IN 46241  
Office (317) 434-8927  
Email: joy.church@kelvion.com



# Request for Taxpayer Identification Number and Certification

► Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Give Form to the  
requester. Do not  
send to the IRS.

Print or type.  
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Kelvion, Inc.</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ►	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>2401 Directors Row, Ste. R</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Indianapolis, IN 46241</b>	
7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number								
				-				
or								
Employer identification number								
5	1		-	0	2	6	8	4 9 4

## Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ► 	Date ► <b>3/31/21</b>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
  - Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
  - Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
  - Form 1099-S (proceeds from real estate transactions)
  - Form 1099-K (merchant card and third party network transactions)
  - Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.