


|   |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|---|--|-----------|-----------------|--------------|--|--|--|-------|------|---------|----------------------------|--|--|-----|---|--------|--|--|--|--|--|-----------------|--|--|--|--|--|--------|--|--|--|--|--|------------------|--|--|--|--|--|---------------|--|--|--|--|--|----------------|--|--|--|--|--|-----------|--|--|--|--|--|----------------|--|--|--|--|--|-------|--|--|--|--|--|----------------|--|--|--|--|--|------------|--|--|--|--|--|------------------|--|--|--|--|--|------|--|--|--|--|--|-----------------|--|--|--|--|--|--------|--|--|--|--|--|------------------|
| <p><b>PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:</b></p> <p>I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL WILL EXCEED \$100.</p> <p><input type="checkbox"/> I REQUEST A WRITTEN ESTIMATE.</p> <p><input type="checkbox"/> I DO NOT REQUEST A WRITTEN ESTIMATE.</p> <p><b>X</b> I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED <b>\$0.00</b>. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.</p> <p>SIGNED: _____ DATE: 02/01/2019</p>   |  |           |                 |              | <div><div><b>GUANE GAS STATION</b><br/>GENERAL MECHANIC<br/>1201 NW 7 ST, MIAMI, FL, 33125<br/>Phs: 786-253-0646<br/>MVR: 07110 MV-47286 INVOICE: 3036</div><div>month/mile warranty on all parts.</div></div> |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | Intended Payment Method:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | cash   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | Date: 11/15/2018 Time: 7:10 pm   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | Proposed Completion Date:  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Name: SESAR   |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Address:  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| City:   |  | State: FL |                 | Zip:         |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Other Authorized Person:  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Year/Make: 2005 CHEVROLET   |  |           | Model: SIVERADO | Tag:         |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| VIN#:   |  |           |                 | Miles In: 0  |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 | Miles Out: 0 |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Save Old Parts: no (Core may apply)   |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Complaint/Problem:  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Labor charges based on:<br>hourly rate  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| Estimate/diagnostic fee:<br>/ Or hourly at <b>\$ 0.00</b> Per hour  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| A storage fee of \$ <b>25</b> per day may be applied to vehicles which are not claimed within 3 working days  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| <table><tr><td colspan="3">Description of Repairs (invoice)</td><td>Labor</td><td>Time</td><td>Charges</td></tr><tr><td colspan="3">REPLACE PUMP POWER STEERIG</td><td>150</td><td>1</td><td>PARTS:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 58.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>LABOR:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 150.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>SUBLET/OTHER:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 0.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>SUPPLIES:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 0.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>FEES:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 0.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>SUB-TOTAL:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 208.00</b></td></tr><tr><td colspan="3"></td><td></td><td></td><td>TAX:</td></tr><tr><td colspan="3"></td><td></td><td></td><td><b>\$ 14.56</b></td></tr><tr><td colspan="3"></td><td colspan="2"></td><td>TOTAL:</td></tr><tr><td colspan="3"></td><td colspan="2"></td><td><b>\$ 222.56</b></td></tr></table> |  |           |                 |              | Description of Repairs (invoice)   |  |  | Labor | Time | Charges | REPLACE PUMP POWER STEERIG |  |  | 150 | 1 | PARTS: |  |  |  |  |  | <b>\$ 58.00</b> |  |  |  |  |  | LABOR: |  |  |  |  |  | <b>\$ 150.00</b> |  |  |  |  |  | SUBLET/OTHER: |  |  |  |  |  | <b>\$ 0.00</b> |  |  |  |  |  | SUPPLIES: |  |  |  |  |  | <b>\$ 0.00</b> |  |  |  |  |  | FEES: |  |  |  |  |  | <b>\$ 0.00</b> |  |  |  |  |  | SUB-TOTAL: |  |  |  |  |  | <b>\$ 208.00</b> |  |  |  |  |  | TAX: |  |  |  |  |  | <b>\$ 14.56</b> |  |  |  |  |  | TOTAL: |  |  |  |  |  | <b>\$ 222.56</b> |
| Description of Repairs (invoice)  |  |           | Labor           | Time         | Charges  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| REPLACE PUMP POWER STEERIG  |  |           | 150             | 1            | PARTS:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 58.00</b>  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | LABOR:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 150.00</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | SUBLET/OTHER:  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 0.00</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | SUPPLIES:  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 0.00</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | FEES:  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 0.00</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | SUB-TOTAL:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 208.00</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | TAX:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 14.56</b>  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | TOTAL:   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
|   |  |           |                 |              | <b>\$ 222.56</b>   |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |
| <p>Estimate good for 30 days. Not responsible for damage caused by theft, fire or acts of nature. I hereby authorize the above repairs, including sublet work, along with the necessary materials. You and your employees may operate my vehicle for the purpose of testing, inspection and delivery at my risk. If I cancel repairs prior to their completion for any reason, a tear down and reassembly fee of <b>\$ 0</b> will be applied.</p> <div></div> <p>SIGNED: _____ DATE: 02/01/2019</p>  |  |           |                 |              |  |  |  |       |      |         |                            |  |  |     |   |        |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |  |  |  |  |  |               |  |  |  |  |  |                |  |  |  |  |  |           |  |  |  |  |  |                |  |  |  |  |  |       |  |  |  |  |  |                |  |  |  |  |  |            |  |  |  |  |  |                  |  |  |  |  |  |      |  |  |  |  |  |                 |  |  |  |  |  |        |  |  |  |  |  |                  |