

TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE March / 03 / 2026
MONTH DAY YEAR

FINISH DATE _____ / _____ / 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
Serial/VIN: _____ Machine Hrs: 19,394 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
Job/Repair Site: Greasing Lease Season: Winter Summer

WORK DESCRIPTION

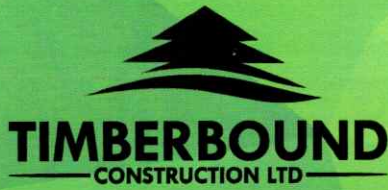
- Changed Oil Cooler Rod

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: [Signature] Supervisor: _____



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START DATE	Feb	/	25	/	20	26	FINISH DATE	_____	/	_____	/	20	_____
	MONTH		DAY		YEAR			MONTH		DAY		YEAR	

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 19,310 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
 Job/Repair Site: Greasing Leart Season: Winter Summer

WORK DESCRIPTION

- Oil Change

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: *Thomas* Supervisor: _____



Wajax Limited
17604 105 Avenue NW
Edmonton AB T5S 1G4

ORDER CONFIRMATION

TG0 3101049245

1 (1)

Order Date	Your order number	Reference	Salesperson
23/Jan/2026	P08		HOUSE

Payer C161191

Invoice address

TIMBERBOUND CONSTRUCTION LTD.
PO BOX 610
LA CRETE AB T0H 2H0

Contact

Phone

E-mail

Customer C161191

Delivery Address

TIMBERBOUND CONSTRUCTION LTD.
PO BOX 610
LA CRETE AB T0H 2H0

Entered by Josh Croker

Phone 780-483-6641

E-mail JCroker@Wajax.com

Delivery method	Delivery Terms	Payment Terms
LA CRETE TRANSPORT	None LAC TO LAC	Net 30 days

Special Instructions	LAC TO LAC
----------------------	------------

ATTN FRED

Lines	Item / Description	Qty	B/O Qty	U/M	Delivery date	Unit price	Amount
10	AG073 Ext Item No AG073 TCT CONTROLLER,IQAN,MC43	1.00	0.00	EA	23/Jan/2026	2,579.95	2,579.95
20	44551B Ext Item No 44551B TCT TUBE,COOLER INLET RH	1.00	0.00	EA	23/Jan/2026	193.93	193.93

Order total 2,773.88
GST/HST (%) 5.00 138.69
Tax total 138.69
Total CAD 2,912.57

P08

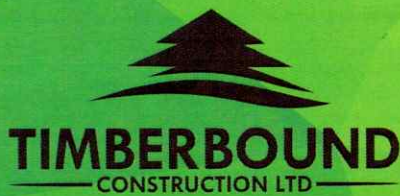
Remit To WAJAX LIMITED
C25067C/U
PO BOX 2521, STATION M
CALGARY AB T2P 0T6
accounts.receivable@wajax.com

Terms and Conditions: Wajax's Standard Terms and Conditions of Sale (including its standard Products and Services Warranties), which are publicly available online at <https://www.wajax.com/terms-conditions/>, form an integral part of this agreement and are hereby incorporated herein by reference. By signing or otherwise accepting this document, Customer acknowledges having read and accepts Wajax's Standard Terms and Conditions of Sale.

GST/HST 105570915RT0002
QST 1012792138TQ0002

494886033252332721 OIS606PF M3 PRD 100WLT

Printed on: 23/Jan/2026 15:32:15 MST



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START DATE	<u>11</u> / <u>24</u> / <u>2025</u>	FINISH DATE	<u>11</u> / <u>24</u> / <u>2025</u>
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 18676 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John Peters/Karl Z Helper(s): Sam K
 Job/Repair Site: Grazing lease Season: Winter Summer

WORK DESCRIPTION

- Set up stick, Boom speeds
- Diagnose feed wheel reverse slower than fwd. 160 RPM Rev 213 FWD
- Replace Rev shock valve.
- Replace diameter in-coder

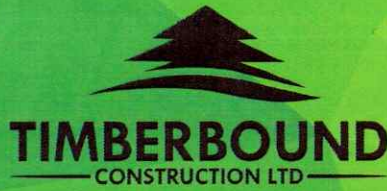
Note: MC 43-3 pump controller no contact at times

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	Nov	/	25	/	20	25	FINISH DATE	Nov	/	25	/	20	25
	MONTH		DAY		YEAR			MONTH		DAY		YEAR	

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: 855 eTigercat Processor Year: 2018
 Serial/VIN: 85533163 Machine Hrs: _____ Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Gary Helper(s): _____
 Job/Repair Site: 58 Junc. Grazing Lease Season: Winter Summer

WORK DESCRIPTION

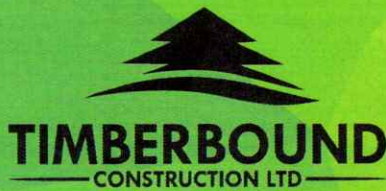
Engine oil change

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	Sep / 29 / 2025	FINISH DATE	Sep / 29 / 2025
	MONTH / DAY / YEAR		MONTH / DAY / YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 18313 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Abram Driedger Helper(s): _____
 Job/Repair Site: 58 junction Season: Winter Summer

WORK DESCRIPTION

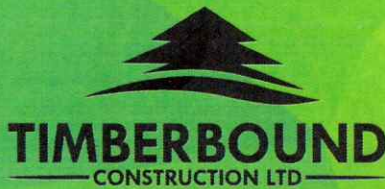
- Replaced Valve section on RHS valve Bank for Feed Arm. cylinder
- Replaced RHS Feed Arm cylinder

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	Aug / 7 / 2025	FINISH DATE	Aug / 15 / 2025
	MONTH / DAY / YEAR		MONTH / DAY / YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 E Processor Year: _____
 Serial/VIN: 85533163 Machine Hrs: 18258 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John P. Helper(s): _____
 Job/Repair Site: High Level shop Season: Winter Summer

WORK DESCRIPTION

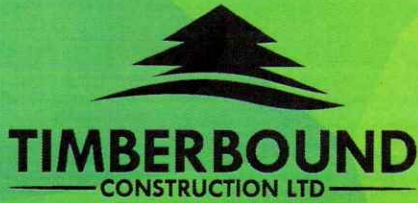
- Diagnose LS Pressure problem. Machine idle 4200 psi
Cup off every valve section
- Found swing priority valve shot. Install valve section
Set pressures on L swing motor 5000 psi, R side
to 4900 psi
- Set up swing speed 8.5 sec per 1 round.
- To use swing valve section without priority valve
Remove swing spool plugs, remove plug on compensator
valve, remove small spacer inside / reassemble.

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	_____ / _____ / 20____	FINISH DATE	March / 14 / 2025
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
Serial/VIN: _____ Machine Hrs: 17,875 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

- Oil Change
- New Left Joysticks plastic

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____

KUBOTA FARM
10821-92 ST, BOX 65
LA CRETE, AB T0H2H0
Tel: 780-928-3268

PT NO: 23820

P I C K I N G T I C K E T
03/05/2025 at 09:43 AM

Page 1

SOLD TO:
TIMBERBOUND CONSTRUCTION
BOX 610
LA CRETE, AB T0H2H0
(780)928-3280

T/S: CASH
RO#:
CUST#: 83280
SLSMN: KW
PO#: P08

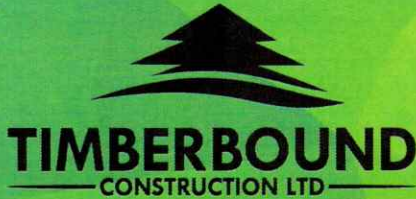
SHIP TO:

PICKING TICKET DATE: 03/05/2025

ORDERED	B/O	SHIP	PART NUMBER	DESCRIPTION	BIN LOCATION	PRICE
1.00	0.00	1.00	WA133950	SPROCKET K	CAB1-6-2	621.35
MAIN SAW SPROCKET KIT 3/4 623C						

JOHN PETERS - DELIVER TO SHOP

TAXABLE	621.35
NONTAXABLE	0.00
NONTAX LABOR	0.00
TAXABLE LABOR	0.00
GST	31.07
SALES TAX	31.07
** TOTAL **	652.42



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START DATE _____ / _____ / 20____ | **FINISH DATE** Feb / 28 / 2025
MONTH DAY YEAR MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
Serial/VIN: _____ Machine Hrs: 17,659 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Devin Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

- Head Turn Bearing
- New Pinion + Housing

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____

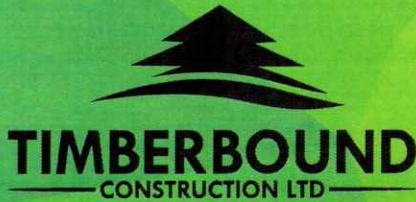
Feb 28 25

17,200
822
822

303

Went to
T. J. ...

New Division & ...
... from ...



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larryw@timberbound.ca

START DATE _____ / _____ / 20____ <small>MONTH DAY YEAR</small>	FINISH DATE <u>Feb</u> / <u>26</u> / 20 <u>25</u> <small>MONTH DAY YEAR</small>
---	---

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: 855 Processor Year: _____
Serial/VIN: _____ Machine Hrs: 17,603 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Devin Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

- Head Turn Bearing
- Head Turn Motor to Complete
- 2 New Head Turn Hoses

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

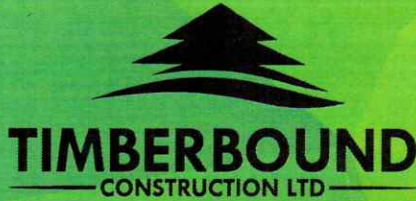
Mechanic _____ Supervisor _____

26 25 24

808 822 822 803

Watt 4
Thomas
Bain

- New head turn floor
- head turn motor & complete
- head turn bearing



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START DATE	____ / ____ / 20____	FINISH DATE	02 / 24 / 2025
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: 908 Machine Make/Model: _____ Year: _____
Serial/VIN: _____ Machine Hrs: 17560 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Mark P Helper(s): _____
Job/Repair Site: Watt U Season: Winter Summer

WORK DESCRIPTION

- oil change

COMPLETION CHECKLIST

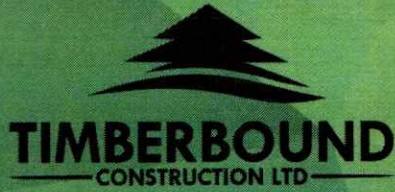
- Engine Oil Filter Check Change
- Engine Oil Check Change
- Transmission Filters Check Change
- Transmission Strainer Check Change
- Transmission Oil Check Change
- Air Filter Check Change

- Antifreeze Check Change
- Antifreeze Filter Check Change
- Fuel Filter Check Change
- Fuel Tank Sump Check Change
- Hydraulic Oil Filter Check Change
- Hydraulic Oil Check Change

- Grease Machine Check Completed
- Lights Check Change
- Hub Oil Check Change
- Final Drive Oil Check Change
- Differential Oil Check Change
- _____ Check Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	_____ / _____ / 20	FINISH DATE	Jan	28	25
	MONTH DAY YEAR		MONTH	DAY	YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 17,148 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
 Job/Repair Site: WATT 4 Season: Winter Summer

WORK DESCRIPTION

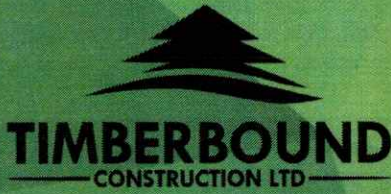
- Left ~~Grub~~ pin
 - Measuring Wheel Bearings

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE	____ / ____ / 20____	FINISH DATE	Feb / 13 / 2025
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Processor Year: _____
Serial/VIN: _____ Machine Hrs: 17,212 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Andrew Thomas Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

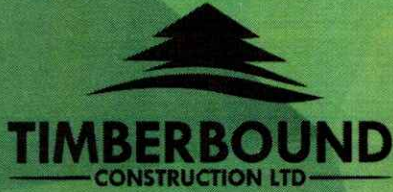
- Hydraulic Rod
- 3 New Lights

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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 larryw@timberbound.ca

START DATE	_____ / _____ / 20_____	FINISH DATE	Feb / 5 / 2025
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: ~~P08~~ P08 Machine Make/Model: 855E Tigercat Year: _____
 Serial/VIN: _____ Machine Hrs: 17275 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John Peters Helper(s): _____
 Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

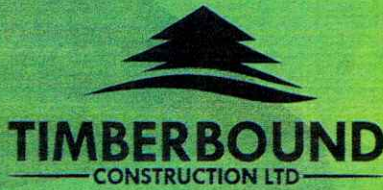
- Replace R side (Big) Feed wheel motor
- change pilot line

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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 larryw@timberbound.ca

START DATE _____ / _____ / 20____ <small>MONTH DAY YEAR</small>	FINISH DATE Jan / 22 / 2025 <small>MONTH DAY YEAR</small>
--	--

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 17067 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John P, Thomas P. Helper(s): _____
 Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

- change alternator 110 AMP
- Replace grabarm seal kit
- Replace grabarm close shock valve 210 BAR
- change grate pressure for Delimb and feed arm pressure

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

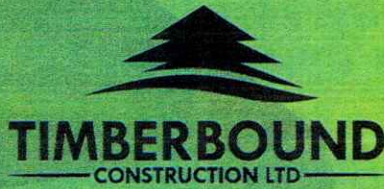
Mechanic: _____ Supervisor: _____

you see not

you were given
back

of course, I would
be able to

of course, I would be able to
of course, I would be able to
of course, I would be able to
of course, I would be able to
of course, I would be able to



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 GST#: 105285811
 larryw@timberbound.ca

START DATE: Jan / 16 / 20 25 | FINISH DATE: Jan / 16 / 20 25
MONTH DAY YEAR MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Tigercat Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 16967.7 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John P. Helper(s): Sam K
 Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

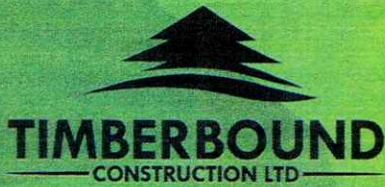
- change complete find end unit
 - set up settings in sensor.

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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 GST#: 105285811
 larryw@timberbound.ca

START DATE	_____ / _____ / 20	FINISH DATE	Jan	13	25
	MONTH DAY YEAR		MONTH DAY YEAR		

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855 Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 16,907 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
 Job/Repair Site: Rain Bow Lake Season: Winter Summer

WORK DESCRIPTION

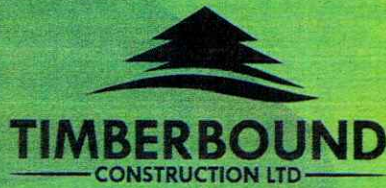
- Oil Change

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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GST#: 105285811
larryw@timberbound.ca

START DATE

Dec / 12 / 20 24
MONTH DAY YEAR

FINISH DATE

Dec / 12 / 20 24
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Tigercat 855E Processor Year: _____
Serial/VIN: _____ Machine Hrs: 16633 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: John Peters Helper(s): _____
Job/Repair Site: Rainbow Lake Season: Winter Summer

WORK DESCRIPTION

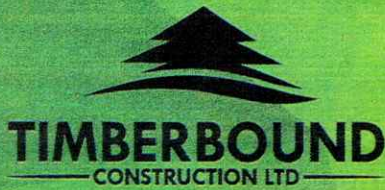
Replace Tilt cylinder Rod

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: John Peters Supervisor: _____



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 GST#: 105285811
 larryw@timberbound.ca

START DATE	Nov	/	19	/	20	24	FINISH DATE	_____	/	_____	/	20	_____
	MONTH		DAY		YEAR			MONTH		DAY		YEAR	

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 16,270 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Mark Thomas Helper(s): ~~16,270~~
 Job/Repair Site: Rainbow Lake Season: Winter Summer

WORK DESCRIPTION

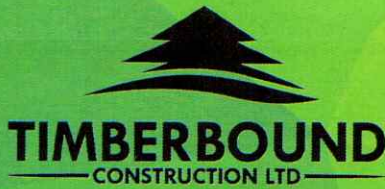
- Oil Change
- Top saw Arm
- Top saw 3/8 Bolt
- Yellow Blocks Stoppers x2
- Feed Wheel Stoppers x2
- Fixed Oil Leak

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	_____ <input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
 Phone: 780.928.3280 | Fax: 780.928.3291
 GST#: 105285811
 larryw@timberbound.ca

START DATE	July / 11 / 2024	FINISH DATE	Aug / 05 / 2024
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Processor Year: 2018
 Serial/VIN: 85532163 Machine Hrs: 15,972 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
 Job/Repair Site: La Crete Shop Season: Winter Summer

WORK DESCRIPTION

- Checked Pro Heat
- New Door Window
- New Main saw plunger orings
- Fish Plate Feed Arms
- Replaced Worn Hoses
- Replaced Bushings in head Holder
- New Center feed wheel
- Resealed feed wheel and Head tilt cylinders
- New feed wheel main Pins/Bushings
- Resealed both Joysticks
- Changed Measuring Wheel Bearings
- New Main Head Pin + Bushings
- Welded Cracks
- Changed one Roller Greased The Rest
- Set UP Pressures + Track speed
- New Left Center Feed Wheel Motor
- Resealed Main saw cylinder

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input checked="" type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Swing Drive <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

July	/	11	/	20	24	Aug	/	05	/	20	24
MONTH		DAY		YEAR		MONTH		DAY		YEAR	
START DATE						FINISH DATE					

Unit #: P08 Machine Make/Model: H855 E Processor Year: 2018
 Serial/VIN: 85533163 Machine Hrs: 15,972 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
 Job/Repair Site: La Crete Shop Season: Winter Summer

WHAT ARE YOU LOOKING AT?	WHAT TO LOOK FOR	COMMENTS
<input type="checkbox"/> Grapple	Excessive wear or damage, leaks	
<input checked="" type="checkbox"/> Implement Cylinders	Excessive wear or damage, leaks	
<input checked="" type="checkbox"/> Underneath of Machine	Final drive leaks, damage	
<input checked="" type="checkbox"/> Overall Undercarriage	Overall undercarriage	
<input checked="" type="checkbox"/> Idlers & Rollers	Leaks, damage, wear	
<input checked="" type="checkbox"/> Drive Sprockets	Wear, damage, loose bolts	
<input checked="" type="checkbox"/> Track Assembly	Tightness, damage, bent or broken shoes	
<input checked="" type="checkbox"/> Swing Bearing	Damage, loose or missing bolts	
<input checked="" type="checkbox"/> Underneath of Machine	Final drive leaks, damage	
<input checked="" type="checkbox"/> Steps and Handrails	Condition and cleanliness	
<input checked="" type="checkbox"/> Engine Oil	Fluid level	
<input checked="" type="checkbox"/> Engine Coolant	Fluid level	
<input checked="" type="checkbox"/> Swing Drives	Fluid level	
<input type="checkbox"/> Transmission Oil	Fluid level	
<input checked="" type="checkbox"/> Air Filter	Restriction	
<input type="checkbox"/> Transmission Filter	Leaks	
<input checked="" type="checkbox"/> Radiator	Fin blockage, leaks	
<input checked="" type="checkbox"/> All Hoses	Cracks, wear spots, leaks	
<input checked="" type="checkbox"/> All Belts	Tightness, wear, cracks	
<input checked="" type="checkbox"/> Fuel Tank	Damage, leaks	
<input checked="" type="checkbox"/> Hydraulic Oil Tank	Fluid level, damage, leaks	
<input checked="" type="checkbox"/> Fire Extinguisher	No damage	
<input checked="" type="checkbox"/> First Aid Kit	Available	
<input checked="" type="checkbox"/> Windshield	Damage	
<input checked="" type="checkbox"/> Batteries & Hold Downs	Cleanliness, loose bolts & nuts	
<input checked="" type="checkbox"/> Falling Object Guard	Damage	
<input checked="" type="checkbox"/> Seat Belt	Damage, wear, adjustment	
<input checked="" type="checkbox"/> Horn	Proper function	
<input checked="" type="checkbox"/> Lights	Proper function, broken lenses	
<input checked="" type="checkbox"/> Backup Alarm	Proper function	
<input checked="" type="checkbox"/> Overall Cab Interior	Cleanliness	
<input checked="" type="checkbox"/> Two Way Radio	Working properly, antenna	
<input checked="" type="checkbox"/> Pin & Bushings	Excessive wear	
<input checked="" type="checkbox"/> Belt Idlers/Tensioners	Dry bearings, loose	
<input checked="" type="checkbox"/> Joystick	Loose, worn buttons, leaks	
<input checked="" type="checkbox"/> AM/FM Radio	Proper function	
<input checked="" type="checkbox"/> Foot Pedals	Loose, out of adjustment	
<input type="checkbox"/> Saw Blade	Loose, cracked/worn teeth	
<input checked="" type="checkbox"/> Boom/Stick/Head	Cracks	



Kubota Farm and Ranch

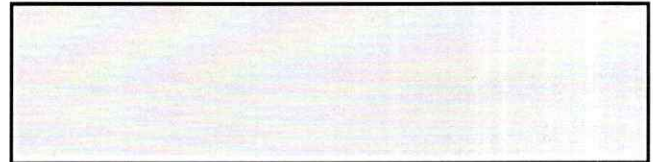
Box 65, 10821-92 ST.
 La Crete, AB. T0H 2H0
 Phone: 780-928-3268 Fax: 780-928-9574
 e-mail: office.kfr2017@gmail.com



SOLD TO

TIMBERBOUND CONSTRUCTION
 BOX 610
 LA CRETE AB T0H 2H0

PAGE 1		
CASH	CHG.	F.P.
	X	
ACCT. NO. 83280		



SALESMAN JJG	PURCHASE ORDER NO. P08	R.O. NO.	P.T. NO. 20510	INVOICE DATE 07/22/2024	TIME 11:57 AM	INVOICE NO. REPRINT 16676U
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QUANTITIES			PART NUMBER	DESCRIPTION	VENDOR BIN LOC.	PRICES		
ORDERED	B/O	SHIPPED						
2		2	PN343743	PIN PIN - HTH623C FEED ARM	F-11	371.17	371.17	742.34
1		1	WA114120	PIN PICKED UP BY GARY FROSE	SO	385.47	385.47	385.47
CHARGE			83280					1184.20

THANK YOU FOR YOUR BUSINESS QUOTES ONLY VALID FOR 30 DAYS!
 GST#: 711732610RT0001 GST Total: 56.39 PST Total: 0.00

SHIP VIA	DESCRIPTION	ACCOUNT	AMOUNT
To Help us serve you better we ask you observe the following: 1. Title of goods remains with Kubota Farm & Ranch until fully paid for. 2. Proof of purchase must accompany all warranty claims. 3. Terms: Net 30 days. 4. Overdue amounts will be charged 2 % per month (24% per annum) 5. NFS cheques will be charged \$25.00 per cheque. Signature: _____	PARTS		
	TAXABLE		1127.81
	FREIGHT		
	SALES TAX		56.39
	PLEASE PAY THIS TOTAL		

kubota_invoice.template

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FILE



Brandt Tractor Ltd.
7301 102nd St.
Clairmont, AB
T8X 5A7
(780)532-3414

Parts
Invoice



JOHN DEERE

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TIMBERBOUND CONSTRUCTIO
P.O. BOX 610
EM INVOICES
LACRETE, AB T0H 2H0

PAGE		
1		
CASH	CHG.	OTHER
	X	
ACCOUNT NO.		
79283280		

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TIMBERBOUND CONSTRUCTIO
ATTN: FRED
780-285-1262
LACRETE AB CA

SALESMAN	ORDER NO.	RO. NO.	PHONE	INVOICE DATE	TIME	INVOICE NO.
748	PV02	01291976	780-928-3280	22JUL24	10:38	07 4792703

QUANTITIES				PART NUMBER	DESCRIPTION	BIN	PRICES			OFFICE USE	
ORDERED	SHIPPED	B/O	✓				LIST	NET	EXTENSIONS		
				MAKE: WARAT MODEL:	SERNO:				HRS:		
	1			N WA103149	GASKEY	F09043	5.83	5.83	5.83	PC	
	3			N WA128340	SPACEXY	F01V4F	19.78	19.78	59.34	PC	
	3			N WA128340	SPACEXY	F01V4F	19.78	19.78	59.34	PC	
	4			N WA114254	BUSHICY		97.05	97.05	388.20	PC	
	2			N F350432	SPACEXY		14.36	14.36	28.72	PC	
	3			N F350104	BUFFEXY	F01V10	61.22	61.22	183.66	PC	
	2			N F350496	BUSHIXY		510.08	510.08	1020.16	PC	
				BACK 6 CT							
				Tax ID:							
				* HOURS: MON-THUR 7AM-10:30PM FRI 7AM-6PM SAT 8AM-4PM *							
				***** 24 HOUR ON CALL PARTS & SERVICE *****							
				***** ALL OPENED ELECTRICAL IS NON RETURNABLE *****							
				* RESTOCKING FEE'S: 25% TO A MAX OF \$5000 PER LINE *							
				** AS OF DECEMBER 1ST, 2023 ON ALL SPECIAL ORDERS **							
				** ALL FABRICATED HYDRAULIC HOSE SALES ARE FINAL **							

				GST No. 899544779							
				* TOTAL GST/HST *							87.27

QST # 1226957240		LACRETE COMPLETE		DESCRIPTION	ACCOUNT	AMOUNT
TERMS: NET 30 DAYS FROM DATE OF INVOICE		SHIP VIA		PARTS TAXABLE		
NO GOODS CAN BE RETURNED WITHOUT OUR PERMISSION. GOODS RETURNED BY PERMISSION WHICH WERE FURNISHED CORRECTLY ACCORDING TO ORDER ARE SUBJECT TO A HANDLING CHARGE. NO CLAIMS ON THIS INVOICE WILL BE CONSIDERED AFTER 30 DAYS OF RECEIPT OF GOODS.		TITLES TO ALL ITEMS REMAIN WITH BRANDT TRACTOR LTD. UNTIL PURCHASE PRICE, INTEREST AND OTHER CHARGES ARE FULLY PAID.		PARTS NONTAXBLE		1745.25
PAST DUE INTEREST 1 1/2% PER MONTH (18% ANNUM). MINIMUM CHARGE OF \$1.50				MISC TAXABLE		
				MISC NONTAXABLE		
SIGNATURE _____		DATE _____		SALES TAX		
					PLEASE PAY THIS TOTAL	1832.52

PACKING SLIP



Brandt Tractor Ltd.
7301 102nd St.
Clairmont, AB
T8X 5A7
(780)532-3414

Parts
Invoice



S
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D
T
O

TIMBERBOUND CONSTRUCTIO
P.O. BOX 610
EM INVOICES
LACRETE AB T0H 2H0 CA

PAGE		
1		
CASH	CHG.	OTHER
	X	
ACCOUNT NO.		
79283280		

S
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O

TIMBERBOUND CONSTRUCTIO
FRED
780-285-1262
LACRETE AB

SALESMAN	ORDER NO.	RO. NO.	PHONE	INVOICE DATE	TIME	INVOICE NO.
707	P08	01292336	780-928-3280	19JUL24	15:21	07 4792660

QUANTITIES				PART NUMBER	DESCRIPTION	BIN	PRICES			OFFICE USE
ORDERED	SHIPPED	B/O	✓				LIST	NET	EXTENSIONS	
	1			MAKE: JD MODEL: SERNO: WA114290 H623C F09012		1972.27	1972.27	1972.27	PC	
Tax ID: * HOURS: MON-THUR 7AM-10:30PM FRI 7AM-6PM SAT 8AM-4PM * ***** 24 HOUR ON CALL PARTS & SERVICE ***** ***** ALL OPENED ELECTRICAL IS NON RETURNABLE ***** * RESTOCKING FEE'S: 25% TO A MAX OF \$5000 PER LINE * ** AS OF DECEMBER 1ST, 2023 ON ALL SPECIAL ORDERS ** ** ALL FABRICATED HYDRAULIC HOSE SALES ARE FINAL ** *****										
				GST No. 899544779						
				* TOTAL GST/HST *						98.61

QST # 1226957240		LACRETE	DESCRIPTION	ACCOUNT	AMOUNT
TERMS: NET 30 DAYS FROM DATE OF INVOICE		SHIP VIA	PARTS TAXABLE		
NO GOODS CAN BE RETURNED WITHOUT OUR PERMISSION. GOODS RETURNED BY PERMISSION WHICH WERE FURNISHED CORRECTLY ACCORDING TO ORDER ARE SUBJECT TO A HANDLING CHARGE. NO CLAIMS ON THIS INVOICE WILL BE CONSIDERED AFTER 30 DAYS OF RECEIPT OF GOODS.		TITLES TO ALL ITEMS REMAIN WITH BRANDT TRACTOR LTD. UNTIL PURCHASE PRICE, INTEREST AND OTHER CHARGES ARE FULLY PAID.	PARTS NONTAXABLE		1972.27
PAST DUE INTEREST 1 1/2% PER MONTH (18% ANNUM). MINIMUM CHARGE OF \$1.50			MISC TAXABLE		
SIGNATURE _____		DATE _____	MISC NONTAXABLE		
			SALES TAX		
PLEASE PAY THIS TOTAL ▶					2070.88

PACKING SLIP



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE: MONTH / DAY / YEAR (7/20)
FINISH DATE: May / 16 / 2018

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Tigercat Year: 2018
Serial/VIN: Machine Hrs: 5733 Kms:

ADDITIONAL INFORMATION

Name of Mechanic: Andrew Helper(s):
Job/Repair Site: Chin East Sat yard Season: Winter Summer

WORK DESCRIPTION

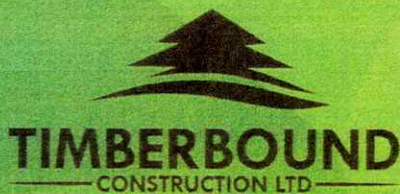
- engine oil change

COMPLETION CHECKLIST

- Engine Oil Filter [] Check [X] Change
Antifreeze [] Check [] Change
Grease Machine [] Check [] Completed
Engine Oil [] Check [X] Change
Antifreeze Filter [] Check [] Change
Lights [] Check [] Change
Transmission Filters [] Check [] Change
Fuel Filter [] Check [] Change
Hub Oil [] Check [] Change
Transmission Strainer [] Check [] Change
Fuel Tank Sump [] Check [] Change
Final Drive Oil [] Check [] Change
Transmission Oil [] Check [] Change
Hydraulic Oil Filter [] Check [] Change
Differential Oil [] Check [] Change
Air Filter [] Check [X] Change
Hydraulic Oil [] Check [] Change

SIGNATURES

Mechanic: Supervisor:



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE MONTH: <u>March</u> DAY: <u>27</u> YEAR: <u>2024</u>	FINISH DATE MONTH: <u>March</u> DAY: <u>27</u> YEAR: <u>2024</u>
---	--

MACHINE DETAILS

Unit #: P 08 Machine Make/Model: 855E Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 15440 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

- Oil Change
- Air Filter
- Fix Diameter

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: [Signature] Supervisor: _____



TIMBERBOUND
CONSTRUCTION LTD

TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE	Mar	/	8	/	20	24	FINISH DATE	Mar	/	8	/	20	24
	MONTH		DAY		YEAR			MONTH		DAY		YEAR	

MACHINE DETAILS

Unit #: Pod Machine Make/Model: Processor tigercat Year: _____
 Serial/VIN: _____ Machine Hrs: 15,156 hrs Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
 Job/Repair Site: _____ Season: Winter Summer

WORK DESCRIPTION

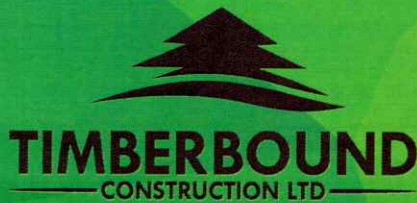
oil change
air filter
blow off

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE Feb / 20 / 2024
MONTH DAY YEAR

FINISH DATE Feb / 20 / 2024
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
Serial/VIN: _____ Machine Hrs: 14,849hrs Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
Job/Repair Site: Road Season: Winter Summer

WORK DESCRIPTION

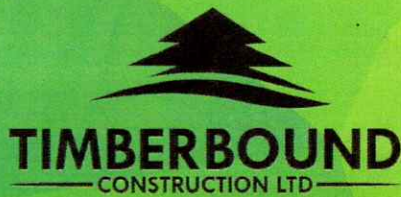
Oil change
air filter
blow out

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE

____ / ____ / 20____
MONTH DAY YEAR

FINISH DATE

Jan / 31 / 2024
MONTH DAY YEAR

MACHINE DETAILS

Unit #: POS Machine Make/Model: 855E Tigercat Year: 2018

Serial/VIN: _____ Machine Hrs: 14527 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Andrew Helper(s): _____

Job/Repair Site: Rainbow Lake Season: Winter Summer

WORK DESCRIPTION

- engine oil change
- blow off engine

COMPLETION CHECKLIST

- | | | |
|---|--|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____

TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3260 ; Fax: 780.928.3291
GST#: 105265811
larry@timberbound.ca

START DATE

Dec 14 2023
MONTH DAY YEAR

FINISH DATE

Dec 14 2023
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Processor Year: 2018

Serial/VIN: _____ Machine Hrs: 13887 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Thomas Peters Helper(s): _____

Job/Repair Site: Rainbow Lake Season: Winter Summer

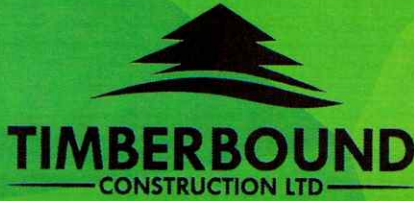
WORK DESCRIPTION

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
 Phone: 780.928.3280 | Fax: 780.928.3291
 GST#: 105285811
 larryw@timberbound.ca

START DATE	09	/	29	/	2023	FINISH DATE	10	/	09	/	2023
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: Processor H855E Year: 2018
 Serial/VIN: 85533163 Machine Hrs: 13062 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): Thomas
 Job/Repair Site: La Crete Shop Season: Winter Summer

WORK DESCRIPTION

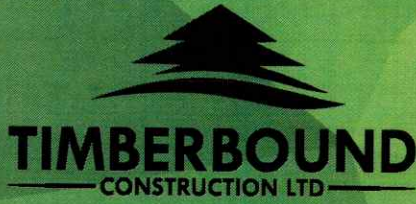
- Pro heat water pump
- ~~Also replaced~~ Changed 5 rollers (used)
- New pins + Bushings in groborm cylinder + connecting link
- New Left main feedwheel pin
- Replaced worn hoses
- Weld stoppers + cracks
- New measuring wheel + Bearings
- Clean cab
- New computer cord
- New Cab module
- Reseal Left joystick
- New Left feedwheel motor

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input checked="" type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE

March / 13 / 2023
MONTH DAY YEAR

FINISH DATE

March / 13 / 2023
MONTH DAY YEAR

MACHINE DETAILS

Unit #: 008 Machine Make/Model: 855 E tigercat Year: 2018
Serial/VIN: _____ Machine Hrs: 12807 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Andrew Helper(s): _____
Job/Repair Site: F14 Season: Winter Summer

WORK DESCRIPTION

- engine oil change
- blow off engine

COMPLETION CHECKLIST

Engine Oil Filter Check Change
Engine Oil Check Change
Transmission Filters Check Change
Transmission Strainer Check Change
Transmission Oil Check Change
Air Filter Check Change

Antifreeze Check Change
Antifreeze Filter Check Change
Fuel Filter Check Change
Fuel Tank Sump Check Change
Hydraulic Oil Filter Check Change
Hydraulic Oil Check Change

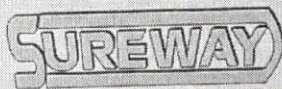
Grease Machine Check Completed
Lights Check Change
Hub Oil Check Change
Final Drive Oil Check Change
Differential Oil Check Change
 Check Change

SIGNATURES

Mechanic _____ Supervisor _____

Work Order

Trunker bound



LOGGING LTD

780-539-0388

6361 Twp 695a Winters Ind Park Lot 1
Box 403
Grovedale, AB T0H 1X0

NAME & MAKE OF MACHINE: HOSSE

UNIT #: TP-08 YEAR: _____

DATE STARTED: 23 / 10 / 27 DATE FINISHED: _____ / _____ / _____
YEAR MONTH DATE YEAR MONTH DATE

NAME OF MECHANIC: Renno / Henry HELPER(S) _____

MACHINE SERIAL #: _____ MACHINE HOURS: 12386

JOB SITE: _____ MACHINE KMS: _____

WORK DESCRIPTION:

LH feed arm tube broke - got millwright to repair
 Install new bushings in RH + LH feed arms
 Replaced measuring wheel bearings
 Resealed grab arm cylinder
 Installed new pins in feed arm cylinders + tie bar
 Braced up RH feed arm.
 Repaired crack on LH middle feed arm with stopper

Mechanic Signature: _____

Supervisor Signature: _____

Work Order

Timber bound.



780-539-0388

6361 Twp 695a Winters Ind Park Lot 1
Box 403
Grovedale, AB T0H 1X0

NAME & MAKE OF MACHINE: H855E

UNIT #: TP-08 YEAR: _____

DATE STARTED: 23 / 01 / 13 DATE FINISHED: _____ / _____ / _____
YEAR MONTH DATE YEAR MONTH DATE

NAME OF MECHANIC: Merno/Henry HELPER(S) _____

MACHINE SERIAL #: _____ MACHINE HOURS: 12361

JOB SITE: _____ MACHINE KMS: _____

WORK DESCRIPTION:

Changed engine
changed fuel filters
changed Hyd filters
Replaced Air intake Elbow

Mechanic Signature: _____

Special Instructions

HOLD FOR PICK UNIT IN GP

TP-08-

Lines	Item / Description	Del qty	U/M	Unit price
1	92403BS02	1	EA	39,889.47
	92403BS02 TCT			*** Core charge not included ***
	Lot/Serial no 2212190000001025			
	KIT.ENGINE.FPT N67 2			
	Client Item No 92403BS02			

Core: 12,734.00

New Engine Ser 1901 #

1998561

Net weight	0.000
Gross weight	0.000
Volume	0.000
No. pkgs	1

Received the above described goods complete and in good condition

Name

Date

Signature



Finning (Canada) a division of Finning International Inc. AG1C0046423488
 7501 90 STREET CLAIRMONT AB T8X 5B1 (730) 831-2600 (730) 552-5252 FAX
 Shipping & sales orders should go to the document to do not include fax, sales, freight, etc.

SHIP TO:
 SUREWAY LOGGING LTD.
 BOX 485
 GROVEDALE AB T0H 1X0

Phone No. 780 926 6551
 Routing AG1CPK
 Freight Charges COLLECT
 Carrier CUSTOMER OR CUSTOMERS
 Make Year
 Model
 Serial Number
 Cust Contact/Your Ref TAM SMITH 780-864-0406
 Customer PO No. TP08
 Delivery Specifications

Delivery No: 83743810
 Customer No: CA-00066338
 Ordered By Nadine King (FIN)
 Order Date 20230104
 Required Date 20230104
 Ship Date 20230109
 Print Date 20230109
 Print Time 01:17 PM

Notes

Bill To
 SUREWAY LOGGING
 BOX 485
 LACRETE AB T0H 2H0

Shipment: 634-5740
 Bill of Lading No. 10000010
 Temp Order Number:

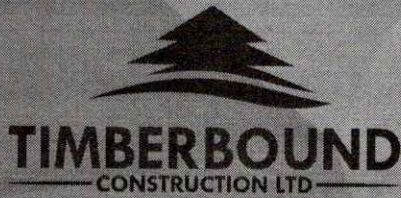
Legal Land Description (LLD Info)

Parts (as hereinafter defined) sold by Finning International Inc. ("Seller") pursuant to this Parts Sales Order are sold subject to the Terms and Conditions appearing on the reverse hereof. Seller's liability under this Parts Sales Order is limited. Please read and understand the Terms and Conditions appearing on the reverse hereof and in particular clauses 13, 14, and 15.

Line	Sub	Ordered Qty	Shipped Qty	B/O Qty	Origin	U/M	Item/Alias No	Description	Unit
1		1	1			PC	320085502/JWA109648	HYDRAULIC MOTOR Package Number: P017805067	
		Packed Qty	1						

WEIGHT (lbs) 125.0
 TOTAL DELIVERED LINES 1

1 Returnable Indicator: R for Returnable
 GST/HST Registration Number: 101801



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE	November	/	16	/	2022	FINISH DATE	Month	/	Day	/	2036
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E Year: 2018
 Serial/VIN: _____ Machine Hrs: 12109 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Menno Helper(s): _____
 Job/Repair Site: GP Season: Winter Summer

WORK DESCRIPTION

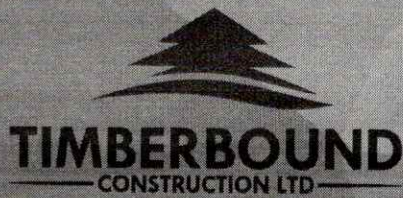
-Service

COMPLETION CHECKLIST

- | | | |
|--|--|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
 Phone: 780.928.3280 | Fax: 780.928.3291
 GST#: 105285811
 larryw@timberbound.ca

START DATE	October	/	26	/	2022	FINISH DATE	Month	/	Day	/	2036
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Year: 2018
 Serial/VIN: _____ Machine Hrs: 11791 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Menno Helper(s): _____
 Job/Repair Site: GP Season: Winter Summer

WORK DESCRIPTION

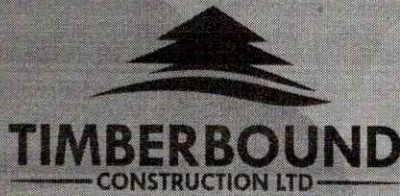
-Replaced Thermostst
-Replace fuel sending unit
-Replaced fuel line part# 213733

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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 GST#: 105285811
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START DATE	October	/	25	/	2022	FINISH DATE	Month	/	Day	/	2036
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Year: 2018
 Serial/VIN: _____ Machine Hrs: 11781 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Menno Helper(s): Tam
 Job/Repair Site: GP Season: Winter Summer

WORK DESCRIPTION

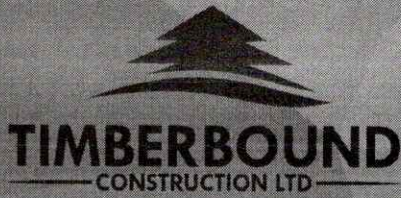
-Replaced fuel pump
-Replaced fuel filters

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	October	/	22	/	2022	FINISH DATE	Month	/	Day	/	2036
	<small>MONTH</small>		<small>DAY</small>		<small>YEAR</small>		<small>MONTH</small>		<small>DAY</small>		<small>YEAR</small>

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Year: 2018
 Serial/VIN: 85533163 Machine Hrs: 11855 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Henry Helper(s): _____
 Job/Repair Site: GP Season: Winter Summer

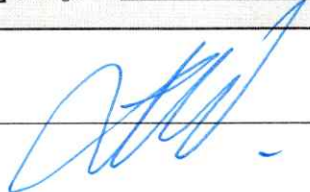
WORK DESCRIPTION

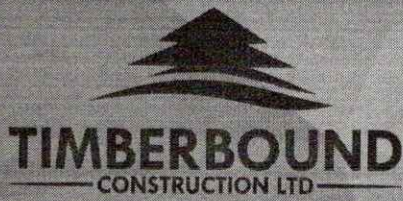
-Replace turbo (from schellenbergs)

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: 



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START DATE	October	/	21	/	2022	FINISH DATE	Month	/	Day	/	2036
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Year: 2018
 Serial/VIN: _____ Machine Hrs: 11741 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Menno Helper(s): _____
 Job/Repair Site: GP Season: Winter Summer

WORK DESCRIPTION

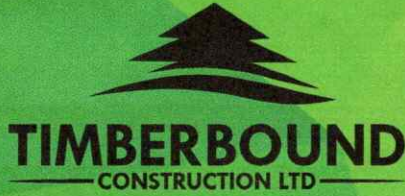
-Replaced alternator (chinese)
-Replaced batteries

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	October	/	18	/	2022	FINISH DATE	Month	/	Day	/	Year
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: 855E tigercat Year: 2018
 Serial/VIN: _____ Machine Hrs: 13333 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Tam Helper(s): _____
 Job/Repair Site: sureway GP Season: Winter Summer

WORK DESCRIPTION

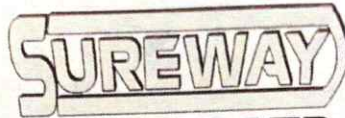
-Complete service
 -Reseal grab arm cyl

COMPLETION CHECKLIST

- | | | |
|---|---|---|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



LOGGING LTD

780-539-0388

6361 Twp 695a Winters Ind Park Lot 1

Box 403

Grovedale, AB T0H 1X0

Timberland.

NAME & MAKE OF MACHINE: Tiger cat H855E

UNIT #: P-08 YEAR: _____

DATE STARTED: 22 / 09 / 17 DATE FINISHED: _____ / _____ / _____
YEAR MONTH DATE YEAR MONTH DATE

NAME OF MECHANIC: Tom / Memo HELPER(S) _____

MACHINE SERIAL #: _____ MACHINE HOURS: #790 11386

JOB SITE: _____ MACHINE KMS: _____

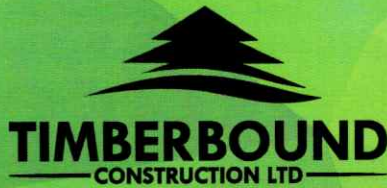
WORK DESCRIPTION:

Repaired one mstact.

Replaced A/C Condenser + Hose from pump to condenser.
- Replaced A/C Receiver dryer.

Mechanic Signature: _____

Supervisor Signature: _____



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 Phone: 780.928.3280 | Fax: 780.928.3291
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 larryw@timberbound.ca

START DATE	May / 30 / 2022	FINISH DATE	June / 22 / 2022
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: 855E Processor Year: 2018
 Serial/VIN: 85533163 Machine Hrs: 11306 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Gary Helper(s): Karl Z
 Job/Repair Site: LaCrete Shop Season: Winter Summer

WORK DESCRIPTION

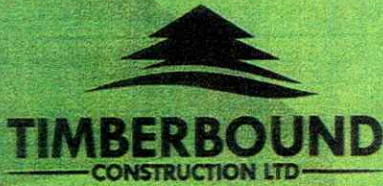
Resealed Right hand Joystick - Changed Rear engine seal
Replaced both #12 buttsaw hoses - Took out DEF Pump/hoses
Replaced floating knife bolt - Added elbow exhaust tip
Replaced hydraulic accumulator
serviced buttsaw Parts (bearing)
Changed hoses
New measuring wheel bearings, seal, sensor, wiring
welded cracks on head (Stoppers)
New Pin Right side Grab arm
Line bored Left side Grabarm Connecting arm Pin hole
New Coolant Radiator

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input checked="" type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Swing drive <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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 Phone: 780.928.3280 | Fax: 780.928.3291
 GST#: 105285811
 larryw@timberbound.ca

START DATE

03 / 08 / 20 22
 MONTH DAY YEAR

FINISH DATE

03 / 08 / 20 22
 MONTH DAY YEAR

MACHINE DETAILS

Unit #: 808 Machine Make/Model: H855E Tigercat Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 11114 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred / Steve Helper(s): _____
 Job/Repair Site: Fill Far East Season: Winter Summer

WORK DESCRIPTION

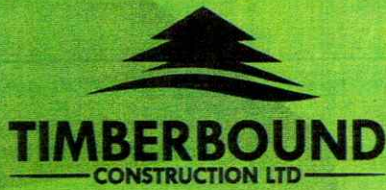
Change A/C Pump + belt
reseal left joystick
new saw tightner plungers

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE Mar / 7 / 2022
MONTH DAY YEAR

FINISH DATE Mar / 7 / 2022
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
Serial/VIN: _____ Machine Hrs: 11093hrs Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
Job/Repair Site: Watt 5 Season: Winter Summer

WORK DESCRIPTION

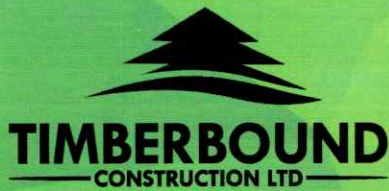
Replace alternator

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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GST#: 105285811
larryw@timberbound.ca

START DATE

March / 4 / 2022
MONTH DAY YEAR

FINISH DATE

March / 4 / 2022
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
Serial/VIN: _____ Machine Hrs: 11069hrs Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
Job/Repair Site: Paple camp south of high level Season: Winter Summer

WORK DESCRIPTION

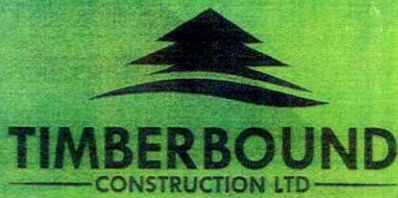
Oil change
air filter change
blow out machine

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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CST#: 105285811
larryw@timberbound.ca

START DATE

February / 15 / 2022
MONTH DAY YEAR

FINISH DATE

February / 15 / 2022
MONTH DAY YEAR

MACHINE DETAILS

Unit #: POB Machine Make/Model: 855E TigerCat Processor Year: 2018
Serial/VIN: 85533163 Machine Hrs: _____ Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Gary Helper(s): 10583
Job/Repair Site: fill Season: Winter Summer

WORK DESCRIPTION

engine oil change

Blew off engine

COMPLETION CHECKLIST

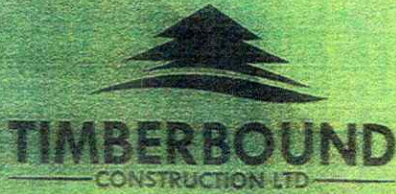
- Engine Oil Filter Check Change
- Engine Oil Check Change
- Transmission Filters Check Change
- Transmission Strainer Check Change
- Transmission Oil Check Change
- Air Filter Check Change

- Antifreeze Check Change
- Antifreeze Filter Check Change
- Fuel Filter Check Change
- Fuel Tank Sump Check Change
- Hydraulic Oil Filter Check Change
- Hydraulic Oil Check Change

- Grease Machine Check Completed
- Lights Check Change
- Hub Oil Check Change
- Final Drive Oil Check Change
- Differential Oil Check Change
- _____ Check Change

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD

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larryw@timberbound.ca

START DATE

02 / 07 / 20 22
MONTH DAY YEAR

FINISH DATE

02 / 07 / 20 22
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Processor Year: 2018

Serial/VIN: _____ Machine Hrs: 10450 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____

Job/Repair Site: F11 Season: Winter Summer

WORK DESCRIPTION

change final end sensor cable

COMPLETION CHECKLIST

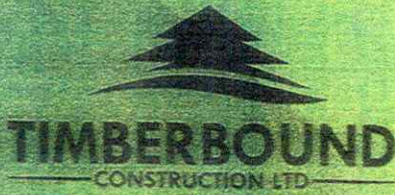
Engine Oil Filter Check Change
Engine Oil Check Change
Transmission Filters Check Change
Transmission Strainer Check Change
Transmission Oil Check Change
Air Filter Check Change

Antifreeze Check Change
Antifreeze Filter Check Change
Fuel Filter Check Change
Fuel Tank Sump Check Change
Hydraulic Oil Filter Check Change
Hydraulic Oil Check Change

Grease Machine Check Completed
Lights Check Change
Hub Oil Check Change
Final Drive Oil Check Change
Differential Oil Check Change
_____ Check Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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larryw@timberbound.ca

START DATE

01 / 27 / 2022
MONTH DAY YEAR

FINISH DATE

01 / 27 / 2022
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Year: 2018
Serial/VIN: _____ Machine Hrs: 10271 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Abe Helper(s): _____
Job/Repair Site: F11 Season: Winter Summer

WORK DESCRIPTION

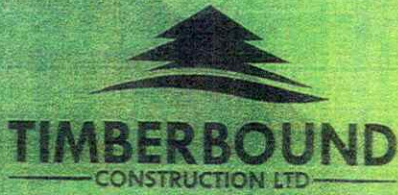
Oil Change

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD
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GST#: 105285811
larryw@timberbound.ca

START DATE

January 10 / 2022
MONTH DAY YEAR

FINISH DATE

January 10 / 2022
MONTH DAY YEAR

MACHINE DETAILS

Unit #: 208 Machine Make/Model: H855E Processor Year: 2018
Serial/VIN: 85533163 Machine Hrs: 10152 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Gary Helper(s): _____
Job/Repair Site: Fill Season: Winter Summer

WORK DESCRIPTION

oil change

blew off engine

COMPLETION CHECKLIST

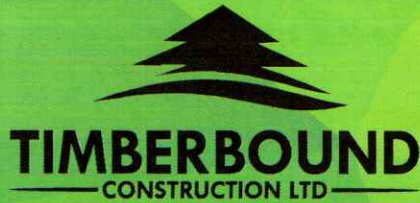
Engine Oil Filter Check Change
Engine Oil Check Change
Transmission Filters Check Change
Transmission Strainer Check Change
Transmission Oil Check Change
Air Filter Check Change

Antifreeze Check Change
Antifreeze Filter Check Change
Fuel Filter Check Change
Fuel Tank Sump Check Change
Hydraulic Oil Filter Check Change
Hydraulic Oil Check Change

Grease Machine Check Completed
Lights Check Change
Hub Oil Check Change
Final Drive Oil Check Change
Differential Oil Check Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE

November / 24 / 20 21
MONTH DAY YEAR

FINISH DATE

November / 24 / 20 21
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: 855E Tigercat Processor Year: 2018
Serial/VIN: 85533163 Machine Hrs: 9437 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Gary Helper(s): _____
Job/Repair Site: BlueHills Season: Winter Summer

WORK DESCRIPTION

oil change

COMPLETION CHECKLIST

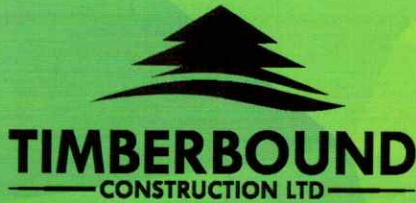
Engine Oil Filter Check Change
Engine Oil Check Change
Transmission Filters Check Change
Transmission Strainer Check Change
Transmission Oil Check Change
Air Filter Check Change

Antifreeze Check Change
Antifreeze Filter Check Change
Fuel Filter Check Change
Fuel Tank Sump Check Change
Hydraulic Oil Filter Check Change
Hydraulic Oil Check Change

Grease Machine Check Completed
Lights Check Change
Hub Oil Check Change
Final Drive Oil Check Change
Differential Oil Check Change
 Check Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	<u>10</u> / <u>08</u> / <u>20 21</u>	FINISH DATE	<u>10</u> / <u>08</u> / <u>20 21</u>
	MONTH / DAY / YEAR		MONTH / DAY / YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercoat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 9090 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred D Helper(s): _____
Job/Repair Site: Nickademus Season: Winter Summer

WORK DESCRIPTION

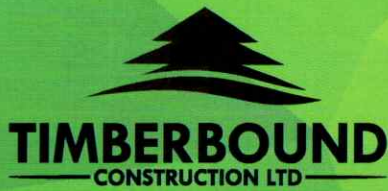
Oil Change
Blow off engine

COMPLETION CHECKLIST

- | | | |
|--|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	09	/	27	/	20	21	FINISH DATE	09	/	27	/	20	21
	MONTH		DAY		YEAR			MONTH		DAY		YEAR	

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Processor Year: 2018
 Serial/VIN: _____ Machine Hrs: 8994 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
 Job/Repair Site: Nikodemus Season: Winter Summer

WORK DESCRIPTION

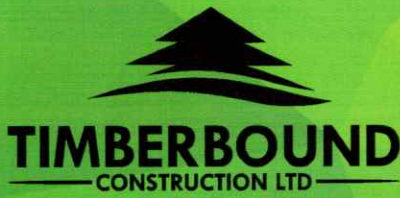
- Change A/C Pump + recharge

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	<u>06</u> / <u>14</u> / <u>20 21</u>	FINISH DATE	<u>06</u> / <u>14</u> / <u>20 21</u>
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Processor Year: _____
Serial/VIN: _____ Machine Hrs: 8359 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): Thomas P.
Job/Repair Site: Hutch Saw Yard Season: Winter Summer

WORK DESCRIPTION

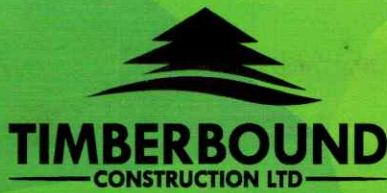
Change head turn ring gear

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	<u>04</u> / <u>26</u> / <u>20 21</u>	FINISH DATE	<u>05</u> / <u>04</u> / <u>20 21</u>
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: _____ Year: 2018
 Serial/VIN: _____ Machine Hrs: 8261 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): Thomas / Karl
 Job/Repair Site: La Crete Shop Season: Winter Summer

WORK DESCRIPTION

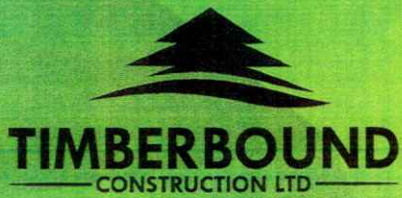
- Change front + rear motor seals
- Change A/C bracket and fill refrigerant
- Change engine idler bearings + new belt
- Change accumulator + lots of hoses
- New butt saw cylinder piston (LA FAB)
- Flip feed wheels, new measuring wheels, weld feed wheel stoppers
- New cable from head turn to head
- Check chain oil
- Reseal grab arm and feed arm cylinders
- change arm rests

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input checked="" type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Swing drive oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE

03 / 24 / 2021
MONTH DAY YEAR

FINISH DATE

03 / 24 / 2021
MONTH DAY YEAR

MACHINE DETAILS

Unit #: POS Machine Make/Model: H835E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 8000 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred. Helper(s): _____
Job/Repair Site: Paddle Season: Winter Summer

WORK DESCRIPTION

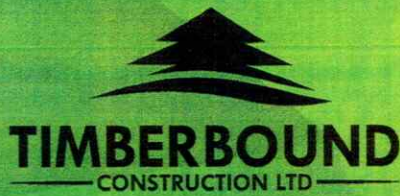
Change alternator

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	Feb.	/	15	/	20	FINISH DATE	Feb	/	15	/	20
	MONTH		DAY		YEAR		MONTH		DAY		YEAR

MACHINE DETAILS

Unit #: 908 Machine Make/Model: _____ Year: _____
 Serial/VIN: _____ Machine Hrs: 7383 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
 Job/Repair Site: Wot4 Season: Winter Summer

WORK DESCRIPTION

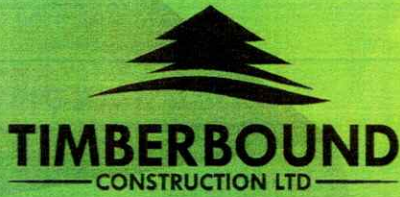
oil change
blow of machine

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE

02 / 03 / 20 21
MONTH DAY YEAR

FINISH DATE

02 / 03 / 20 21
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Hydra H855E Tigrat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 7197 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

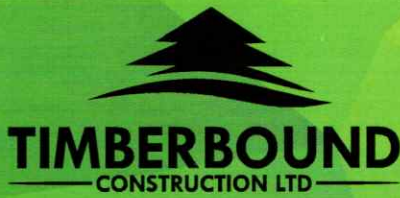
change main saw motor + chain sprocket assembly

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE	Jan / 7 / 2020	FINISH DATE	Jan / 7 / 2020
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: Processor Year: _____
 Serial/VIN: _____ Machine Hrs: 6759hrs Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Steven Helper(s): _____
 Job/Repair Site: vatt4 Season: Winter Summer

WORK DESCRIPTION

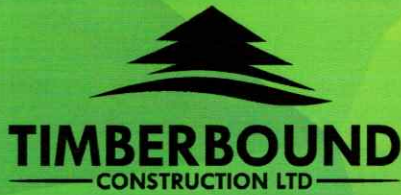
- Oil change
- Grease zerk change a couple
- Check antifreeze leak (tighten hose clamp going in to top of engine.)

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: _____



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START DATE

12 / 30 / 20
MONTH DAY YEAR

FINISH DATE

12 / 30 / 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: POS Machine Make/Model: H855E Tigercat processor Year: 2018
Serial/VIN: _____ Machine Hrs: 6710 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
Job/Repair Site: Watt 4 Season: Winter Summer

WORK DESCRIPTION

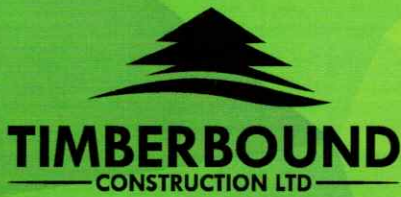
- change right side fixed feed motor

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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START DATE	<u>12</u> / <u>10</u> / <u>20 20</u>	FINISH DATE	<u>12</u> / <u>10</u> / <u>20 20</u>
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 6440 engine Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
Job/Repair Site: WATT 4 Season: Winter Summer

WORK DESCRIPTION

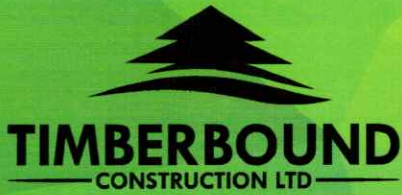
Service Job
Blow off engine

COMPLETION CHECKLIST

- | | | |
|--|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



TIMBERBOUND CONSTRUCTION LTD

Box 610 La Crete, AB T0H 2H0
Phone: 780.928.3280 | Fax: 780.928.3291
GST#: 105285811
larryw@timberbound.ca

START DATE

11 / 25 / 20 20
MONTH DAY YEAR

FINISH DATE

11 / 25 / 20 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO9 Machine Make/Model: H855E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 5380 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: WATT 4 Helper(s): _____
Job/Repair Site: Fred Season: Winter Summer


WORK DESCRIPTION

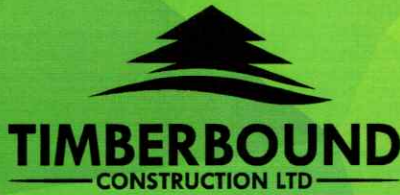
Service Job

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: 



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START DATE 11 / 24 / 20 20
MONTH DAY YEAR

FINISH DATE 11 / 24 / 20 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 6178 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred D Helper(s): _____
Job/Repair Site: WATT 4 Season: Winter Summer


WORK DESCRIPTION

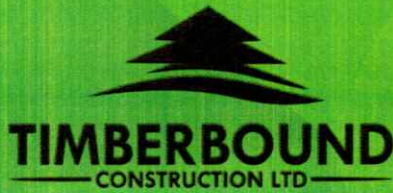
Service Job
Check air filter

COMPLETION CHECKLIST

Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change	Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed
Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change	Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Lights <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change	Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change	Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change	Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change
Air Filter <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change	Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change	<input type="checkbox"/> Check <input type="checkbox"/> Change

SIGNATURES

Mechanic: _____ Supervisor: 



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START DATE

09 / 24 / 2020
MONTH DAY YEAR

FINISH DATE

09 / 24 / 2020
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Year: 2018
Serial/VIN: _____ Machine Hrs: 6053 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
Job/Repair Site: Zelesdorf Season: Winter Summer

WORK DESCRIPTION

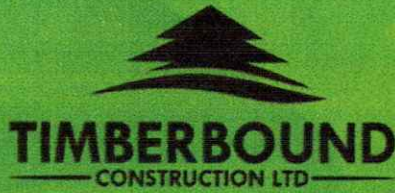
Change heater control valve

COMPLETION CHECKLIST

- | | | |
|---|--|---|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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 larryw@timberbound.ca

START DATE 09 / 01 / 2020
MONTH DAY YEAR

FINISH DATE 09 / 08 / 2020
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P008 Machine Make/Model: H855E Tigercat Processor Year: 2018
 Serial/VIN: _____ Machine Hrs: 5970 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): Thomas
 Job/Repair Site: La Crete Shop Season: Winter Summer

WORK DESCRIPTION

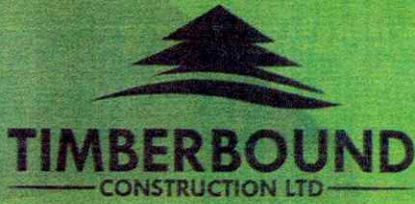
- Reseal main saw bar pressure plungers
- change worn hoses
- O.I change
- 2 new cables for delimb arm and feed arm
- New pins and bushings for tilt cylinder
- New bushings for measuring arm and left delimb arm
- New pins for delimb cylinder

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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 larryw@timberbound.ca

START DATE

07 / 20 / 20 20
MONTH DAY YEAR

FINISH DATE

07 / 20 / 20 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Year: 2018
 Serial/VIN: _____ Machine Hrs: 5691

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
 Job/Repair Site: WATT sat yard Season: Winter Summer

WORK DESCRIPTION

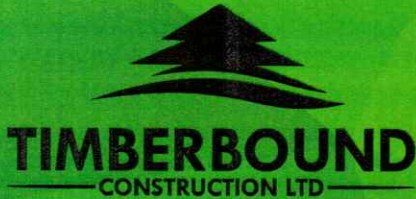
Oil change
Change saw bar holder
fix engine harness wiring
Put new bolts in A/C pump

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | _____ <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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GST#: 105285811
larryw@timberbound.ca

START DATE	<u>06</u> / <u>23</u> / <u>20</u> <u>20</u>	FINISH DATE	<u>06</u> / <u>23</u> / <u>20</u> <u>20</u>
	MONTH DAY YEAR		MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Year: 2018
Serial/VIN: _____ Machine Hrs: 5506 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred D Helper(s): _____
Job/Repair Site: Watt Sed Yard Season: Winter Summer

WORK DESCRIPTION

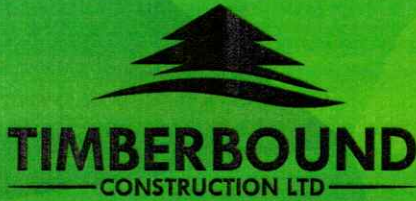
- Change left side fixed feed motor

COMPLETION CHECKLIST

- | | | |
|--|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____



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larryw@timberbound.ca

START DATE 06 / 15 / 20 20
MONTH DAY YEAR

FINISH DATE 06 / 15 / 20 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: PO8 Machine Make/Model: H855E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 5384 Kms: _____

ADDITIONAL INFORMATION

Name of Mechanic: Fred Driedger Helper(s): _____
Job/Repair Site: WATT SAT Yard Season: Winter Summer

WORK DESCRIPTION

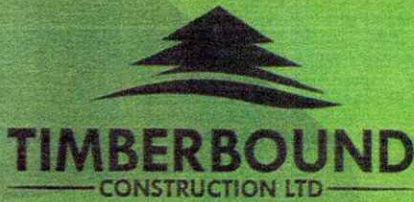
- Change A/C pump, belt, and reciever dryer
- O.I change
blow off engine

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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 larryw@timberbound.ca

START DATE 04 / 28 / 20 20
MONTH DAY YEAR

FINISH DATE 05 / 05 / 20 20
MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Year: 2018
 Serial/VIN: _____ Machine Hrs: 5080

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): Thomas
 Job/Repair Site: TBC SHOP Season: Winter Summer

WORK DESCRIPTION

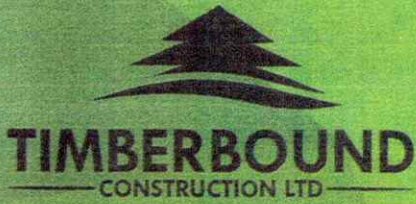
- Change worn hoses
- New arm rests
- Weld cracks
- Check pro-heat
- hyd. pressure set up on head.
- Clean cab
- Change cab air filter

COMPLETION CHECKLIST

- | | | |
|---|--|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input checked="" type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil <input checked="" type="checkbox"/> Check <input type="checkbox"/> Change | <u>Swing Drive</u> <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change |

SIGNATURES

Mechanic _____ Supervisor _____



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GST#: 105285811
larryw@timberbound.ca

START DATE 03 / 03 / 20 20
 MONTH DAY YEAR

FINISH DATE 03 / 03 / 20 20
 MONTH DAY YEAR

MACHINE DETAILS

Unit #: P08 Machine Make/Model: H855E Tigercat Processor Year: 2018
Serial/VIN: _____ Machine Hrs: 4511

ADDITIONAL INFORMATION

Name of Mechanic: Fred Helper(s): _____
Job/Repair Site: WATT 4 Season: Winter Summer

WORK DESCRIPTION

Service Job
Blow off engine

COMPLETION CHECKLIST

- | | | |
|---|---|--|
| Engine Oil Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze <input type="checkbox"/> Check <input type="checkbox"/> Change | Grease Machine <input type="checkbox"/> Check <input type="checkbox"/> Completed |
| Engine Oil <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Antifreeze Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Lights <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Filters <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Hub Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Strainer <input type="checkbox"/> Check <input type="checkbox"/> Change | Fuel Tank Sump <input type="checkbox"/> Check <input type="checkbox"/> Change | Final Drive Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Transmission Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | Hydraulic Oil Filter <input type="checkbox"/> Check <input type="checkbox"/> Change | Differential Oil <input type="checkbox"/> Check <input type="checkbox"/> Change |
| Air Filter <input type="checkbox"/> Check <input checked="" type="checkbox"/> Change | Hydraulic Oil <input type="checkbox"/> Check <input type="checkbox"/> Change | <input type="checkbox"/> Check <input type="checkbox"/> Change |

SIGNATURES

Mechanic: _____ Supervisor: _____

TIMBERBOUND CONSTRUCTION LTD.

Box 485
La Crete, Alberta
T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE Processor

UNIT # P08 YEAR _____

DATE STARTED

YEAR	MONTH	DATE
2020	01	31

 DATE FINISHED

YEAR	MONTH	DATE
2020	01	31

NAME OF MECHANIC Steven

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3990

JOB SITE Two Lakes

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER

WORK DESCRIPTION
Oil change
blow of machine

CAUSE OF FAILURE

DID YOU?????		CHANGE <input checked="" type="checkbox"/>	CHECK <input checked="" type="checkbox"/>
ENGINE OIL FILTER	<input checked="" type="checkbox"/>		
ENGINE OIL	<input checked="" type="checkbox"/>		
TRANS. FILTERS			
TRANS. STRAINER			
TRANS. OIL			
AIR FILTER			
ANTIFREEZE			
ANTIFREEZE FILTER			
FUEL FILTER			
FUEL TANK SUMP			
HYD. OIL FILTER			
HYD. OIL			
GREASE MACHINE			
GREASE SIRKS			
LIGHTS			

SIGNED: MECHANIC _____ SUPERVISOR _____

TIMBERBOUND CONSTRUCTION LTD.

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 La Crete, Alberta
 T0H 2H0
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 GST #105285811

078

NAME & MAKE OF MACHINE H855E Tigercat

UNIT # PO8 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2020	01	20

 DATE FINISHED

YEAR	MONTH	DATE
20		

NAME OF MECHANIC Larry, Steph

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3900 HR

JOB SITE Key River

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER _____

WORK DESCRIPTION

- Replace Main Pump
- Replace case drain filter

CAUSE OF FAILURE

- Did not stroke up

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER		
ENGINE OIL		
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

VP#40230.CDR

SIGNED: MECHANIC _____ SUPERVISOR [Signature]

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La Crete, Alberta
T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE

Processor

UNIT #

PO8

YEAR

DATE STARTED

YEAR	MONTH	DATE
2020	01	10

DATE FINISHED

YEAR	MONTH	DATE
2020	01	10

NAME OF MECHANIC

Steven

HELPERS

MACHINE SERIAL #

MACHINE HOURS

3735

JOB SITE

Watt 4

WORKED ON MACHINE AFTER SEASON

SUMMER

WINTER

WORK DESCRIPTION

oil change

- Air filter

CAUSE OF FAILURE

DID YOU?????

CHANGE CHECK

ENGINE OIL FILTER

ENGINE OIL

TRANS. FILTERS

TRANS. STRAINER

TRANS. OIL

AIR FILTER

ANTIFREEZE

ANTIFREEZE FILTER

FUEL FILTER

FUEL TANK SUMP

HYD. OIL FILTER

HYD. OIL

GREASE MACHINE

GREASE SIRKS

LIGHTS

SIGNED: MECHANIC

SUPERVISOR

TIMBERBOUND CONSTRUCTION LTD.

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 T0H 2H0
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 GST #105285811

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NAME & MAKE OF MACHINE 855E Tigercat Processor

UNIT # POB YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	12	20

 DATE FINISHED

YEAR	MONTH	DATE
2019	12	20

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3824

JOB SITE WATT 4

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER ✓

WORK DESCRIPTION

- Change right side grab arm
- new main pin
- new cylinder rod end pin
- Put back original ecm one

CAUSE OF FAILURE _____

DID YOU?????	
	CHANGE ✓ CHECK ✓
ENGINE OIL FILTER	
ENGINE OIL	
TRANS. FILTERS	
TRANS. STRAINER	
TRANS. OIL	
AIR FILTER	
ANTIFREEZE	
ANTIFREEZE FILTER	
FUEL FILTER	
FUEL TANK SUMP	
HYD. OIL FILTER	
HYD. OIL	
GREASE MACHINE	
GREASE SIRKS	
LIGHTS	

VP#40230.CDR

SIGNED: MECHANIC _____ SUPERVISOR _____

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La Crete, Alberta
T0H 2H0

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GST #105285811

078

NAME & MAKE OF MACHINE 855E Tigercat Processor

UNIT # PO8 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	12	19

 DATE FINISHED

YEAR	MONTH	DATE
2019	12	19

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3802

JOB SITE WATTY

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER

WORK DESCRIPTION

- Replace main saw arm

CAUSE OF FAILURE _____

DID YOU?????	
	CHANGE <input checked="" type="checkbox"/> CHECK <input checked="" type="checkbox"/>
ENGINE OIL FILTER	
ENGINE OIL	
TRANS. FILTERS	
TRANS. STRAINER	
TRANS. OIL	
AIR FILTER	
ANTIFREEZE	
ANTIFREEZE FILTER	
FUEL FILTER	
FUEL TANK SUMP	
HYD. OIL FILTER	
HYD. OIL	
GREASE MACHINE	
GREASE SIRKS	
LIGHTS	

SIGNED: MECHANIC _____ SUPERVISOR _____

TIMBERBOUND CONSTRUCTION LTD.

Box 485
 La Crete, Alberta
 T0H 2H0
 PHONE: (403) 928-3280 FAX (403) 928-3291
 GST #105285811

078

NAME & MAKE OF MACHINE 855 E Tigercat Processor

UNIT # PO8 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	12	11

DATE FINISHED

YEAR	MONTH	DATE
2019	12	11

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3666

JOB SITE High Level Shop

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER ✓

WORK DESCRIPTION

- Oil Change

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER	✓	
ENGINE OIL	✓	
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER	✓	
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

SIGNED: MECHANIC _____ SUPERVISOR _____

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T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

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NAME & MAKE OF MACHINE Tiger cat Processor

UNIT # P08 YEAR _____

DATE STARTED

YEAR	MONTH	DATE
2019	11	22

DATE FINISHED

YEAR	MONTH	DATE
2019	11	22

NAME OF MECHANIC Steven

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3351

JOB SITE Watt 4

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER

WORK DESCRIPTION
oil change
Air filter change
blow off machine

CAUSE OF FAILURE

DID YOU?????	
	CHANGE <input checked="" type="checkbox"/> CHECK <input checked="" type="checkbox"/>
ENGINE OIL FILTER	<input checked="" type="checkbox"/>
ENGINE OIL	<input checked="" type="checkbox"/>
TRANS. FILTERS	
TRANS. STRAINER	
TRANS. OIL	
AIR FILTER	<input checked="" type="checkbox"/>
ANTIFREEZE	
ANTIFREEZE FILTER	
FUEL FILTER	
FUEL TANK SUMP	
HYD. OIL FILTER	
HYD. OIL	
GREASE MACHINE	
GREASE SIRKS	
LIGHTS	

SIGNED: MECHANIC _____ SUPERVISOR _____

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T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

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NAME & MAKE OF MACHINE H855 E

UNIT # P08 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
<u>2019</u>	<u>11</u>	<u>5</u>

DATE FINISHED

YEAR	MONTH	DATE
<u>2019</u>	<u>11</u>	<u>5</u>

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 3038

JOB SITE Charles Wieler

WORKED ON MACHINE AFTER SEASON SUMMER WINTER _____

WORK DESCRIPTION

- Change oil filter due to low oil pressure
- Adjust diameter potentiometer

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER	<input checked="" type="checkbox"/>	
ENGINE OIL	<input checked="" type="checkbox"/>	
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

SIGNED: MECHANIC _____ SUPERVISOR _____

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NAME & MAKE OF MACHINE ~~Bobcat~~ H855E Tigercat Processor

UNIT # POB YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	10	17

 DATE FINISHED

YEAR	MONTH	DATE
2019	10	17

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 2832

JOB SITE Blue Hills

WORKED ON MACHINE AFTER SEASON SUMMER WINTER _____

WORK DESCRIPTION

- Oil Change
- Blow off engine

CAUSE OF FAILURE

DID YOU?????	
	CHANGE / CHECK ✓
ENGINE OIL FILTER	<input checked="" type="checkbox"/>
ENGINE OIL	<input checked="" type="checkbox"/>
TRANS. FILTERS	<input type="checkbox"/>
TRANS. STRAINER	<input type="checkbox"/>
TRANS. OIL	<input type="checkbox"/>
AIR FILTER	<input checked="" type="checkbox"/>
ANTIFREEZE	<input type="checkbox"/>
ANTIFREEZE FILTER	<input type="checkbox"/>
FUEL FILTER	<input type="checkbox"/>
FUEL TANK SUMP	<input type="checkbox"/>
HYD. OIL FILTER	<input type="checkbox"/>
HYD. OIL	<input type="checkbox"/>
GREASE MACHINE	<input type="checkbox"/>
GREASE SIRKS	<input type="checkbox"/>
LIGHTS	<input type="checkbox"/>

SIGNED: MECHANIC _____ SUPERVISOR _____

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PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

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NAME & MAKE OF MACHINE 855 Tigercat.

UNIT # P08 YEAR 2018.

DATE STARTED

YEAR	MONTH	DATE
2019	08	09.

 DATE FINISHED

YEAR	MONTH	DATE
20		

NAME OF MECHANIC Gary Froese / Ernie Krahn.

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 2548 HR.

JOB SITE Norboard.

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER _____

WORK DESCRIPTION

- Engine oil change.
- Reseal grapple cyl. on head.

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE	CHECK
ENGINE OIL FILTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENGINE OIL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TRANS. FILTERS	<input type="checkbox"/>	<input type="checkbox"/>
TRANS. STRAINER	<input type="checkbox"/>	<input type="checkbox"/>
TRANS. OIL	<input type="checkbox"/>	<input type="checkbox"/>
AIR FILTER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ANTIFREEZE	<input type="checkbox"/>	<input type="checkbox"/>
ANTIFREEZE FILTER	<input type="checkbox"/>	<input type="checkbox"/>
FUEL FILTER	<input type="checkbox"/>	<input type="checkbox"/>
FUEL TANK SUMP	<input type="checkbox"/>	<input type="checkbox"/>
HYD. OIL FILTER	<input type="checkbox"/>	<input type="checkbox"/>
HYD. OIL	<input type="checkbox"/>	<input type="checkbox"/>
GREASE MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
GREASE SIRKS	<input type="checkbox"/>	<input type="checkbox"/>
LIGHTS	<input type="checkbox"/>	<input type="checkbox"/>

SIGNED: MECHANIC _____ SUPERVISOR [Signature]

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 PHONE: (403) 928-3280 FAX (403) 928-3291
 GST #105285811

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NAME & MAKE OF MACHINE H855E Processor

UNIT # POS YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
<u>2019</u>	<u>06</u>	<u>25</u>

DATE FINISHED

YEAR	MONTH	DATE
<u>2019</u>	<u>06</u>	<u>25</u>

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 2248

JOB SITE Beaver Ranch

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER _____

WORK DESCRIPTION
- Oil change
- Replace one yellow bumper on head
- More grease in measuring wheel

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER		
ENGINE OIL		
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

SIGNED: MECHANIC _____ SUPERVISOR _____

TIMBERBOUND CONSTRUCTION LTD.

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PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE H855E Tigercat Processor

UNIT # PO8 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	05	08

 DATE FINISHED

YEAR	MONTH	DATE
2019	05	10

NAME OF MECHANIC Fred Driedger

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 2010

JOB SITE Shop

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER

WORK DESCRIPTION

- Change main return hose from head turn to stick
- Adjust pressure on head
- Build new hinges for hood on head
- Move engine breather hose
- Change planetary and swing drive oil
- Change bottom delimit arm

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER		
ENGINE OIL		✓
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		✓
ANTIFREEZE FILTER		
FUEL FILTER	✓	
FUEL TANK SUMP		
HYD. OIL FILTER	✓	
HYD. OIL		✓
GREASE MACHINE		✓
GREASE SIRKS		✓
LIGHTS		✓

SIGNED: MECHANIC _____ SUPERVISOR _____

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Box 485
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T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE TIGERCAT PROCESSOR

UNIT # P08 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2019	03	15

 DATE FINISHED

YEAR	MONTH	DATE
2019	03	15

NAME OF MECHANIC ABE .B JOHN .F.

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 1910 HR

JOB SITE BLUE ANGEL

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER —

WORK DESCRIPTION

- OIL CHANGE
- BLOW OFF ENGINE.

CAUSE OF FAILURE _____

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER	<u>—</u>	<u>—</u>
ENGINE OIL	<u>—</u>	
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		<u>—</u>
ANTIFREEZE		<u>—</u>
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

SIGNED: MECHANIC _____ SUPERVISOR _____

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PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

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NAME & MAKE OF MACHINE H855E Tigercat Processor

UNIT # POS YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
<u>2019</u>	<u>03</u>	<u>04</u>

DATE FINISHED

YEAR	MONTH	DATE
<u>2019</u>	<u>03</u>	<u>04</u>

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 1715

JOB SITE Panton 6

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER _____

WORK DESCRIPTION

- Change both feed wheel motors due to blown out shaft seals
 - changed right side fixed feed motor due to excessive case drain, likely caused other motors to leak.
 - Fixed tilt lock by changing flow control valve and disassembling the tilt lock solenoid valve

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER		
ENGINE OIL		
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

VP#40230.CDR

SIGNED: MECHANIC [Signature] SUPERVISOR _____

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T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

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NAME & MAKE OF MACHINE Tiger cat Processor

UNIT # P08 YEAR _____

DATE STARTED

YEAR	MONTH	DATE
2019	02	26

DATE FINISHED

YEAR	MONTH	DATE
2019	02	26

NAME OF MECHANIC Steven, Fred

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 1634

JOB SITE Ponton bush

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER

WORK DESCRIPTION
Oil change, Air filter

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE <input checked="" type="checkbox"/>	CHECK <input checked="" type="checkbox"/>
ENGINE OIL FILTER	<input checked="" type="checkbox"/>	
ENGINE OIL	<input checked="" type="checkbox"/>	
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER	<input checked="" type="checkbox"/>	
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

VP#40230.CDR

SIGNED: MECHANIC [Signature] SUPERVISOR _____

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T0H 2H0

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GST #105285811

078

NAME & MAKE OF MACHINE

Tiger cat Processor

UNIT #

P08

YEAR

DATE STARTED

YEAR	MONTH	DATE
<i>2019</i>	<i>01</i>	<i>21</i>

DATE FINISHED

YEAR	MONTH	DATE
<i>2019</i>	<i>01</i>	<i>21</i>

NAME OF MECHANIC

Steven

HELPERS

MACHINE SERIAL #

MACHINE HOURS

1009

JOB SITE

Panton bush

WORKED ON MACHINE AFTER SEASON

SUMMER

WINTER

WORK DESCRIPTION

Oil change, Air filter change

CAUSE OF FAILURE

DID YOU?????

CHANGE CHECK

ENGINE OIL FILTER
ENGINE OIL
TRANS. FILTERS
TRANS. STRAINER
TRANS. OIL
AIR FILTER
ANTIFREEZE
ANTIFREEZE FILTER
FUEL FILTER
FUEL TANK SUMP
HYD. OIL FILTER
HYD. OIL
GREASE MACHINE
GREASE SIRKS
LIGHTS

VP#40230.CDR

SIGNED: MECHANIC

St B

SUPERVISOR

TIMBERBOUND CONSTRUCTION LTD.

Box 485
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T0H 2H0

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GST #105285811

078

NAME & MAKE OF MACHINE Tiger cat Processor

UNIT # P08

YEAR _____

DATE STARTED

YEAR	MONTH	DATE
2019	01	02

DATE FINISHED

YEAR	MONTH	DATE
2019	01	02

NAME OF MECHANIC Steven

HELPERS _____

MACHINE SERIAL # _____

MACHINE HOURS 698hrs

JOB SITE Ponton bush

WORKED ON MACHINE AFTER SEASON

SUMMER _____

WINTER

WORK DESCRIPTION

Oil change, Air filter change

CAUSE OF FAILURE

DID YOU?????

CHANGE CHECK

ENGINE OIL FILTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ENGINE OIL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TRANS. FILTERS	<input type="checkbox"/>	<input type="checkbox"/>
TRANS. STRAINER	<input type="checkbox"/>	<input type="checkbox"/>
TRANS. OIL	<input type="checkbox"/>	<input type="checkbox"/>
AIR FILTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
ANTIFREEZE	<input type="checkbox"/>	<input type="checkbox"/>
ANTIFREEZE FILTER	<input type="checkbox"/>	<input type="checkbox"/>
FUEL FILTER	<input type="checkbox"/>	<input type="checkbox"/>
FUEL TANK SUMP	<input type="checkbox"/>	<input type="checkbox"/>
HYD. OIL FILTER	<input type="checkbox"/>	<input type="checkbox"/>
HYD. OIL	<input type="checkbox"/>	<input type="checkbox"/>
GREASE MACHINE	<input type="checkbox"/>	<input type="checkbox"/>
GREASE SIRKS	<input type="checkbox"/>	<input type="checkbox"/>
LIGHTS	<input type="checkbox"/>	<input type="checkbox"/>

7P#40230 CDR

SIGNED: MECHANIC [Signature]

SUPERVISOR _____

TIMBERBOUND CONSTRUCTION LTD.

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T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE Tiger cat Processor

UNIT # P08 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
<u>2018</u>	<u>12</u>	<u>05</u>

DATE FINISHED

YEAR	MONTH	DATE
<u>2018</u>	<u>12</u>	<u>05</u>

NAME OF MECHANIC Steven

HELPERS _____

MACHINE SERIAL # _____ MACHINE HOURS 397

JOB SITE Ponton bush

WORKED ON MACHINE AFTER SEASON

SUMMER _____

WINTER

WORK DESCRIPTION

engine Oil change, Air Filter change, replace gress fitting on head

CAUSE OF FAILURE _____

DID YOU?????

CHANGE CHECK

ENGINE OIL FILTER	<input checked="" type="checkbox"/>	
ENGINE OIL	<input checked="" type="checkbox"/>	
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER	<input checked="" type="checkbox"/>	
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER		
FUEL TANK SUMP		
HYD. OIL FILTER		
HYD. OIL		
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

VP#40230 CDR

SIGNED: MECHANIC Steven

SUPERVISOR _____

TIMBERBOUND CONSTRUCTION LTD.

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La Crete, Alberta
T0H 2H0

PHONE: (403) 928-3280 FAX (403) 928-3291
GST #105285811

078

NAME & MAKE OF MACHINE H855E Tigercat Processor

UNIT # P08 YEAR 2018

DATE STARTED

YEAR	MONTH	DATE
2018	11	20

 DATE FINISHED

YEAR	MONTH	DATE
2018	11	20

NAME OF MECHANIC Fred

HELPERS _____

MACHINE SERIAL # 85533163 MACHINE HOURS 135

JOB SITE Keg River

WORKED ON MACHINE AFTER SEASON SUMMER _____ WINTER —

WORK DESCRIPTION

- Justin (Waratah) did initial setup on head
 - adjusted feed wheel speed
 - adjusted head tilt
 - set saw (main + top) speed and pressure

- Fred (Wajax)
 - Did first service
 - Swing + Track drive oil change
 - adjusted pump margin pressure
 - adjusted boom, swing, + stick speed

CAUSE OF FAILURE

	DID YOU?????	
	CHANGE ✓	CHECK ✓
ENGINE OIL FILTER		
ENGINE OIL		
TRANS. FILTERS		
TRANS. STRAINER		
TRANS. OIL		
AIR FILTER		
ANTIFREEZE		
ANTIFREEZE FILTER		
FUEL FILTER	✓	
FUEL TANK SUMP		
HYD. OIL FILTER	✓	
HYD. OIL		✓
GREASE MACHINE		
GREASE SIRKS		
LIGHTS		

SIGNED: MECHANIC _____ SUPERVISOR _____

000592 Head Ser.#



SCHEDULE A

No: 9969223001

This SCHEDULE A is an integral part of the CONDITIONAL SALE AGREEMENT No. 9969223001 executed at La Crête in the province of Alberta, this 19th day of September 2018.

GOODS

UNITS	MODEL	YEAR	DESCRIPTION	SERIAL Nos.
1	632E	2018	Tigercat Grapple Skidder complete with Tigercat (FPT) 6.7 Litre Tier 4 Final Engine s/n 001575549, Tigercat 23 sq ft Dual Cylinder Bunching Grapple s/n SBG7203-00007, Log Stacking Utility Type Blade w/ Toolbox and Pressurized Water Tank, Blade Extensions, High Torque Efficient (EHS) Transmission, All-Season Hydraulic Oil, High Output LED Light Package, 120V Electric Block Heater, Fuel Powered Programmable Pre-Heat System, Severe Duty Axles w/ Operator Controlled Front and Back Rear Differential Locks, 35.5 x 32 24 pr Firestone Tires on Wide Offset Wheel Rims, Large Fuel Tank Winch Ready.	6320226 <i>S10.</i>
1	H855E	2018	Tigercat Track Harvester, c/w Waratah HTH623C Processing Head, complete with Tigercat (FPT) 6.7 Litre Tier 4 Final Engine s/n 001536223, Tigercat ER Harvester Boom, Amerex Fire Suppression System, Manual Fill Hydraulic Pump, High Output LED Work Lights, Digital AM/FM Radio w/ CD Player and Blue-Tooth, R7150 Extended Pedestal Super Duty Undercarriage 8.5" Pitch and 15'7" Overall Track Length w/ 9 Sealed Track Rollers per side and Hydraulic Track Adjustment w/ Shock Absorbing Recoil Springs, 47 Link FH400 Track Chains w/ 28" Single Grouser Track Shoes, Top Slides on Track Frames, Fuel Powered Programmable Pre-Heat System, 3900 lb Counterweight Kit, Back Pressure Check Valve in Head Return Line, Two Piece Conveyor Belting Bolt on Debris Covers, Telmatics.	85533115 1WA623CXJ0000568 <i>P07</i>
1	H855E	2018	Tigercat Track Harvester, c/w Waratah HTH623C Processing Head, complete with Tigercat (FPT) 6.7 Litre Tier 4 Final Engine s/n 001532737, Tigercat ER Harvester Boom, Amerex Fire Suppression System, Manual Fill Hydraulic Pump, High Output LED Work Lights, Digital AM/FM Radio w/ CD Player and Blue-Tooth, R7150 Extended Pedestal Super Duty Undercarriage 8.5" Pitch and 15'7" Overall Track Length w/ 9 Sealed Track Rollers per side and Hydraulic Track Adjustment w/ Shock Absorbing Recoil Springs, 47 Link FH400 Track Chains w/ 28" Single Grouser Track Shoes, Top Slides on Track Frames, Fuel Powered Programmable Pre-Heat System, 3900 lb Counterweight Kit, Back Pressure Check Valve in Head Return Line, Two Piece Conveyor Belting Bolt on Debris Covers, Telmatics.	85533163 1WA612CXHJ0000592 <i>P08</i>



P08

Timberbound Construction Ltd. _____ _____ _____ _____ By: <i>[Signature]</i> (Buyer/Assignee) SIGNATURE OF AUTHORIZED OFFICERS	Integrated Distribution Systems Limited Partnership, by its general partner Wajax GP Trust, by its trustee Wajax GP Holdco Inc., o/a Wajax Equipment _____ _____ By: _____ ("SELLER") TITLE SIGNATURE OF AUTHORIZED OFFICERS	Wells Fargo Equipment Finance Company _____ _____ _____ _____ By: _____ ("ASSIGNEE") TITLE SIGNATURE OF AUTHORIZED OFFICERS
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