M B A R I

Outgoing Shipment/Return Request

Requested by: Erik Trauschke

Extension: 2068 Date: 12/08/2023

Shipping Information:

Description of Item(s):
If Hazardous Material include proper shipping name/UN#, quantity, and unit of measure.

inertial navigation system in pressure housing plus cables (contains no batteries or other hazardous material)

Ship To:

Company: Exail Defense Systems Inc

Contact: Attn: Patrick Lieffering

Address: 27 Wellington Road

Lincoln, RI 02865

Phone:

Special Instructions:

please provide tracking number once shipped

Return/Repair Authorization Number:

Ship Via:

☑ Best way ☐ UPS ☐ FedEx

☐ Other (specify:)

Service:

☐ Ground ☐ 3-Day ☑ 2-Day

☐ Next Day ☐ Other (specify:)

Billing Information:

Project: 368000 Account: 5200000 Ref. #:* PO#:*

** if applicable*

Approver Signature

Trauschke

Approver Name

Please complete if shipping is NOT pre-paid:

Payment Type: ☐ Collect ☐ Third Party

Shipping Company Name:

Recipient/3rd Party Account #: