TY/Gor NO.	DEALER NO	ALPHA	/C SC	P	ANT NO					
1922			2 3		125	<u> DKylini</u>				
						SKYLINE CORPORATIO	N			
	TRUCKING L			-		315 W. SKYLINE ROA	Ð			
	EAST SIDE N: GREG DEL					P.O. BOX 719				
	LAND, MO 65		•		2004	ARKANSAS CITY, KS 6700 (316)442-9060				
<i>[10111</i>		010	JUN 2	9 อ	2994	PRODUCT NAME	CODE NO.			
		DTICE			أشاريح	AMERICAN ESTATES	01			
FINANCED BY:	T "AS IS" AND REFUSE	THIS MOBILE HOME SEL	Missol	urt	Pup	AMERICAN ESTATES	L			
R	ESPONSIBIL TY FOR D	EFECTS. THE POLICH	ervice	COI	11111	111 EAST SIDE DRIVE				
FINANCED BY: IT "AS IS" AND REFUSES TO ASSUME ANY AESPONSIBILITY FOR DEFECTS. THE PORCH SETVICE OF THIS MODILE NOME MUST ACCEPT IT WITH ALL DEFECTS AND TAKE THE ENTIRE RISK, UNDER										
	CNTRACT LAW, AS TO T	TSANAKANDI MARE	F	<u>8885</u> 23		ASHLAND, MO 65010	<u></u> _			
	•		: - 1			** BASE PRICE	25 000 00			
FLOOR PLAN	COD	DESCRIBE OTHER TERMS		aty.	1	OPTION DESCRIPTION	35,990.00 			
		COD			sc	DLD WITHOUT WARRANTY-				
DATE SHIPPED	HOW SHIPPED	·····	line Date	1		LAIM #GA0495947-01				
11/18/1999	A&G)	/10/1999			TE OF LOSS-11/18/1999	ĺ			
DOM (HUD Tag Date)		DATE TALLIED				T.BILLS #000127				
11/12/1999		11/19/1999)		ļ	AND #000128	J			
MODEL NUMBER	4	SERIAL NUMBER(S)			DF	RIVERS: DAVE GOWDY				
D400CT	01-51-0412		,			AND RICHARD MCDADE				
	01-51-0412	-M-A 64'x16	J A			RUCKS #225, #226	}			
						ESTINATION: JOPLIN, MO				
					'T'¥	PE OF LOSS: WRECKED				
		*****	12 14 12	1	UTDE	FOR DRUFR / 200 MMD				
SCK 2B CATT		CHES*REC.FF				E FOR DRYER/ 200 AMP RMAL VINYL WINDOWS	800.00			
SIZE 64'X32' Overall length excludes approximately four foot hitch TECHNICAL INFORMATION					7	AL ELECTRIC UNIT W/	225.00			
Insulation location R.	Value Approximate 1			- L		EB12 ELECT.FURNACE	225.00			
Ceiling R-19	€ 6 1/2"	Min. W	700l	ı		AB & DRAIN				
Wall R-19						AL.ELECT.WATER HEATER	ł			
Floor R-19		Fiberg	jlass	1	HOUS	SE TYPE FRONT DOOR				
Roof Load	Wind Load	Heat Zone				SE TYPE REAR DOOR R.H.	100.00			
30	PSF ZONE 1-1	5 _{PSF} 3		2		BOLT LOCKS-FRT/REAR	40.00			
H.U.D. Certification Label Number(s)				1		DRAPES				
NONE, NONE			j	1		HEDRAL CEILING THRUOUT	725 00			
				⊥ 1		STRIP	725.00 120.00			
** VOLUME INCENTIVE PROGRAM A volume incentive (enhancement) program applies to this involce. For full information					1	ED ENTRY 160 WHITE	120.00			
(supplemental disclosures) (219-294-6521).	write to VIP Skyline Corpora	ation P.O. Box 743, Elkhart IN	46515-0743	1		L/SHINGLE ROOF*				
				2		ACHABLE HITCHES				
				1		(LES-4 BLANK, 4 BRAKE				
			ĺ	1	(SSED FRAME*	95.00			
	NOTICE	·····		1	SHUT	TTERS-DS				
THE MANUFAC	TURER OF THIS MOBIL	E HOME SELLS		1	I	DLE ZONE CONSTRUCTION*				
RESPONDER	ND REFUSES TO ASSUM TY FOR DEFECTS, THE	IL ANY PHOCKASSO		1		MAL ZONE III (64X32)				
OF THE	LE HOME MUST ACCEP	I IT WITH ALL				S PACKAGE INCLUDES:				
DEFECTS AND	IAKE THE ENTIRE RIS	K. UNDER				total page 2	1,730.00			
CUNIKAGI LA	W, AS TO ETS CONDITIE	DN.		ł		PRICE WITH OPTIONS	39,825.00			
						FREIGHT (211) SALES TAX (224)	1,066.00			
· · · ·			Í	[UNILU INA (224) ()				
Exon	back					2				
						\sim				
NOTE: Some running gear, inspection.	including tires, wheels, axles	s, springs and brakes are reu	sed after careful	G	RAN	DTOTAL	40,891.00			
NOTICE: Check or bank draft received for merchandise covered by this invoice does not constitute						EPOSIT				
payment and title to same does not pass until cash thereof is received by Skyline Corporation. The undersigned hereby acknowledges delivery and acceptance of the described unit.						NCEDUE	40,891.00			
		N(OTICE TO DEA	LER: 1	When acce leck out shi	pting delivery of this shipment be sure to examine home careful set which must be returned by the driver. We cannot assume res	ly and have shortage or ponsibility for loss or			
(SIGNATURE)						otation of shortage or damage is made when accepting delivery				
* THIS INVOICE REPL	ACES INVOICE # 19	9182	ORIGIN		NVOIC	SEE CERTIFICATIONS OI	N KEVEKSE			

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CERTIFICATIONS

As evidenced by the HUD Certification Label number(s) shown on the front of this invoice, the manufacturer certifies to the best of the manufacturer's knowledge and belief that this manufactured home has been inspected in accordance with the requirements of the Department of Housing and Urban Development and is constructed in conformance with the Federal Mobile Home Construction and Safety Standards in effect on the date of manufacture.

Skyline Corporation (and its subsidiaries) certifies that (1) this invoice is issued in compliance with the Truth in-Invoicing Practices Statement (Statement) as approved by resolution of the Manufactured Housing Institute on October 6, 1995, (2) that the manufacturer, in preparing and certifying this invoice and any disclosures required to be made by the Statement, is providing to the best of its knowledge and belief accurate, complete, and truthful information, and that (3) the manufacturer expressly acknowledges that lenders and insurers rely on invoices and any disclosures required to be made by the Statement to make finance, insurance, guarantee, and purchase decisions.

Signature of Authorized Manufacturer Representative

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	NVUIDE NO. DEALER NO. ALPHA	T/C SC	PLAN	TNO				
· ·	10001					KYL i		
	19221 99998		1:	25				
5 7 5						SKYLINE CORPORATION		
	SA&G TRUCKING LLC 10111 EAST SIDE DRIVE		D400CT			315 W. SKYLINE ROAD P.O. BOX 719		
ATTN: GREG DELINE		SERIAL NUMBER			ARKANSAS CITY, KS 670050719			
ASHLAND, MO 65010		01-51-0412-M-AB			(316)442-9060			
			PRODUCT NAME			CODE NO.		
0		AMERIC	AN	ESTATES		01		
ΟΤΥ.	OPTION DESCRIPTION	AMOUNT	QTY.		DESCRIPTION		AMOUNT	
1	R-19 INSULATION: ROOF							
1	R-19 INSUL. (2X6 WALLS)							
1	R-19 INSULATION: FLOOR							
1	BLEND AIR SYSTEMS							
1	BATHROOM CEILING VENTS							
1	WIRE FOR CEILING FAN IN	40.00						
	MORNING ROOM							
1	BEDROOM CEILING LIGHTS							
1	DININGROOM CHANDELIER							
	MEDICINE CABINET-LAV.END		j j					
	LIGHT BAR OVER LAV-BATH B	100 00						
	BACKSPLASH-KIT/2 BATHS	120.00					1	
	SPICE RACK	30.00						
	CENTER SHELF IN KIT.BASE CABINET OVER REFRIG.							
		75.00						
	CABINET OVER W/D AREA	75.00						
	TUB SURROUND ON STD.TUBS ONE PIECE FIBERGLASS TUB/	135.00						
	SHOWER-BATH A	10000						
2	PORCELAIN LAVATORIES	70.00						
2	TOWEL BARS/PAPER HOLDERS	/0.00						
1	WHOLE HOUSE INSIDE WATER	35.00						
	SHUTOFF							
1	BASEBOARD REGISTERS IN							
	LIVING AREAS							
1	AC READY W/30 AMP	65.00						
	16" OC FLOOR JOIST							
1	POWER RANGE HOOD							
1	APPL PKG.STD. #1 (WHITE)	970.00					ļ	
	THIS PACKAGE INCLUDES:						l l	
1	20'DLX REFR.W/ICE MAKER							
1	DELUXE RANGE - ELECT*							
	DISHWASHER INSTALLED	9						
	GARBAGE DISPOSAL INSTD.							
니 기	OMIT SHOWER-BATH B-REPLAC						1	
	W/LINEN CABINET WITH							
	INTERIOR DOOR	50.00						
_	INSTALL INTERIOR DOOR BATH B TO BONUS ROOM	And the second se						
	SWING INTO BONUS ROOM	Joine and	1					
1	OMIT DOOR FROM MBR BONUS	-25.00]				
1	ROOM-BUILD AS JUST DOOR							
	OPENING FOR DOUBLE DOOR							
1	OPTION UTILITY ROOM							
	WINDOW OVER SINK-TO BE	1						
-	SINGLE HUNG WINDOWS							
1	6 DOOR PANTRY-OPTIONAL	165.00						
	UTIL.ROOM (MERRITT OAK)]		<u> </u>				
[[l l	
			1		_	_		
		<u> </u>	<u> </u>	<u>Subtotal</u>	for PAG	E 2	1,730.00	

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ORIGINAL INVOICE

CERTIFICATIONS

As evidenced by the HUD Certification Label number(s) shown on the front of this invoice, the manufacturer certifies to the best of the manufacturer's knowledge and belief that this manufactured home has been inspected in accordance with the requirements of the Department of Housing and Urban Development and is constructed in conformance with the Federal Mobile Home Construction and Safety Standards in effect on the date of manufacture.

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Signature of Authorized Manufacturer Representative

Case No(s)_/ Date.