

C/W R.O.	PART DESCRIPTION	ADVISOR NAME	PAID IN FULL
W 269202	19205538 BOARD	JEFF LEYH	N
	19205541 BOLT	JEFF LEYH	N
	89027403 PROTECTOR	JEFF LEYH	N
C 269917	12554591 NIPPLE	JEFF LEYH	N
W 270072	84376573 ARM	DIANE KIMBALL	N
	84376574 ARM	DIANE KIMBALL	N
	11546367 NUT	DIANE KIMBALL	N
W 270905	84386374 HARNESS	JEFF LEYH	N
W 270105	22990474 ABSORBER	DIANE KIMBALL	N
W 271415	84412924 RESERVOIR	DIANE KIMBALL	N
W 271659	12679360 PUMP	DIANE KIMBALL	N
	11547649 BOLT	DIANE KIMBALL	N
	11547603 BOLT	DIANE KIMBALL	N
W 271897	13599375 SENSOR	JEFF LEYH	N
C 271993	22733523 TRANSMITTER	DIANE KIMBALL	N
W 272007	84499222 MIRROR	JEFF LEYH	N
W 272092	13599375 SENSOR KIT	DIANE KIMBALL	N

Print this out and bring to part

**PLEASE POST THE OLDEST SOP'S FIRST**

DATE ORDERED	DATE ARRIVED	DATE CUST NOTIFIED	APPT DATE
11/5/2018	11/6/2018	11/6/18 (WRITTEN)	
11/5/2018	11/6/2018	11/6/18 (WRITTEN)	
11/5/2018	11/6/2018	11/6/18 (WRITTEN)	
11/30/2018	12/1/2018	12/1/2018 (WRITTEN)	
12/6/2018	12/18/2018	12/18/2018	N/A
12/6/2018	12/20/2018	12/20/2018	N/A
12/6/2018	12/10/2018	12/10/2018	N/A
1/9/2019	3/4/2019	3/4/2019	
12/7/2018	12/10/2018	12/10/2018	
1/28/2019	2/11/2019	2/11/2019	
2/5/2019	2/6/2019	2/6/2019	
2/5/2019	2/7/2019	2/7/2019	
2/5/2019	2/7/2019	2/7/2019	
2/14/2019	2/25/2019	2/25/2019	
2/19/2019	2/20/2019	2/20/2019	
2/19/2019	2/20/2019	2/20/2019	
2/21/2019	3/1/2019	3/1/2019	

**s class. Write your name, class # and brand on the top right.**

**Please place this into your class site drop box called 20 S completed**

TOTAL DAYS ON SHELF	COST \$	RETURN TO OE DATE	PUT IN STOCK DATE
119	18.77	2/6/2019	RET
119	0.5	2/6/2019	RET
117	3	2/6/2019	RET
92	7.24	3/3/2019	RET
77	82.9	3/18/2019	RET
75	82.9	3/20/2019	RET
85	2.99	3/10/2019	RET
1	58.75	6/4/2019	RET
85	51.47	3/10/2019	RET
22	156.3	5/11/2019	RET
27	95.89	5/6/2019	RET
26	2.07	5/6/2019	RET
26	2.08	5/6/2019	RET
8	84.31	5/25/2019	RET
13	48.3	5/20/2019	RET
13	114	5/20/2019	RET
8	84.31	6/1/2019	RET

**895.78**

**Please add up the cost of all parts that are entered into column "J"**

**OP Exercise when**



HOSPICE

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