



PURCHASE ORDER

1225 North Loop West Suite 650
Houston TX 77008
Tel: 713.980.7380 Fax: 713.980.7381

No.: _____

Date: _____

Contact: _____

ISSUED TO:

SHIP TO:

QUANTITY	DESCRIPTION	PRICE	EXTENSION
<h1>EXHIBIT # 1</h1>			

SPECIAL INSTRUCTIONS: Invoices & Mill Test Reports are required when the vessel docks in Houston, TX. Original & two (2) copies of both are required. Failure to receive the Invoice & MTRs promptly could delay payment beyond the agreed terms. Under no circumstances will payment be approved until MTRs are received.

DATE _____

SALES ORDER # _____

CUSTOMER PO _____

BILL TO _____

SHIP TO _____

SHIP VIA _____ PPD _____ WC _____ DATE PROMISED _____

TERMS _____ N30 _____ OTHER _____ TAXABLE _____

SALES PERSON _____ WAREHOUSE _____

MTR WITH TRUCK _____ INVOICE _____ EMAIL _____ FAX _____

MTR TO: _____

GRADES

10	20 OR 25	40 OR 45	60	SIZE	ORIGIN	QTY	WEIGHT	CWT	TOTAL
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							
36	572	516	573	OTHER	F D MM CHSI NC				
ABS	50 65	AR N							

EXHIBIT # 2

NOTES:



COMMON CARRIER DETAIL SHEET

DATE: _____

SALES ORDER: _____

CUSTOMER PO#: _____

CUSTOMER NAME: _____

DELIVERY ADDRESS: _____

EXHIBIT # 3

DATE TO LOAD: _____ PROMISE DATE: _____ WEIGHT: _____

SHIP VIA: TRUCK RAIL OTHER

PICK-UP HOUSTON NEW ORLEANS TULSA

LOCATION: BUYOUT / LOCATION
 OTHER: _____

AVAILABILITY: READY CUT INBOUND OTHER

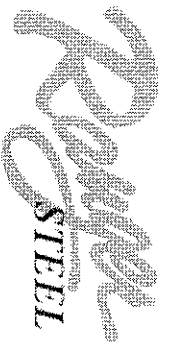
BLOCKING & LOADING INSTRUCTIONS: TARP LEGAL WIDE

JOBSITE REQMENTS STEEL-TOED BOOTS NO TENNIS SHOES LONG SLEEVES
 NOMEX SUIT NON-FLAMMABLE CLOTHING HARD HAT
 SAFETY GLASSES NO FACIAL HAIR/BEARD NO BEARD

MAX ALLOWED: _____ STOP: _____ TOTAL FREIGHT: _____

PREFERRED CARRIER: _____ DATE QUOTED: _____

SALESMAN



CUTTING ORDER

CUSTOMER: _____

SO# _____

DATE: _____

STOCK ITEM TO BE CUT:

QTY	SIZE	GRADE	NOTES

TO BE CUT TO:

QTY	SIZE	NOTES	REM	NEW PRICE

EXHIBIT # 4

ADDITIONAL NOTES: _____

PICKUP DATE: _____

X _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/8/2010

PRODUCER Phone: 713-627-2250 Fax: 713-621-5425
 Frank Crystal & Co. of Texas, Inc.
 2000 West Loop South, Suite 1800
 Houston TX 77227-7723

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
 Ranger Steel Services L.P.
 1225 N. Loop W., Suite 650
 Houston TX 77008

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Great Northern Ins. Co.	20303
INSURER B: Federal Insurance Company	20281
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	35796430	12/31/2009	12/31/2010	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A X	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	70205525	12/31/2009	12/31/2010	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ GARAGE LIABILITY <input type="checkbox"/> ANY AUTO AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$
B X	EXCESS / UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ 0	79862746	12/31/2009	12/31/2010	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

EXHIBIT # 5 PAGE 1

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

Hammerts Iron Works
 5913 Shreve Avenue
 St. Louis MO 63115

CANCELLATION Except 10 Days for Non-Payment

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Frank Crystal & Co. of Texas, Inc.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

62ZZK2Q6

DATE (MM/DD/YYYY)
09/12/2010

PRODUCER
LOCKTON COMPANIES, LLC
5847 SAN FELIPE, SUITE 320
HOUSTON, TX 77057

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
ADMINISTAFF, INC.
19001 CRESCENT SPRINGS DRIVE
KINGWOOD, TX 77339
* SEE BELOW

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Indemnity Insurance Co. of North America	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COMP/OP AGG	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY: EA ACC	\$
					AGG	\$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	C4648521A	10/01/2010	10/01/2011	X WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$ 1,000,000
					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

EXHIBIT # 5 PAGE 2

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

* RANGER STEEL SERVICES, L.P. (2337200) IS INCLUDED FOR COVERAGE THROUGH ENDORSEMENT FOR ALL EMPLOYEES UNDER CLIENT SERVICE AGREEMENT.

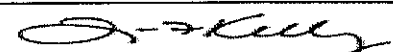
CERTIFICATE HOLDER

Amegy Bank
J Carr
4400 Post Oak Parkway
Houston, TX 77027

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



Page 1 of 1

EXHIBIT # 6

DATE RECEIVED 10/17/11 REC'D BY COOLIDGE

RANGER

BOL DATE 9/28/2011 BOL# _____ MILL _____

PO / WISE	GRADE AND THICKNESS	DIMENSIONS	PCS	LBS
10320 4	A-36 1-3/4 D MM	96 X 240	6 ✓	68,609
10308 4	A-572-65 1/2 D MM CH SI	120 X 650	1 ✓	11,060
10405 4	A-572-65 7/16 D MM CH SI	108 X 650	4	34,840
10405 4	A-572-65 1/2 D MM CH SI	108 X 650	3	29,863
10405 4	A-572-65 7/16 D MM CH SI	120 X 650	2	19,356
RECEIVER COMMENTS				163,728

10/18

10/18/11 RanHOUSTON

Order # 105679 Ship Date 10/15/11

Page # 1

Ship Via CC

STRAIGHT BILL OF LADING
SHORT FORM
ORIGINAL - NOT NEGOTIABLE

Shipping Instructions

Terms: NET 30 DAYS
P.O. #

** MTR ** TRUCK
** MTR **

Sold To: Cust #

DELIVER TO

**
**
**
**
**

EXHIBIT # 9

Whs	Item Description	Pcs Ordered	Weight	Pcs Shipped
	CLEAN & FLAT. HEAT # EACH PC. *			
	CIRCLE HEAT # EACH PLATE			
*	1* 1001250000 A-36 1-1/4 X 96" X 240"	2	16,336	_____
*	1* 1001375280 A-36 1-3/8 X 96" X 240" D MM	2	17,968	_____
*	1* 1000875005 A-36 7/8 X 96" X 240" R	2	11,434	_____
*	1* 1000875005 A-36 7/8 X 96" X 120" R	1	2,859	_____
		1	0	_____

Total Pieces 7

Total Weight

48,597

NOTE - Rejection of plate must be prior to fabrication especially, but not limited to surface rust, pitting or other cosmetic reasons. Ranger Steel will not accept any claims or rejections after plate has been fabricated. Refer to terms and conditions on back of invoices for complete details.

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading. The property described above is in apparent good order, except as noted, marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry its usual place of delivery at said destination. If on its route, otherwise to deliver to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any overall or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment. Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns. Subject to section 7 of the conditions of Bill of Lading in N.M.F.C. and U.P.C. - No recourse clause exercised.

Consignor - RANGER STEEL • 1225 NORTH LOOP WEST • HOUSTON, TEXAS 77008

SHIPPER: RSS

BY: _____

CHECKED

BY: _____

CARRIER: _____

DRIVER: _____

TRUCK #: _____

DATE: _____

EXHIBIT # 10

