

MATERIALS MANAGEMENT HARDWIRED REUSE
 FUNCTIONS FOR NETWORK ENGINEERING MATERIAL

OPERATING PROCEDURES

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1. GENERAL

1.01 This practice covers and describes procedures associated with the TELCO controlled warehousing and movement of Hardwired Network Engineering Material for reuse.

1.02 When this practice is reissued the reason(s) for reissue will be specified in this paragraph.

2. COMPARISON OF RESPONSIBILITIES

2.01 The Warehouse Supervisor (Materials Management) is responsible for receiving, storing, and shipping of hard-wired equipment. Transportation, hauling and hoisting arrangements, will be made by the Warehouse Supervisor when directed by the Network Engineering Reuse Coordinator. If any problems are identified, the Warehouse Supervisor and Reuse Coordinator should coordinate and resolve them immediately.

2.02 The Reuse Coordinator is responsible for the management of the removal, Intra-Company reuse and Final Retirement of the Central Office Equipment to be stored at the Warehouse location.

2.03 This practice works with BSP Section 790-100-907SW and covers those items displaced under account (122-14) and to be stored in a TELCO controlled warehouse.

3. USE OF THE CENTRAL OFFICE EQUIPMENT FORM SW-6508 FOR REMOVAL AND STORAGE.

3.01 Exhibit 1 depicts the entries to be completed on the SW-6508 by the Removal Engineer or under local agreement this information could be supplied to the warehouse via a copy of the Material Transfer Report (SW-5015) Exhibit 2. In either case the above forms should precede the actual equipment to the warehouse by 30 calendar days to ensure availability of storage space.

The items to note on Exhibit 1 are:

- (1) Area - Engineering Area of responsibility.
- (2) Sheet _____ of _____ - Number of total pages that fully identify this one main item.
- (3) Stock No. - A unique stock number (numerically assigned by reuse engineer or warehouse supervisor).
- (4) Equipment identity - The "J" Drawing and List or noun name for the material.
- (5) E/W Qty. - The identity of the "equipped with" material and associated quantities.
- (6) Eqpt. Rmvd. From: - The vendors removal order number.
- (7) Telco Order No. - The TELCO Requisition Number for the removal job.
- (8) Start Date - The removal job start date will be helpful to the Warehouse Supervisor in planning the equipment arrival.
- (9) Location - The location of the removal order listing the city, state and office.
- (10) M.T.R. - Any M.T.R., R.M.N., or Purchase Order number that is associated with this material should be identified here.
- (11) Originator - Name & Telephone Number of the Reuse Coordinator responsible for equipment and date the form was originated.

3.02 The copy of the Material Transfer Report used to fill out the SW-6508 for the Engineer should be retained by the warehouse in a separate file and filed by Reference Number for future use.

3.03 Exhibit 2 items for entry on the SW-6508 are as follows:

- a) Telco order number
- b) Vendor order number
- c) Equipment identity
- d) Equipped with items and quantity
- e) Material Transfer Report reference number
- f) Originator
- g) Phone number
- h) Location

4. WAREHOUSE RESPONSIBILITIES FOR FORM SW-6508 USE WHEN REUSE EQUIPMENT IS RECEIVED.

4.01 When the equipment arrives, it will be verified against the SW-6508 by the responsible warehouse person. Exhibit 3 depicts the lines on parts two and three to be completed by the warehouse. If the warehouse originates the SW-6508 all three parts will be completed.

- (12) Date Received - Date equipment received at the warehouse.
- (13) Recv'd By - Name and telephone number of the warehouse person who verified receipt of material.
- (14) Whse. Storage Loc. - The internal warehouse location where the equipment is stored.

4.02 When the above information is completed by the warehouse personnel, the second part will be sent back to the engineer to confirm the receipt and storage of the equipment.

4.03 The third part of the form (SW-6508) will be a card copy which is retained at the warehouse as a locator card for the equipment. The warehouse should file the SW-6508 by stock number for future use.

4.04 If under local agreement the Material Transfer Report method is used, the warehouse will retain copy one of the SW-6508 in anticipation that the same method will be used for eventual shipping information.

5. NETWORK REUSE ENGINEER'S DECISION
TO SHIP STORED EQUIPMENT

5.01 Exhibit 4 depicts the information furnished by the Reuse Engineer to initiation a transfer of equipment from the warehouse to the Central Office on part number two.

5.02 NOTE: Entries to be completed by the engineer initiating the transfer.

(15) Proposed Ship Date - The ship date requested by the engineer to ship material to the field.

(16) Vendor Order No. - The vendor order number or addition order on which this equipment will be reused.

(17) Telco Order No. - The TELCO requisition number which corresponds with the above vendor number.

(18) R.M.N./M.T.R. No. - The R.M.N. (Return Material Notice) or M.T.R. (Material Transfer Request) whichever is applicable, associated with this addition order number.

(19) Purch. Ord. No. - The purchase order number if applicable.

(20) City - The street address, city, state, and office where the equipment is to be shipped.

5.03 The above information may under local agreement be supplied to the warehouse via a Material Transfer Report which refers to the attached SW-6508 or Photo Copies of SW-6508 depicting the items to be shipped along with the proposed ship date in the explanation box of the Material Transfer Report. See Exhibit 5. The above forms should be forwarded to the warehouse 30 calendar days prior to the proposed ship date to insure that transportation and workforce requirements are coordinated.

6. WAREHOUSE SHIPPING RESPONSIBILITIES

6.01 When the "bottom half" of the second part is completed by the Reuse Engineer (Exhibit 4) and forwarded to the warehouse, the warehouse personnel will note the top-half information and select that item from stock. Pull the third part from the warehouse file and update it with all of the new information the Engineer has supplied on Exhibit 4 and the information you will supply on Exhibit 6. The top-half information is vital to any transaction initiated on the bottom-half and the two should never be separated.

6.02 Exhibit 6 depicts the final entries to be completed by the warehouse;

(21) The date equipment shipped and the name and telephone number of the responsible warehouse employee.

(22) B/L No. - The Bill of Lading number.

(23) Carrier - The carrier used for transportation to the Central Office (Common carrier name, contract carrier name or company truck).

6.03 The completed second part will now be mailed back to the responsible engineer by the warehouse personnel. The updated third part will be filed at the warehouse in a separate file by stock number representing all items which have been shipped from the warehouse.

6.04 If the local agreement is to utilize the Material Transfer Report procedure for this function, the warehouse will utilize the extra copy of the SW-6508 to inform the Engineer when the shipment is made. A completed SW-6508 as depicted in Exhibit 6 will be forwarded to the Engineer.

7. FILING OF THE SW-6508

7.01 It is suggested that the Warehouse personnel file this form by the stock number and retain two separate files. One file for equipment in the warehouse and one file for equipment that has been shipped.

7.02 The Reuse Engineer should file the SW-6508 by equipment identity for future reference.

7.03 The Reuse Engineer should refer to the stock number when corresponding with the warehouse.

7.04 Whatever the local agreement dictates, an effective cross reference file of SW-6508 and Material Transfer Reports should be maintained for future use.

8. CONTAINER IDENTIFICATION LABEL SW-6081

8.01 Exhibit 7 is a copy of the three by five inch yellow label which will identify every box placed on the storage shelf and be filled out by the person who stores that item. This label should be placed so it is visible from the aisle.

8.02 Items to note on Exhibit 7 are:

(24) Stock No. - The unique stock assigned to that box of equipment by the Reuse Engineer or Warehouse Supervisor.

(25) Whse. Storage No. - The warehouse storage location assigned by the receiving warehouse person.

(26) Equipment Identity - Equipment identity of the main item. (Equipped with items (E/W) do not need to be identified on the yellow label.)

8.03 The flow chart Exhibit 8 is to assist you in understanding the distribution of the SW-6508 Form.

9. INVENTORY FORM FOR IDENTICAL MATERIAL

9.01 To facilitate the use of one SW-6508 form when stocking mounting plates or switches that have identical material description, vintage and value the SW-6767 form should be originated simultaneously. The SW-6767 form will only be used when five or more items meet the above criteria.

9.02 The form SW-6767 will be referred to on the top portion of the SW-6508 when items are listed for warehouse storage (See Exhibit 9). Use of the SW-6767 Exhibit 10 will save on handling more SW-6508 forms than necessary. Several lines of the SW-6767 take care of numerous transactions and will extend the use of one SW-6508.

9.03 The engineer will then be able to initiate transactions shipping part of these items to the ship to address mailing a photo copy of the SW-6508 to the warehouse supervisor showing a quantity to be shipped (See Exhibit 11). The warehouse supervisor will update the warehouse part of the SW-6767 and the photo copy of the SW-6508 filling in the date shipped, Bill of Lading and Carrier. The warehouse will then update their file copy of the SW-6767 (see Exhibit 12) and return the photo copy of the SW-6508 to the Engineer to show the transaction is complete. The engineer's SW-6767 can then be updated and both parties will have the new available balance.

9.04 This process also, under local agreement, may be accomplished by use of the Material Transfer Report.

10. BILL OF LADING

10.01 It is recommended that a FASW-6152A be completed per Southwestern Bell Practice 744-001-901SW. This is an important document that should contain correct, legible information to enhance prompt delivery, accurate billing, and sufficient information should a claim be necessary. The originator of this form will be whoever the Network Engineer designates responsible for transportation arrangements for that particular order.

10.02 A bill-of-lading should accompany all contracted as well as non-contracted deliveries of C.O.E. Signatures for receipt of the material by the warehouse for a removal order or by the C.O. personnel for a reuse order will appear on the SW-6765 and SW-6766 Hauling and Hoisting Order as well as the supplier freight bill.

10.03 The carrier agent, in many cases the truck driver for the hauling and hoisting firm, will sign the bill-of-lading. The carrier agent's signature will be our receipt for turning over C.O.E. for delivery.

10.04 The originator will be responsible for retaining the top part of the SW-6152A.

10.05 The Bill of Lading should be checked freight cargo collect or prepaid whichever is applicable. The Freight Bill payment group will authorize payment for services rendered. All C.O.E. material should always be listed as "Switchboards or Switchboard Parts, NOI" see Exhibit 13.

10.06 The following information will be entered on the Bill of Lading as shown on Exhibit 13:

1. Name of Carrier - Name of carrier providing transportation.
2. Carrier Number - To be filled in by carrier's agent
3. Shipper's Number - A preprinted number.

4. Date - Date the shipment is received for by the carrier's agent.
5. Consigned To - Name and address where the material is being shipped.
6. Destination City - City, State, Zip Code, and County where the material is being shipped.
7. Shipper - The City, State, Zip Code, and County from where the material is being shipped.
8. Route - The warehouse will leave this blank. The carrier will use this space if two or more carriers are involved.
9. Vehicle Initials and No. - Used only when a rail shipment constitutes a carload.
10. Seal No. - Seal number or serial number, if a seal is used.
11. Freight charges - Either Collect or Prepaid may be utilized depending on local agreements with Network Engineer.
12. Mail Freight Bills To - Southwestern Bell Freight Bill Payment; P.O. Box 78025; St. Louis, Missouri 63178.
13. RCO - The Responsibility Code of originating organization.
14. RCC - Responsibility Code of organization to be charged.
15. ENV - Environmental Code of the organization to be charged.
16. Location Code - Location Code of the organization to be charged.
17. EST, RO, CWO, KCO - The Estimate number, Routine Order, Custom Work Order or Keep Cost Order number to be charged.
18. Function or Account Code - Function or Account Code to be charged.
19. CPR - Continuing Property Record Number only used when provided by Engineer.
20. RMN No. - For reference to the associated Return Material Notice or Material Transfer Report if applicable.
21. No. Pkgs - Number of packages, kinds of packages, such as boxes, pallets, cartons, or pieces, and total weight of those items or that line.
22. Total pieces - Total number of packages listed on form.
23. Total dunnage - not applicable unless material is shipped unpackaged.
24. Total Pallets - Total pallets supporting the items listed on form.

- 25. Total weight - Combined weight of items listed on form.
- 26. Signature and address of employee shipping the material.
- 27. Signature of carrier agent representative.

11. TRANSPORTATION

11.01 This Section covers and describes procedures associated with the movement of Central Office equipment (C.O.E.) between Telco Warehouse and a Central Office (C.O.). Control of warehouse space and delivery schedules will be coordinated between the Warehouse Supervisor, Reuse Engineer, and the Installer or Network Central Office Operations Supervisor. The person initiating the forms SW-6765 Exhibit 14 will be responsible for contacting the contracted Hauling and Hoisting supplier and coordinating the time and date of shipment.

11.02 The Warehouse Supervisor will determine from information supplied by the Engineer, the warehouse space required and the proposed storage interval.

12. COORDINATION

12.01 The Network Reuse Engineer is responsible for requesting coordination for the equipment that requires special handling between the Warehouse Supervisor and the Installer or Network Central Office Operations Supervisor.

12.02 The Installer or Network Engineer has the responsibility, together with the Warehouse Supervisor, to ensure sufficient time is allowed for identifying and arranging for necessary transportation of the equipment in a timely manner to meet the on-job date and/or job completion dates.

12.03 The six part form SW-6765 and SW-6766 overflow Form will be the vehicles used to accomplish the coordination for pick up and delivery of this equipment by a contracted hauling and hoisting vendor.

13. USE OF HAULING AND HOISTING SERVICES

13.01 Those items selected by the Installer or Network Central Office Operations Supervisor as requiring special handling will be the topic of this section. They are the large and/or excessively heavy items that cannot be easily moved, loaded on elevators or carried upstairs and those requiring hoisting to multi-floored Central Offices.

13.02 Exhibits 14 and 15 represent the SW-6765 Form and the SW-6766 which should be originated by the Warehouse Supervisor when equipment requiring special handling has been identified by the Installer or Network Central Office Operations Supervisor. Identification of this equipment might be simply marking the equipment cartons, providing a signed list identified by spec and material item number or assisting the warehouse personnel in filling out the SW-6765 form. For simplicity the Term "Hauling and Hoisting Order" will be used to describe the use of the SW-6765 and SW-6766.

13.03 Exhibit 16 depicts the usage and flow of the Hauling and Hoisting Order forms for a removal order from the C.O. to the Telco Warehouse.

13.04 Exhibit 17 depicts the usage and flow of the Hauling & Hoisting Order form from the Telco Warehouse to the C.O. for an application of reuse C.O.E.

13.05 In both cases the Hauling and Hoisting vendor is responsible not only for the equipment but also the distribution of the Hauling and Hoisting Order Forms and vendors invoice for bill payment.

14. USE OF THE HAULING AND HOISTING ORDER FORMS FOR C.O.E. MOVEMENT FROM THE TELCO WAREHOUSE TO THE C.O.

14.01 Exhibit 18 depicts the information necessary for the supplier to move the material listed from the Telco Warehouse to the C.O. Items to note on Exhibit 18 are:

1. RCO - The originating organization responsibility code.
2. RCC - The responsibility code of the organization to be charged.
3. ENV - Environmental code of the organization to be charged.
4. LOC Code - Location code of the organization to be charged.
5. Engr. Area - The Engineering Area or section responsible for transaction.

6. Date - The date the form was originated.
7. RMN No./Order No. - The Return Material Notice (RMN) number or the Order number associated with this transaction.
8. Supplier - The suppliers name who will be providing the service.
9. Pick Up Point - The address from where the material will be picked up.
10. Loading Platform - This section assists the carrier in determining if this shipment out of the facility will require special handling equipment or personnel.
11. Hoisting Required For - This section will be used to identify any material which should require hoisting.
12. Deliver To - The Name/Title, and address to which the material will be shipped.
13. Loading Platform - This section assists the carrier in determining if the receiving facility will require special handling equipment or personnel.
14. Material To Be Delivered On Job Site - If special delivery arrangements are required this section should be completed appropriately.

15. Total No. of Items - This section should be completed to include the total number of items in the shipment, total weight of the shipment, the heaviest piece of material being shipped and if the weight was determined on Public Scales.

16. Approved By - The name and title of the employee responsible for shipment.

17. Identity of Items Requiring Special Handling - This section should be completed for each piece of material being shipped and should include all requested information.

18. Remarks - Any necessary remarks or special instructions for the vendor.

14.02 The Hauling and Hoisting Order consists of a six part form. When all the information on the Hauling Hoisting Order is completed and the equipment is ready for shipment, the warehouse is to remove part six "Warehouse Copy (in transit)" and file it with the Bill of Lading. This file will be helpful for reference until the job is complete or in the event of a claim filed against the supplier. Part five will be forwarded to the responsible Network Engineer.

14.03 At this time, the Hauling and Hoisting supplier will load, transport and deliver as prescribed in the contract, the C.O.E. to the Central Office as directed on the Hauling and Hoisting Order.

14.04 When the responsible person at the Central Office receives the C.O.E. from the supplier, a physical inspection will be made of that equipment for damage as well as accuracy. Only when all the equipment has arrived at the prescribed destination will the Network Central Office Operations Supervisor or Installation Supervisor sign and date the bottom of the Hauling and Hoisting Order form.

14.05 At this point, the Central Office person will remove part three of the Hauling and Hoisting order and file it in the job folder. Parts one, two and four will be retained by the transportation supplier and used for preparing the invoice.

14.06 A three part detailed invoice will be distributed by the supplier for payment. An original invoice will be forwarded along with the original (part 1) Hauling and Hoisting Order to the SWBT Freight Bill Payment Center. The second part of the invoice will be forwarded with the fourth part of the Hauling and Hoisting Order to the originating Materials Management warehouse organization who will verify the charges rendered by the supplier. Part three of the invoice will be forwarded to the Network Engineer, who has five working days from receipt of the bill to call the Freight Bill Payment Center on (314) 247-1125 if a discrepancy is discovered. Part two of the Hauling and Hoisting Order will be retained by the supplier.

14.07 If neither the Network Engineer nor the Materials Management organization respond to the contrary within the five working days, the SWBT Bill Payment Group will pay the invoice for services rendered.

14.08 Any discrepancies in billing will be resolved by the freight bill payment center. Services problems should be referred to the Local Purchasing Organization.

15. USE OF THE HAULING AND HOISTING FORMS FOR C.O.E. MOVEMENT FROM THE CO. TO THE TELCO WAREHOUSE

15.01 Exhibit 16 depicts the flow of a Hauling and Hoisting order for movement of C.O.E. from the Central Office to the warehouse.

15.02 The Hauling and Hoisting order (SW6765) should be completed by the Central Office person responsible for the removal and shipment of this material to the warehouse for storage.

15.03 The Hauling and Hoisting form should be completed as described in Paragraph 14.01 and shown on Exhibit 18.

15.04 The Hauling and Hoisting Order is a six part form (Exhibit 14). When all the information on Exhibit 18 is completed and the removed equipment is ready for the Hauling and Hoisting suppliers handling, the third part "Job Folder Copy" will be removed and filed in the job folder by the responsible Central Office person. Part five the "Engineer Copy" will be removed and forwarded to the responsible Network Engineer.

15.05 The contracted Hauling and Hoisting supplier will load, transport and deliver as prescribed in the contract, the C.O.E. to the Materials Management warehouse as directed on the Hauling and Hoisting order.

15.06 The responsible Materials Management Warehouse person will sign and date the bottom of the Hauling and Hoisting order form after all material has been verified for accuracy or damage. The Warehouse will remove part four "Warehouse Copy (Delivered)" and six "Warehouse Copy (In Transit)" and file them in the received file. At this point, the SW-6508 may be initiated and Sections 3 and 4 of this practice may be referred to.

15.07 Parts one "Bill Payment Copy" and two "Vendor's Copy" will be retained by the transportation carrier and used for preparing the detailed supplier's invoice.

15.08 A three part detailed invoice will be distributed by the carrier for payment. An original invoice will be forwarded along with the original (Part 1) Hauling and Hoisting Order to the SWBT Freight Bill Payment Center. The second part of the detailed invoice will be forwarded to the Materials Management Group who will verify the charges rendered by the supplier. Part three of the invoice will be forwarded to the Network Engineer. Part two of the Hauling and Hoisting Order will be retained by the supplier.

15.09 If neither the Network Engineer nor the Materials Management organization respond to the contrary, the SWBT Bill Payment Group will pay the invoice for services rendered.

15.10 Any discrepancies in billing will be resolved by the freight bill payment center. Service problems should be referred to the Local Purchasing Organization.

16. TRANSPORTATION CLAIMS

16.01 Potential claims of either non-delivery, shortage, loss or damage, will be initiated by the Warehouse Supervisor, Network Central Office Operations or Installer. It is suggested that a phone call, describing the problem, be made immediately to the responsible Network Engineer. This will be followed by initiating a Report of Unsatisfactory shipment describing the nature of the claim and a call to the Carrier's office requesting an official inspection.

16.02 It is very important that the Consignee (person receiving the questionable shipment) sign the vendor's Freight Bill and note any discrepancy.

16.03 The Network Engineer should know whether or not a claim against the Transportation vendor is necessary, the exact nature of the claim and be ready to take responsibility for the following procedures.

16.04 The first step in filing a claim is to assign a unique Claim Number. This may be accomplished by utilizing a block of numbers starting with:

E-STL-001-85 for the St. Louis network

E- would represent an Engineering claim

STL- would identify the St. Louis area

001- would be the first claim of the year

85- would signify the year

16.05 The second step will be to call the Southwestern Bell Telephone Transportation Claims organization and talk to the Tracing Expediting Clerk on 314-247-1763 or 314-247-1764 to initiate a tracer for non-delivery, shortage or loss.

The following information will be requested:

1. Order number
2. Consignee (who it was shipped to)
3. Destination (consignee's address)
4. Supplier (person who shipped the material)
5. Origin (supplier's address)
6. On Job Date
7. Route (Carrier's name)
8. Tracer Request received from and telephone number (caller's name and number)
9. Pieces (total number of pieces involved in the shipment, not just those in question)
10. Weight (total weight of shipment, not just items in question)

11. Material (description of material)
12. Notify (Engineer's name, business phone number and address)
13. Bill of Lading Number
14. Date of the Bill of Lading

The above information is important because in many cases shortage or non-delivery problems can be resolved by the Transportation Claims Supervisor before additional documents are needed.

16.06 Exhibit 19 shows the supporting documents necessary to initiate a claim. The Engineer is responsible for Lines 1 through 14 and the Transportation Claims Group is responsible for Lines 15 through 20 listed on Exhibit 19. A brief explanation of those documents are:

1. Hauling and Hoisting Order - a copy of the signed SW-6765 and SW-6766 used in the transaction.
2. Report of Unsatisfactory shipment - a copy of the report sent by the Consignee (Exhibit 20). Blank forms are on the back of the Warehouse Copy (Delivered) Form SW-6765.
3. Consignee Copy of Freight Bill - the original consignee copy of the freight bill signed, dated and specifying the nature of the claim.
4. SW 6508 or Packing Slip - copy of the Central Office Equipment Inventory form or a packing slip supporting the movement of equipment.

5. Official Inspection letter - a copy of the letter Exhibit 21 supporting original call to the Carrier. This should be written and mailed to the Carrier within three working days of the initial call from the Consignee if an official inspection is denied.
6. Carrier Inspection Report - copy of official report supplied by the carrier on damage claim only.
7. Copy of previous claim correspondence - any previous letters, memos of ongoing problems with the carrier that might be beneficial to this claim.
8. Supporting Photographs - Instant print pictures supplied by the Carrier's Inspector or if necessary photos taken by the Consignee to support damage claim.
9. Consignee Statement of Concealed Damage - a copy of a signed and dated letter describing what the consignee found when the concealed damage was discovered.
10. Repair Bill Itemized - a copy that shows the exact dollar figure necessary to correct the damage. It may be supplied at a later date. The dollar figure must be accurate for fair claim settlement.
11. Statement indicating material can be repaired or salvaged - Exhibit 22 depicts the format used to describe the type of settlement we are seeking from the carrier.

12. A Certified statement on letter-head stationary which identifies the item lost or damaged and its current market value.
 13. Shipper's Statement - a letter from the person responsible for shipping the material stating the condition of questionable items when they were originally shipped.
 14. Request for Claims Investigation or Adjustment of Shipment - this 2 page letter (Exhibits 23 and 24) identifies the Carrier, Engineer, Claims Supervisor, Accounting information for payment, and items in question.
- 16.07 It is recommended the Network Engineer retain copies of the above items 1 through 14, request copies of 15 through 20 on Exhibit 19 as they become available and file all of the above items under the Claim number.
- 16.08 The completed claims package should be forwarded to:

Southwestern Bell Telephone
Transportation Claims Supervisor
500 N. Broadway
Room 1100
St. Louis, Mo. 63102



Retain 5 years, until _____

DATE RECEIVED _____

REC'D BY _____ PHONE () _____

WHSE. STORAGE LOC. _____

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____
VENDOR ORDER NO. 754321 (6) / _____

TELCO ORDER NO. 37-754321 (7) / _____

START DATE 3-5-84 (8) / _____

| SPEC NO. | ITEM NO. |
|----------|----------|
| | |

LOCATION CITY Kansas City (9) / _____
STATE MO / _____
OFFICE Toll / _____

AREA Kansas City (1) CENTRAL OFFICE EQUIPMENT

SW-6508
(12-84)

(2) SHEET 1 OF 1

(3) STOCK NO. _____

EQUIPMENT IDENTITY (4) J32311G2 L-20 VINTAGE _____

E/W _____

QTY. 1 ED 30243-33 G7 (5)
1 ED 31737-32 G6

VALUE \$

M.T.R./R.M.N. NO. 1E-03-323-AA (10)

PURCH. ORD. NO. _____

ORIGINATOR J. Engineer (11)

PHONE (816) XXX-XXXX DATE 3-5-84

PROPOSED SHIP DATE
/ /

DATE SHIPPED
/ /

SHIPPED BY _____
PHONE () _____

SHIP TO:

VENDOR ORDER NO. _____ OFFICE _____
TELCO ORDER NO. _____ ADDRESS _____
R.M.N./M.T.R. NO. _____
PURCH. ORD. NO. _____ CITY _____ STATE _____
B/L NO. _____
CARRIER _____

NOTES:

COPY 1

OFFICIAL FILE COPY if red; retention _____

FORM SW-6508

EXHIBIT 1

Section SW-745-020-906



MATERIAL TRANSFER REPORT
REPORT OF TRANSFERS, ADJUSTMENTS AND RECLASSIFICATIONS
LAND, BUILDINGS, AND CENTRAL OFFICE OR LARGE PBX EQUIPMENT

Exhibit 2

FA Form SW5015
(Rev. 4-80)

Charge Transportation To: Removal (Transferred From) Order Installation (Transferred To) Order

Sheet 1 Of 1 Sheets

| | | | | | | | | | | | | | | | | | | | | | |
|--|----------------------------------|--|---|---|---|---|----------------------------------|---|-----------------------------------|-----------------------------------|---|---|--|-------------|--|-------------------------------|----------------------|--------------------|--|--|--|
| Transferred To (Debit) | | | | Transferred From (Credit) | | | | Originator's Tel. Number (816)-XXX-XXXX | | | | | | | | | | | | | |
| 222 Anystreet | | Mtl. Mgmt. Warehouse | | 333 Street | | Toll Office 1st Floor | | Reference Number: 1E-03-323-AA | | | | | | | | | | | | | |
| <small>Address (No. and Street)</small> | | <small>Room No.</small> | | <small>Address (No. and Street)</small> | | <small>Room No.</small> | | Other Reference: | | | | | | | | | | | | | |
| St. Louis, Missouri | | 63043 | | Kansas City, Missouri | | 64116 | | Form No. _____ Date _____ | | | | | | | | | | | | | |
| <small>City and State</small> | | <small>Zip Code</small> | | <small>City and State</small> | | <small>Zip Code</small> | | Form No. _____ Date _____ | | | | | | | | | | | | | |
| Marked For: a | | Est./Order | | Account | | SPFC/EC | | Shipped Via & Carrier's Name | | Removal Order 754321 | | Shipped By: | | Date | | | | | | | |
| Requisition: 37-754321 | | W.E. Order: 754321 | | SPEC: | | No. & Type Container | | REMOVAL ACCOUNT | | REMOVAL SPFC/EC | | Received By: | | | | | | | | | |
| Quantity | Installed Est./Order (2) | Unit Price As Billed (4) | Composite Factor (6a) or Loading Factor (6b) | Tax Ratio | Description of Material or Other Charges Transferred | Net Amount (Encircle Credits) Material Salvage = (5)×(6a) In Place Cost = (5)×(6b)×(7) (9) | Year Placed In 100.1 (10) | *Source Code | Location Code (11) | Account Code (12) | Estimate or Order (13) | | | | | | | | | | |
| (1) | Mo. & Year Billed (3) | Total Material Cost (5) = (1)×(4) | # | (7) | (8) | (9) | Memo Account Indicator | *Dept. Code | Expenditure Type Code (14) | Func. Code/ Env. Code (15) | Responsibility Code Charged (16) | | | | | | | | | | |
| 1 | | | | c | J32311G2 L-20 | | | | | | | | | | | | | | | | |
| | | | | d | E/W 1 ED-30243-33 G7 | | | | | | | | | | | | | | | | |
| | | | | | 1 ED-31737-31 G6 | | | | | | | | | | | | | | | | |
| PREPARED BY: J. Engineer | | | | Explanation: | | | | | | | | | | | | | | | | | |
| <small>Title</small> | | | | | | | | | | | | | | | | | | | | | |
| <small>Date</small> | | | | | | | | | | | | | | | | | | | | | |
| JOB ENGINEER: | | | | | | | | | | | | | | | | | | | | | |
| <small>Initials</small> | | | | | | | | | | | | | | | | | | | | | |
| RC-O | | | | | | | | | | | | | | | | | | | | | |
| APPROVED: | | | | | | | | | | | | | | | | | | | | | |
| <small>Title</small> | | | | | | | | | | | | | | | | | | | | | |
| <small>Date</small> | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Open Job Adjustment <input type="checkbox"/> Closed Job Adjustment—Final Completion Report issued (See Next Item) <input type="checkbox"/> Reclassification of Plant or Transfer of Portable and Plug-In Equipment <input type="checkbox"/> Delayed Reclassification (Accrual Adj. Req'd, Show Effective Date) <input type="checkbox"/> Engineer's Supplies Used from Account 122 <input type="checkbox"/> Other — | | | | | | | | # INDICATE C For Composite Factor E For Estimate Factor O For Office Factor A For Area Factor * Acctg. Use Only | | | | FOR USE OF ACCOUNTING DEPARTMENT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Month Taken Into Acct.</td> <td>Source Number</td> <td>Pack Number</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table> | | | | Month Taken Into Acct. | Source Number | Pack Number | | | |
| Month Taken Into Acct. | Source Number | Pack Number | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |

ACCOUNTING CC /JOB FOLDER/INSTALLER COPY/FILE COPY

FORM SW-5015

EXHIBIT 2



AREA Kansas City
CENTRAL OFFICE EQUIPMENT

SW-6508
(12-84)

Retain 5 years, until _____

SHEET 1 OF 1

DATE RECEIVED 3/26/84 (12) REC'D BY P. Quency (13) PHONE (816) XXX-XXXX STOCK NO. 1001

WHSE. STORAGE LOC. D 1 1 9 A (14)

EQUIPMENT IDENTITY _____ VINTAGE _____

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____
 VENDOR ORDER NO. 754321 / _____

J 32311G2 L-20

TELCO ORDER NO. 37-754321 / _____

E/W _____

START DATE 3-5-84 / _____

QTY. _____

1 ED 30243-33 G7

1 ED 31737-31 G6

| SPEC NO. | ITEM NO. |
|----------|----------|
| | |

VALUE \$ _____

LOCATION CITY Kansas City / _____

M.T.R./R.M.N. NO. 1E-03-323-AA

STATE MO / _____

PURCH. ORD. NO. _____

OFFICE Toll / _____

ORIGINATOR J. Engineer

PHONE (816) XXX-XXXX DATE 3-5-84

PROPOSED SHIP DATE
 / /

SHIP TO: VENDOR ORDER NO. _____ OFFICE _____

DATE SHIPPED
 / /

TELCO ORDER NO. _____ ADDRESS _____

SHIPPED BY _____

R.M.N./M.T.R. NO. _____

PHONE () _____

PURCH. ORD. NO. _____ CITY _____ STATE _____

B/L NO. _____

CARRIER _____

NOTES:

COPY 1
 OFFICIAL FILE COPY if red; retention _____

FORM SW-6508

EXHIBIT 3

Section SW-745-020-906



AREA Kansas City
CENTRAL OFFICE EQUIPMENT

SHEET 1 OF 1

Retain 5 years, until _____

DATE RECEIVED 3/26/84 REC'D BY P. Quency PHONE (816) XXX-XXXX STOCK NO. 1001

WHSE. STORAGE LOC. D 1 1 9 A

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____
VENDOR ORDER NO. 754321 / _____

TELCO ORDER NO. 37-754321 / _____

START DATE 3-5-84 / _____

| SPEC NO. | ITEM NO. |
|----------|----------|
| | |

LOCATION CITY Kansas City / _____

STATE MO / _____

OFFICE Toll / _____

EQUIPMENT IDENTITY J 32311G2 L-20 VINTAGE _____

E/W _____

QTY. 1 ED 30243-33 G7

1 ED 31737-31 G6

VALUE \$ _____

M.T.R./R.M.N. NO. 1E-03-323-AA

PURCH. ORD. NO. _____

ORIGINATOR J. Engineer

PHONE (816) XXX-XXXX DATE 3-5-84

FORM SW-6508

EXHIBIT 4

PROPOSED SHIP DATE 8/15/84 15

SHIP TO:

VENDOR ORDER NO. 712345 16

TELCO ORDER NO. 37-712345 17

R.M.N./M.T.R. NO. 1E-08-324-AA 18

PURCH. ORD. NO. _____ 19

B/L NO. _____

CARRIER _____

OFFICE Toll

ADDRESS 111 Street

CITY Kansas City STATE MO 20

DATE SHIPPED / /

SHIPPED BY _____

PHONE () _____

NOTES:

COPY 1
OFFICIAL FILE COPY if red; retention _____



790-100-5305W

MATERIAL TRANSFER REPORT

**REPORT OF TRANSFERS, ADJUSTMENTS AND RECLASSIFICATIONS
LAND, BUILDINGS, AND CENTRAL OFFICE OR LARGE PBX EQUIPMENT**

FA Form SW5015
(Rev. 4-80)

Charge Transportation To: Removal (Transferred From) Order Installation (Transferred To) Order

Sheet 1 Of 1 Sheets

| Transferred To (Debit) | | | | Transferred From (Credit) | | | | Originator's Tel. Number: (816) XXX-XXXX | | | | | | | | | |
|--|-----------------------------|--|--|---|------------------|--|--|--|----------------------------|--------------------|-------------------|------------------------|---------------------------|----------------------------------|--|--|--|
| 111 Street <small>Address (No. and Street)</small> | | | | Toll Office 1st Floor <small>Room No.</small> | | | | 222 Anystreet <small>Address (No. and Street)</small> | | | | | | | | | |
| Kansas City, Missouri <small>City and State</small> | | | | 64116 <small>Zip Code</small> | | | | Warehouse <small>Room No.</small> | | | | | | | | | |
| St. Louis, Missouri <small>City and State</small> | | | | 63043 <small>Zip Code</small> | | | | Reference Number: 1E-03-324-AA | | | | | | | | | |
| Other Reference: Form No. _____ Date _____ Form No. _____ Date _____ | | | | Marked For: | | | | Shipped Via & Carrier's Name | | | | | | | | | |
| Requisition: 37-712345 | | W.E. Order: 712345 | | Account | | SPFC/EC | | SPECIAL | | REMOVAL ACCOUNT | | REMOVAL SPFC/EC | | | | | |
| No. & Type Container | | Date | | Shipped By: | | Date | | Received By: | | Date | | Date | | | | | |
| Quantity (1) | Installed Est./Order (2) | Unit Price As Billed (4) | Composite Factor (6a) or Loading Factor (6b) | | Tax Ratio (7) | Description of Material or Other Charges Transferred (8) | Net Amount (Encircle Credits) Material Salvage = (5) x (6a) In Place Cost = (5) x (6b) x (7) (9) | Year Placed In 100, 1 (10) | *Source Code | Location Code (11) | Account Code (12) | Estimate or Order (13) | | | | | |
| | Mo. & Year Billed (3) | Total Material Cost (5) = (1) x (4) | # | *Dept. Code | | | | | Expenditure Type Code (14) | | | | Func. Code/Env. Code (15) | Responsibility Code Charged (16) | | | |
| 1 | | | | | | J32311G2 L-20 | | | | | | | | | | | |
| | | | | | | E/W 1ED30243-33 G7 | | | | | | | | | | | |
| | | | | | | 1ED31737-31 G6 | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| PREPARED BY: J. Engineer <small>Title</small> _____ <small>Date</small> _____ | | | | | | Explanation: See the attached SW-6508 for the stock number and warehouse storage location of the item to be shipped. | | | | | | | | | | | |
| JOB ENGINEER: _____ <small>Initials</small> _____ <small>RC-O</small> _____ | | | | | | <input type="checkbox"/> Open Job Adjustment <input type="checkbox"/> Closed Job Adjustment—Final Completion Report issued (See Next Item) <input type="checkbox"/> Reclassification of Plant or Transfer of Portable and Plug-In Equipment <input type="checkbox"/> Delayed Reclassification (Accrual Adj. Req'd, Show Effective Date) <input type="checkbox"/> Engineer's Supplies Used from Account 122 <input type="checkbox"/> Other — | | | | | | | | | | | |
| APPROVED: _____ <small>Title</small> _____ <small>Date</small> _____ | | | | | | # INDICATE C For Composite Factor E For Estimate Factor O For Office Factor A For Area Factor * Acctg. Use Only | | FOR USE OF ACCOUNTING DEPARTMENT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Month Taken Into Acct.</th> <th>Source Number</th> <th>Pack Number</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table> | | | | Month Taken Into Acct. | Source Number | Pack Number | | | |
| Month Taken Into Acct. | Source Number | Pack Number | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

EXHIBIT 5
FORM SW-5015

Section SW-745-020-906



Retain 5 years, until _____

AREA Kansas City
CENTRAL OFFICE EQUIPMENT

SW-6508
(12-84)

SHEET 1 OF 1

DATE RECEIVED

3/26/84

RECV'D BY P. Quency

PHONE (816) XXX-XXXX

STOCK NO. 1001

WHSE. STORAGE LOC. D 1 1 9 A

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____

VENDOR ORDER NO.

754321

TELCO ORDER NO.

37-754321

START DATE

3-5-84

SPEC NO. _____ ITEM NO. _____

LOCATION

CITY Kansas City

STATE MO

OFFICE Toll

EQUIPMENT IDENTITY

J 32311 G2 L-20

VINTAGE _____

E/W _____

QTY.

1 ED 30243-33 G7

1 ED 31737-31 G6

VALUE \$ _____

M.T.R./R.M.N. NO. 1E-03-323-AA

PURCH. ORD. NO. _____

ORIGINATOR J. Engineer

PHONE (816) XXX-XXXX DATE 3-5-84

PROPOSED SHIP DATE

8/15/84

SHIP TO:

VENDOR ORDER NO. 712345

TELCO ORDER NO. 37-712345

R.M.N./M.T.R. NO. 1E-08-324-AA

PURCH. ORD. NO. _____

B/L NO. 028428

CARRIER

Consolidated

OFFICE Toll

ADDRESS 111 Street

CITY Kansas City STATE MO

DATE SHIPPED

8/15/84

SHIPPED BY J. Jones

PHONE (816) XXX-XXXX

21

22

23

NOTES:

COPY 1

OFFICIAL FILE COPY if red; retention _____

FORM SW-6508

EXHIBIT 6

Section SW-745-020-906

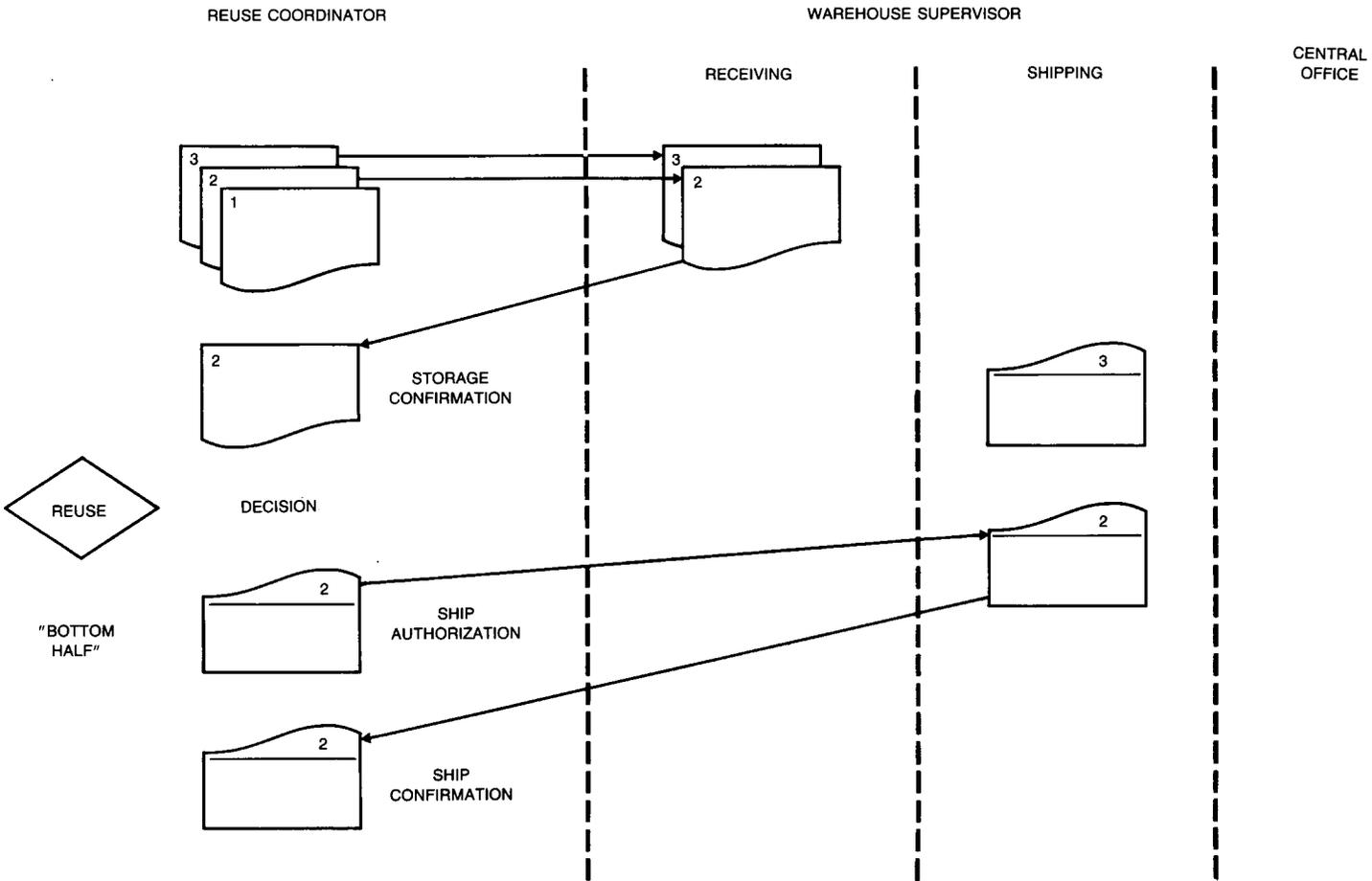
EXHIBIT 7

STOCK NO. 1001 (24) SW-6081

**WHSE.
STORAGE NO.** D119A (25)

**EQUIPMENT
IDENTITY** J32311G 2 - L20 (26)

SW-6508 DISTRIBUTION





Retain 5 years, until _____

DATE RECEIVED
5 / 1 / 84

REC'D BY P. Quency

PHONE (816) XXX-XXXX

STOCK NO. 1002

SHEET 1 OF 2

SW-6508
(12-84)

AREA Kansas City CENTRAL OFFICE EQUIPMENT

WHSE. STORAGE LOC. D 1 1 9 B

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____
VENDOR ORDER NO. 754322 / _____

TELCO ORDER NO.
37-754322 / _____

START DATE
4-15-84 / _____

SPEC NO. _____ ITEM NO. _____

LOCATION
CITY Kansas City / _____

STATE MO / _____

OFFICE Toll / _____

EQUIPMENT IDENTITY

VINTAGE _____

See attached SW-6767

E/W For multi-item description

QTY. and available quantities

VALUE \$

M.T.R./R.M.N. NO. 1E-03-324-AA

PURCH. ORD. NO. _____

ORIGINATOR J. Engineer

PHONE (816) xxx-xxxx DATE 4-15-84

PROPOSED SHIP DATE

/ /

SHIP TO:

VENDOR ORDER NO. _____

OFFICE _____

TELCO ORDER NO. _____

ADDRESS _____

R.M.N./M.T.R. NO. _____

PURCH. ORD. NO. _____

CITY _____ STATE _____

B/L NO. _____

CARRIER _____

DATE SHIPPED

/ /

SHIPPED BY _____

PHONE () _____

NOTES:

COPY 1

OFFICIAL FILE COPY if red; retention _____

FORM SW-6508

EXHIBIT 9

Section SW-745-020-906



CENTRAL OFFICE EQUIPMENT - IDENTICAL MULTI-ITEM FORM

SW 6767
(6/84)

SHEET 2

EQUIPMENT IDENTITY

J1A084 DB1 L-1
 TOC 7400
 IAO Truck - ESS

STOCK NO. 1002
 VINTAGE 1978
 VALUE \$ 76.66

| | AVAILABLE QUANTITY | M.T.R. REF. NO. | DATE | INITIALS | QTY RCVD. | QTY SHIPPED | REMARKS |
|------------------|--------------------|-----------------|--------|----------|-----------|-------------|---------|
| STARTING BALANCE | 95 | 1E-03-324-AA | 5-1-84 | P.O. | 95 | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |

OFFICIAL FILE COPY if red; retention

FORM SW-6767

EXHIBIT 10



Retain 5 years, until _____

AREA Kansas City
CENTRAL OFFICE EQUIPMENT

SW-6508
(12-84)

SHEET 1 OF 2

DATE RECEIVED

5/1/84

REC'D BY P. Quency

PHONE (816) XXX-XXXX

STOCK NO. 1002

WHSE. STORAGE LOC. D 1 1 9 B

EQPT. RMVD. FROM: _____ FOR INSTALLATION IN: _____
VENDOR ORDER NO. 754322 / _____

TELCO ORDER NO.

37-754322 / _____

START DATE

4-15-84 / _____

SPEC NO. _____ ITEM NO. _____

EQUIPMENT IDENTITY

VINTAGE _____

See attached SW- _____

E/W For Multi-Item Description _____

QTY. and available quantities _____

VALUE \$ _____

LOCATION

CITY Kansas City / _____

STATE MO / _____

OFFICE Toll / _____

M.T.R./R.M.N. NO. 1E-03-324-AA

PURCH. ORD. NO. _____

ORIGINATOR J. Engineer

PHONE (816) XXX-XXXX DATE 4-15-84

PROPOSED SHIP DATE

5/8/84

Qty. of
20

SHIP TO:

VENDOR ORDER NO. 712346

TELCO ORDER NO. 37-712346

R.M.N./M.T.R. NO. 1E-03-324-AA

PURCH. ORD. NO. _____

B/L NO. _____

CARRIER _____

OFFICE Toll

ADDRESS 111 Street

CITY Kansas City STATE MO

DATE SHIPPED

/ /

SHIPPED BY _____

PHONE () _____

NOTES:

COPY 1

OFFICIAL FILE COPY if red; retention _____

FORM SW-6508

EXHIBIT 11

Section SW-745-020-906



CENTRAL OFFICE EQUIPMENT - IDENTICAL MULTI-ITEM FORM

SHEET No. 2

EQUIPMENT IDENTITY

J1A084 DB1 L-1
 TOC 7400
 IAO Trunk - ESS

STOCK NO. 1002
 VINTAGE 1978
 VALUE \$ 76.66

| | AVAILABLE QUANTITY | M.T.R. REF. NO. | DATE | INITIALS | QTY RCVD. | QTY SHIPPED | REMARKS |
|------------------|--------------------|-----------------|--------|----------|-----------|-------------|---------|
| STARTING BALANCE | 95 | | | | | | |
| TRANSACTION | | 1E-03-325-AA | 5-8-84 | J.J. | | 20 | |
| BALANCE | 75 | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |
| TRANSACTION | | | | | | | |
| BALANCE | | | | | | | |

OFFICIAL FILE COPY if red; retention _____

FORM SW-6767

EXHIBIT 12

EXHIBIT 13

FORM FASW-6152A

| Southwestern Bell | | STRAIGHT BILL OF LADING — SHORT FORM — ORIGINAL — Not Negotiable | | | | FASW6152A (4-84) | | | |
|---|----------------------|--|------------------------------|--|--|--|--|--------|---------------|
| 744-001-901SW | | RECEIVED subject to the classifications and tariffs in effect on the date of issue of this Bill of Lading. | | | | 4 | | | |
| NAME OF CARRIER ABC Moving and Storage (1) | | SCAC | CARRIER'S NO. | SHIPPER'S NO. A581204 (2) | DATE | (3) / / | | | |
| <small>The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated below, which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any portion of said property over all or any route to destination, and as to each party at any time interested in all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification of tariff if this is a motor carrier shipment. Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which governs the transportation of this shipment, and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.</small> | | | | | | | | | |
| CONSIGNEE TO Joe P. Supervisor (5) | | STREET ADDRESS XXXX Baxter Rd. | | | | | | | |
| DESTINATION CITY Ballwin (6) | | STATE Missouri | ZIP 63011 | COUNTY St. Louis County | | | | | |
| SHIPPER SOUTHWESTERN BELL TELEPHONE CO. (7) | | ORIGIN CITY 222 Anystreet | STATE St. Louis | ZIP Missouri 63043 | COUNTY St. Louis Co. | | | | |
| ROUTE (8) | | SCAC | SCAC | SCAC | (11) | | | | |
| VEHICLE INITIALS (9) | NO. | SEAL NO. | CONSOLIDATION NO. | FREIGHT CHARGES | <input type="checkbox"/> PREPAID <input type="checkbox"/> COLLECT | | | | |
| MAIL FREIGHT BILLS TO: (12) Southwestern Bell Freight Bill Payment P.O. Box 78025 St. Louis, Missouri 63178 | | | | | | | | | |
| RCC (13) SXXXXXXX | RCC (14) SXXXXXXX | ENVY (15) | LOCATION CODE (16) AAXXXX | EST. NO. CWO. KCO (17) | | | | | |
| FUNCTION OR ACCOUNT CODE (18) | | CPR CODE (ACCT.-FA ONLY) (19) | | RMN NO. (20) | | | | | |
| NO. PKGS. | * KIND OF PKG. | DESCRIPTION OF ARTICLE | WEIGHT | CLASS OR RATE | NO. PKGS. | * KIND OF PKG. | DESCRIPTION OF ARTICLE | WEIGHT | CLASS OR RATE |
| | BDLS. BOXES | ANCHORS, Guy, Iron | | | 2 | COILS REELS | STRAND Steel Wire | 3,000 | |
| | BOXES | ARRESTERS, Lightning or Parts | | | | BOXES | SWITCHBOARDS or Switchboard Parts, NOI | | |
| | BOXES | BATTERIES, Dry Cell, Not Spent | | | | BOXES | TAPE, Insulating or CLOTH, Insulating, NOI | | |
| | BAGS | BOLTS, Iron NOI | | | | BOXES | TELEPHONE SETS or Parts, NOI | | |
| | BOXES | WASHERS, Iron | | | | | TELETYPEWRITERS or Parts, NOI | | |
| | | BOOTHES, Telephone, Aluminum, S.U. | | | | | TOOLS, NOI | | |
| | BOXES | BOXES, Cable Terminal, Steel or TERMINALS, Cable or Parts | | | | | WIRE, Brass, Bronze, Copper or Copper Clad Steel | | |
| | BAGS | BRACKETS, Insulator, Wood or PINS, Insulator Wood | | | | COILS | WIRE, Iron, NOI | | |
| | BDLS. | CABLE, Electric Copper, NOI | | | | | STATIONERY: | | |
| | COILS REELS | CABLE, Lead Cov., Copper or CABLE, Lead Cov., Copper, Arm'd. | | | | BOXES | FORMS, Printed, NOI | | |
| | BOXES | CABLE JOINTS, NOI | | | | BOXES | STATIONERY, NOI | | |
| | BOXES | CLAMPS, Wire Guy Iron | | | | | SCRAP, CABLE, COPPER, Lead Covered FOR REMELTING ONLY | | |
| | PCS. | CROSSARMS, Wood or BRACES, Crossarm, Wood | | | | | SCRAP, BRONZE OR COPPER FOR REMELTING ONLY (Includes scrap wire or cable not lead covered) | | |
| | PCS. | CROSSARMS, Wood With Braces or Insulator Pins Attached | | | | | SCRAP LEAD FOR REMELTING ONLY | | |
| | BOXES | ELECTRICAL Appliances NOI | | | | | | | |
| | BDLS. | HANDLES, Wooden, NOI O.T. In the Rough | | | | | | | |
| | | LADDERS, Wood and Steel Combined, NOI | | | | | | | |
| | PCS. BDLS. | PIPE LEAD, Plain | | | | | | | |
| | | BATTERY, Elec. Storage, wat. filled with acid, corrosive material, UN2794: | | | | | | | |
| | | - 100 lbs. or less, act. val. NX \$2.00/lb. | | | | | | | |
| | | - 100 lbs. or less, act. val. exc. \$2.00/lb. | | | | | | | |
| | | - weighing over 100 lbs. each | | | | | | | |
| | BDLS. BOXES PCS. | POLE or TRANSMISSION LINE CONSTRUCTION MATERIAL STEEL | | | | | | | |
| | BOXES | RADIO OR ELECTRONIC FUSES, NOI RELEASED TO VALUE NOT EXCEEDING \$1.50 PER LB. | | | | | | | |
| | BOXES | RECTIFIERS, NOI | | | | | | | |
| | BDLS. | RODS, Anchor, Guy Iron | | | | | | | |
| | BDLS. | SHOVELS, Steel or Wood Combined | | | | | | | |
| | PKG. | SOLDER, NOI | | | | | | | |
| TOTAL PIECES (22) 2 | | TOTAL DUNNAGE (23) | | TOTAL PALLETES (24) 2 | | TOTAL WEIGHT (25) 3000 Lbs. | | | |
| This is to certify that the above named materials are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to Applicable regulations of the Department of Transportation. | | | | This is to certify that destination of empty reels or cylinders or hampers is a point from which filled reels or cylinders or hampers moved by (Rail) (Truck) freight service Charges are guaranteed | | | | | |
| SOUTHWESTERN BELL TELEPHONE CO., Shipper | | | | Carrier Agent | | | | | |
| Per <i>Joe P. Supervisor</i> Permanent Postoffice Address of Shipper 222 Anystreet (26) | | | | Agent must sign (27) _____ | | | | | |
| RETENTION PERIOD - 3 YEARS | | | | RETAINED BY ORIGINATOR | | OFFICIAL FILE COPY IF RED; RETENTION _____ | | | |

EXHIBIT 14

FORM SW-6765



Hauling-Hoisting Order

SW 6765 6/64

PAGE ____ OF ____

R.C.O. _____ R.C.C. _____ ENV. _____ LOC. CODE _____

Engr. _____ R.M.N. NO. _____
Area _____ Date _____ Order No. _____

RENDER BILLING TO **SOUTHWESTERN BELL FREIGHT BILL PAYMENT**
P.O. BOX 78025
ST. LOUIS, MISSOURI 63178

SUPPLIER

Name _____
Street _____
Address _____
Town, State _____
Zip Code _____

Deliver to _____
Street _____
Address _____
Town, State _____

Phone No. _____
Loading Platform Trucking Zone _____

Remarks _____

Pick up point _____

Title _____
Street _____
Address _____
Town, State _____
Zip Code _____

Loading Platform Trucking Zone _____ Floor _____

Hoisting required for All Part (See (below))
None

MATERIAL TO BE DELIVERED ON JOB SITE

Date _____

Between the hours of: _____ and _____

Total No. of Items _____ Total Weight (LBS) _____

Heaviest Piece if rate is affected (LBS) _____ Weigh on Public Scale

Approved by Name and Title _____

Identity of Items Requiring Special Handling.

| J and List | Spec | Work Item | Weight (LBS) | Hoisting Required (Y, N) | Floor Destination |
|------------|------|-----------|--------------|--------------------------|-------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

(IF MORE SPACE IS NEEDED USE FORM SW-6766)

Received by _____ Date _____

BILL PAYMENT COPY 1 OFFICIAL FILE COPY IF RED; RETENTION _____

VENDOR'S COPY 2 DUPLICATE - ADMINISTRATIVE RETENTION ONLY

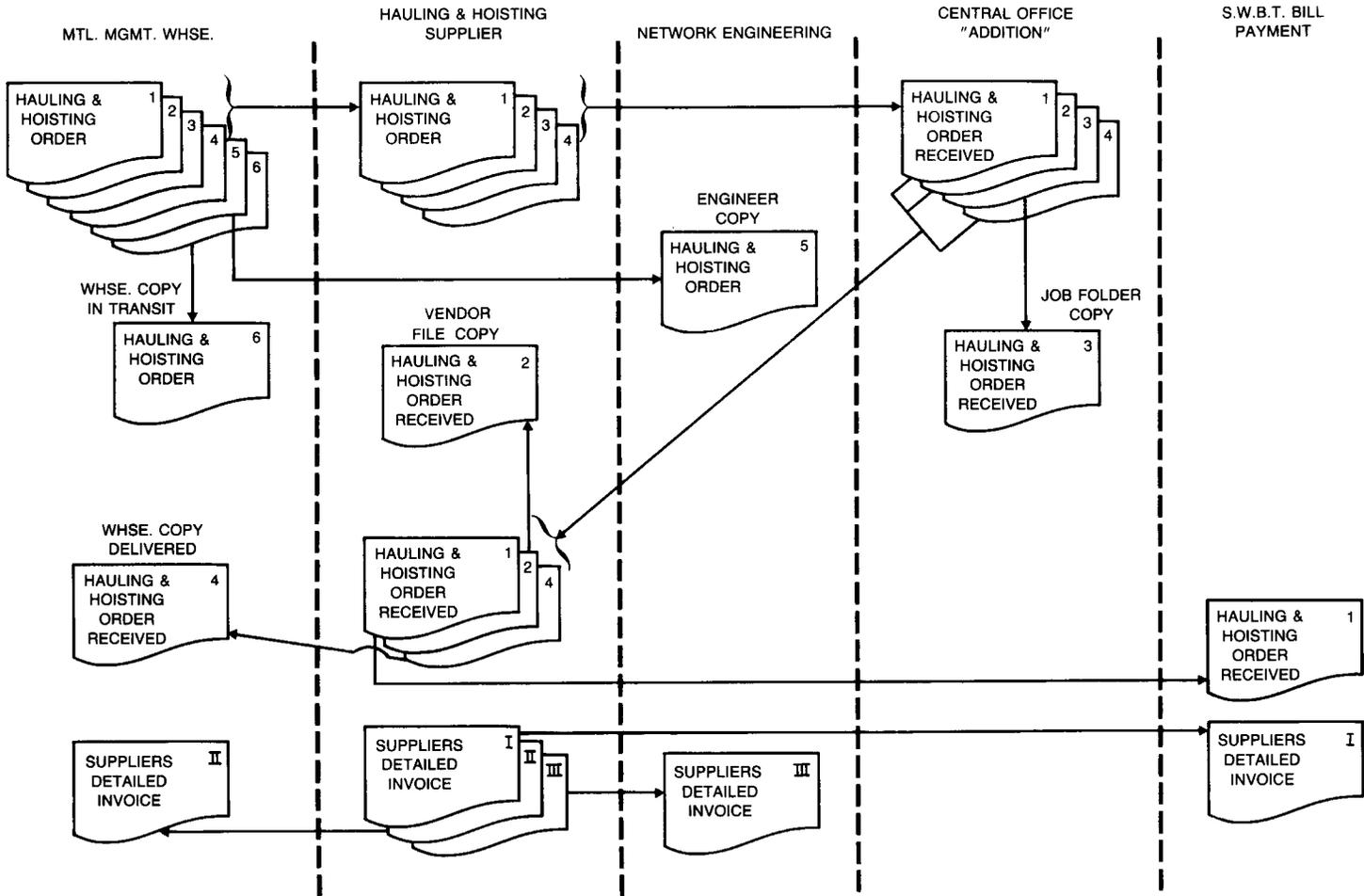
JOB FOLDER COPY 3 DUPLICATE - ADMINISTRATIVE RETENTION ONLY

WAREHOUSE COPY (DELIVERED) 4 DUPLICATE - ADMINISTRATIVE RETENTION ONLY

ENGINEER'S COPY 5 DUPLICATE - ADMINISTRATIVE RETENTION ONLY

WAREHOUSE COPY (IN TRANSIT) 6 DUPLICATE - ADMINISTRATIVE RETENTION ONLY

C.O.E. HARDWARE MOVEMENT FROM MATERIAL MANAGEMENT WAREHOUSE TO CENTRAL OFFICE



C.O.E. HARDWARE MOVEMENT FROM CENTRAL OFFICE TO MATERIAL MANAGEMENT WAREHOUSE

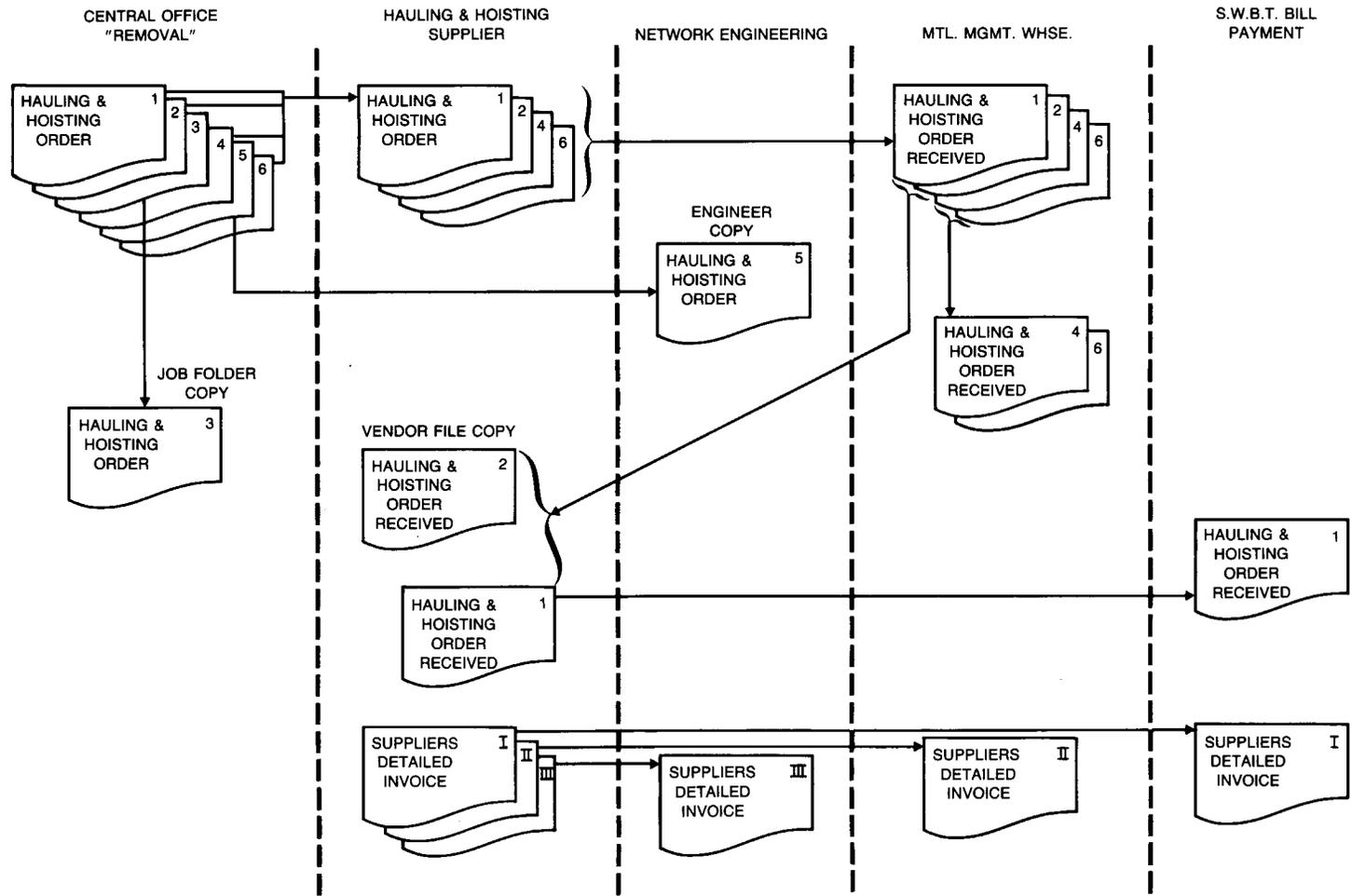


EXHIBIT 17

EXHIBIT 18

FORM SW-6765



Hauling-Hoisting Order

SW 6765 (6/84)

PAGE 1 OF 1

R.C.O. SXXXXXXX (1) R.C.C. SXXXXXXX (2) ENV. X (3) LOC. CODE AAXXXX (4)
 Engr. Area St. Louis (5) Date 6-5-84 R.M.N. NO. 771234 Order No. 7

RENDER BILLING TO

SOUTHWESTERN BELL FREIGHT BILL PAYMENT
 P.O. BOX 78025
 ST. LOUIS, MISSOURI 63178

SUPPLIER

Name ABC Moving & Storage (8)
 Street 1111 Street
 Town, State Overland, MO 63XXXX
 Deliver to Ballwin Central Office (12)
 Street XXXX Baxter Rd.
 Address Ballwin, MO 63011
 Phone No. 314-391-XXXX
 Loading Platform (13) Trucking Zone _____

Pick up point Loading Dock #3 Door (9)
 Title Staff Supv.-Materials Mgmt.
 Street 222 Anystreet
 Address St. Louis, MO 64043
 Town, State St. Louis, MO 64043
 Zip Code St. Louis, MO 64043
 Loading Platform (10) Trucking Zone _____ Floor _____
 Hoisting required for All Part (See (below))
 None (11)

MATERIAL TO BE DELIVERED ON JOB SITE

Date 6-11-84
 Between the hours of: 8 a.m. (14) and 3:30 p.m.

Total No. of Items 2 Total Weight (LBS) 3,000
 Heaviest Piece if rate is affected (LBS) 1,800 15 Weigh on Public Scale

Remarks (18)

Approved by W. H. Supervisor-Staff Supv.-Materials Management (16)
 Name and Title _____

Identity of Items Requiring Special Handling.

| J and List (17) | Spec | Work Item | Weight (LBS) | Hoisting Required (Y, N) | Floor Destination |
|-----------------|------|-----------|--------------|--------------------------|-------------------|
| J99335V-1 L-1 | | | 1,200 | Y | 2nd floor |
| J99335T-1 L-1 | | | 1,800 | Y | 2nd floor |

(IF MORE SPACE IS NEEDED USE FORM SW-6766)

Received by _____ Date _____

BILL PAYMENT COPY

OFFICIAL FILE COPY IF RED; RETENTION _____

TO SUPPORT CLAIM FOR TRANSPORTATION BETWEEN A MTL. MGMT. WHSE. AND A C.O.

| <u>DOCUMENTS</u> | <u>ENGINEER SUPPLIED INFORMATION</u> | | |
|---|--------------------------------------|-----------------|---------------|
| | <u>NON-DELIVERY</u> | <u>SHORTAGE</u> | <u>DAMAGE</u> |
| 1. Hauling and Hoisting Order (Copy of all pages) | x | x | x |
| 2. Report of unsatisfactory shipment | x | x | x |
| 3. Consignee copy of Freight Bill (signed and designating problem on all copies) | | x | x |
| 4. Central Office Equipment Inventory Form (SW 6508) or Packing Slip | | x | x |
| 5. Official inspection letter | x | x | x |
| 6. Carrier inspection report (supplied by carrier) | | | x |
| 7. Copy of previous claim correspondence (if applicable) | x | x | x |
| 8. Support photographs | | | x |
| 9. Consignee statement of concealed damage (signed letter of explanation) | | | x |
| 10. Repair bill itemized (could be supplied at a later date) | | | x |
| 11. Statement indicating material can be repaired or salvaged | | | x |
| 12. Certified statement of equipment value | x | x | x |
| 13. Shippers statement (concealed damage) (letter stating material was good when shipped) | | | x |
| 14. Request for claims investigation or adjustment of shipment | x | x | x |
| <u>TRANSPORTATION SUPPLIED INFORMATION</u> | | | |
| 15. Tracer File (SW-1731) (Information taken over the phone) | x | x | x |
| 16. Bill-of-Lading FASW 6152A | | x | x |
| 17. Notice of filing loss and damage | x | x | x |
| 18. Consignee statement (proof of loss statement) | x | x | |
| 19. Claim Form SW 1831 | x | x | x |
| 20. Copy of original paid freight bill | | x | x |

EXHIBIT 19

EXHIBIT 21



Southwestern Bell

Dear Sir:

This official inspection letter confirms telephone conversation dated _____ between _____ of your office and _____ of our office in which a carrier inspection was requested.

CARRIER _____

DATE SHIPPED _____

PRO NUMBER _____

DATE INSPECTION REQUESTED _____

DATE CARRIER DECLINED INSPECTION _____

Respectfully yours,

EXHIBIT 22

STATEMENT INDICATING MATERIAL CAN BE REPAIRED OR SALVAGED

STATEMENT OF CLAIM

Date _____

Claim Number _____

Order Number _____

Description of Material _____

Total Number of Cartons _____ Total Weight _____

Point of Origin _____

Consigned to: _____

Shipped via: _____

Pro Number * _____ Car Number * _____

Seal Number * _____ Bill of Lading _____

* To Be Filled in by Transportation Claims Supervisor _____

Receipt of Material disclosed the following:

_____ Non-Delivery _____ Shortage _____ Damage

If Damaged, Suggested Disposition of Material:

_____ Repaired _____ Junked _____ Retained by Carrier

AMOUNT OF CLAIM

| <u>Qty.</u> | <u>Material</u> | <u>Estimated Unit Price</u> | <u>Total</u> |
|-------------|-----------------|-----------------------------|--------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Salvage Allowance (Repairs of Necessary Material) _____

Cost: _____
Labor Cost: _____
Total: _____

Name Title Date

EXHIBIT 23

Request For Claims Investigation or Adjustment of Shipment



Southwestern Bell

Vendor Name _____

S.W.B.T.
Engineer

Vendor Address _____

Name _____ Title _____

Attn: _____
Name

Street _____

City _____ State/Zip _____

Phone _____

Date _____

Below is shown information regarding shipment.

Claim No. _____

Will you please investigate and inform us of the disposition made of the claim.

Req. No. _____

Order No. _____

S.W.B.T. Transportation Phone
Claims Supervisor

Transportation Cost: _____

Ship To: _____

Remarks _____

Street _____

Return Auth. # _____

City _____ State/Zip _____

Expenditure Type Code: _____

| Responsibility Code-Originating | Responsibility Code Charged | EC | Location Code | Est., RO, CWO, KCO | CPR Code |
|---------------------------------|-----------------------------|----|---------------|--------------------|----------|
| | | | | | |

| Claim Items | Quantity | *Reason for Request | Func. Code or Acct. Code | **Disposition Desired by SWBT Co. | Amount of Retribution from vendor |
|-------------|----------|---------------------|--------------------------|-----------------------------------|-----------------------------------|
| 1. _____ | | | | | \$ _____ |
| 2. _____ | | | | | |
| 3. _____ | | | | | |
| 4. _____ | | | | | |
| 5. _____ | | | | | |

Transportation Charges Incurred For Claim Items \$ _____

Vendor Retribution Total \$ _____

*E.G. S-Shortage. N.D.-Non-Delivery, DGD-Damaged

**E.G. If Damaged R-Repair J-Junk R.C.-Retained by Carrier If Non-Delivery or Shortage % of Retribution.

EXHIBIT 24

REQUEST FOR CLAIMS INVESTIGATION OR ADJUSTMENT OF SHIPMENT

Remarks

Use Additional Page If This Space Is Not Sufficient

No. of Boxes, Packages, etc., Received Did Shipment Show Signs of Rough Handling

Did No. of Boxes, Packages, etc., Agree with Shipping Receipt Was Notation of Damage Freight on Express Bill

Was Notation of Shortage Made on Freight or Express Bill

| | | | | | |
|-------------------------|----------------------|----------------------|----------------------|--------------------------|---------------|
| <u>Claim Withdrawal</u> | | <u>Claim Settled</u> | | <u>Disposition Noted</u> | |
| Signed _____ | Signed _____ | Signed _____ | Signed _____ | _____ | _____ |
| For vendor Date | For vendor Date | For vendor Date | For vendor Date | Date | Claims Coord. |

| | | |
|---------------------------|---------------------------|-------|
| Signed _____ | Signed _____ | _____ |
| SWBT Tel. Corp. Date | SWBT Tel. Corp. Date | _____ |
| Title _____ | Title _____ | _____ |

Claim Settlement Amount _____

Name _____

Title _____

Note: See Schedule of Authorizations guidelines for the individual authorized to sign for the Claim Settlement Amount.