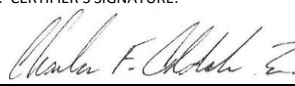


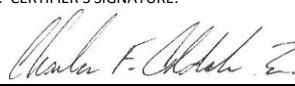
UNITED STATES - MEXICO - CANADA AGREEMENT (USMCA)
CERTIFICATE OF ORIGIN

PLEASE PRINT OR TYPE:

1. CERTIFIER NAME, ADDRESS, TELEPHONE NUMBER AND E-MAIL COMPANY NAME: SERVICE WIRE CO. ADDRESS: 310 DAVIS ROAD CITY, STATE, ZIP CODE: CULLODEN, WV 25510 COUNTRY: USA PHONE: 304-743-8600 EMAIL: CHUCK.OLDAKER@SERVICEWIRE.COM TAX ID NUMBER: 55-0491525	2. EXPORTER NAME, ADDRESS, TELEPHONE AND E-MAIL COMPANY NAME: SERVICE WIRE CO. ADDRESS: 310 DAVIS ROAD CITY, STATE, ZIP CODE: CULLODEN, WV 25510 COUNTRY: USA PHONE: 304-743-8600 EMAIL: CHUCK.OLDAKER@SERVICEWIRE.COM TAX ID NUMBER: 55-0491525		3. PRODUCER NAME, ADDRESS TELEPHONE NUMBER AND E-MAIL COMPANY NAME: SERVICE WIRE CO. ADDRESS: 310 DAVIS ROAD CITY, STATE, ZIP CODE: CULLODEN, WV 25510 COUNTRY: USA PHONE: 304-743-8600 EMAIL: CHUCK.OLDAKER@SERVICEWIRE.COM TAX ID NUMBER: 55-0491525	4. IMPORTER NAME, ADDRESS, TELEPHONE NUMBER AND E-MAIL COMPANY NAME: UNKNOWN ADDRESS: CITY, STATE, ZIP CODE: COUNTRY: PHONE: EMAIL: TAX ID NUMBER:	
5. BLANKET PERIOD FROM: 01/01/2021 TO: 12/31/2021					
6. DESCRIPTION OF GOOD(S)	7. HTS	8. ORIGIN CRITERIA	9. COUNTRY OF ORIGIN		
INSULATED WIRE, CABLE COPPER CONDUCTORS, VOLTAGE EXCEEDING 1,000 V	8544.60	B	US		
INSULATED WIRE, CABLE COPPER CONDUCTORS, VOLTAGE NOT EXCEEDING 1,000 V	8544.49	B	US		
COPPER WIRE, OF REFINED COPPER, SOLID, NON-INSULATED	7408.19	B	US		
COPPER WIRE, OF REFINED COPPER, STRANDED, NON-INSULATED	7413.00	B	US		
CONNECTORS AND TERMINATION COMPONENTS, VOLTAGE NOT EXCEEDING 1,000 V	8536.90.40	B	US		
10. By signing below I certify that the goods described in this document qualify as originating and the information contained in this document is true and accurate. I assume responsibility for proving such representations and agree to maintain and present upon request or make available during a verification visit, documentation necessary to support this certification.					
10a. CERTIFIER'S SIGNATURE: 	10b. COMPANY NAME: SERVICE WIRE CO.				
10c. CERTIFIER'S NAME (print or type): CHARLES F. OLDAKER, JR.	10d. CERTIFIER'S TITLE: EXECUTIVE VICE PRESIDENT AND CFO				
10e. CERTIFIER'S EMAIL ADDRESS: CHUCK.OLDAKER@SERVICEWIRE.COM	10f. CERTIFIER'S PHONE NUMBER: 304-743-8600 EXT. 51206				
10g. CERTIFIER TYPE : (Importer/Exporter/Producer)	PRODUCER				
11. DATE (MM/DD/YYYY) 12/7/2020	12. THIS CERTIFICATE CONSISTS OF PAGES, INCLUDING ALL ATTACHMENTS. <u>2</u>				

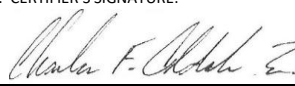
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CERTIFICATE OF ORIGIN

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6. DESCRIPTION OF GOOD(S)	7. HTS	8. ORIGIN CRITERIA	9. COUNTRY OF ORIGIN
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INSULATED WIRE, CABLE COPPER CONDUCTORS, VOLTAGE NOT EXCEEDING 1,000 V	8544.49	B	US
COPPER WIRE, OF REFINED COPPER, SOLID, NON-INSULATED	7408.19	B	US
COPPER WIRE, OF REFINED COPPER, STRANDED, NON-INSULATED	7413.00	B	US
CONNECTORS AND TERMINATION COMPONENTS, VOLTAGE NOT EXCEEDING 1,000 V	8536.90.40	B	US
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10e. CERTIFIER'S EMAIL ADDRESS: CHUCK.OLDAKER@SERVICEWIRE.COM		10f. CERTIFIER'S PHONE NUMBER: 304-743-8600 EXT. 51206	
10g. CERTIFIER TYPE : (Importer/Exporter/Producer)		PRODUCER	
11. DATE (MM/DD/YYYY) 12/7/2020		12. THIS CERTIFICATE CONSISTS OF _____ PAGES, INCLUDING ALL ATTACHMENTS. 2	

UNITED STATES - MEXICO - CANADA AGREEMENT (USMCA)
CERTIFICATE OF ORIGIN

PLEASE PRINT OR TYPE:

1. CERTIFIER NAME, ADDRESS, TELEPHONE NUMBER AND E-MAIL COMPANY NAME: SERVICE WIRE CO. ADDRESS: 4331 NORTH 44TH AVENUE CITY, STATE, ZIP CODE: PHOENIX, AZ 85031 COUNTRY: USA PHONE: 304-743-8600 EMAIL: CHUCK.OLDAKER@SERVICEWIRE.COM TAX ID NUMBER: 55-0491525	2. EXPORTER NAME, ADDRESS, TELEPHONE AND E-MAIL COMPANY NAME: SERVICE WIRE CO. ADDRESS: 4331 NORTH 44TH AVENUE CITY, STATE, ZIP CODE: PHOENIX, AZ 85031 COUNTRY: USA PHONE: 304-743-8600 EMAIL: CHUCK.OLDAKER@SERVICEWIRE.COM TAX ID NUMBER: 55-0491525		
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11. DATE (MM/DD/YYYY) 12/7/2020	12. THIS CERTIFICATE CONSISTS OF <u>2</u> PAGES, INCLUDING ALL ATTACHMENTS.		

INSTRUCTIONS

For purposes of obtaining preferential tariff treatment, this document must be completed legibly and in full and be in the possession of the importer at the time the declaration is made. This document may be completed voluntarily by the importer, exporter or producer.

FIELD 1 - CERTIFIER:

State the full legal name, address (including country), e-mail address and legal tax identification number of the certifier. Legal taxation number is: in Canada, employer number or importer/exporter number assigned by Revenue Canada; in Mexico, federal taxpayer's registry number (RFC); and in the United States, employer's identification number or Social Security Number.

FIELD 2 - EXPORTER:

Provide the exporter's name, address (including country), e-mail address, and telephone number if different from the certifier. This information is not required if the producer is completing the certification of origin and does not know the identity of the exporter. The address of the exporter shall be the place of export of the good in a Party's territory.

FIELD 3 - PRODUCER:

Provide the producer's name, address (including country), e-mail address, and telephone number, if different from the certifier or exporter or, if there are multiple producers, state "Various" or provide a list of producers. A person that wishes for this information to remain confidential may state "Available upon request by the importing authorities". The address of a producer shall be the place of production of the good in a Party's territory.

FIELD 4 - IMPORTER:

Provide, if known, the importer's name, address, e-mail address, and telephone number. The address of the importer shall be in a Party's territory.

FIELD 5 - BLANKET PERIOD:

Indicate the blanket period, if the certification covers multiple shipments of identical goods for a specified period of up to 12 months as set out in Article 5.2 (Claims for Preferential Tariff Treatment).

FIELD 6 - DESCRIPTION OF THE GOOD:

(a) Provide a description of the good. The description should be sufficient to relate it to the good covered by the certification; and
(b) If the certification of origin covers a single shipment of a good, indicate, if known, the invoice number related to the exportation.

FIELD 7 - HTS:

Provide the Harmonized Tariff Schedule classification to the 6-digit level for each good described in Field 6.

FIELD 8 - ORIGIN CRITERIA:

For each good described in Field 6, state which Origin Criteria (A through D) is applicable. The rules of origin are contained in Article 4.2. Note: In order to be entitled to preferential tariff treatment, each good must meet at least one of the criteria below:

A - wholly obtained or produced entirely in the territory of one or more of the Parties, as defined in Article 4.3 (Wholly Obtained or Produced Goods);

B - produced entirely in the territory of one or more of the Parties using non-originating materials provided the good satisfies all applicable requirements of Annex 4-B (Product-Specific Rules of Origin);

C - produced entirely in the territory of one or more of the Parties exclusively from originating materials; or

D - except for a good provided for in Chapter 61 to 63 of the Harmonized System:

(i) produced entirely in the territory of one or more of the Parties;

(ii) one or more of the non-originating materials provided for as parts under the Harmonized System used in the production of the good cannot satisfy the requirements set out in Annex 4-B (Product-Specific Rules of Origin) because both the good and its materials are classified in the same subheading or same heading that is not further subdivided into subheadings or, the good was imported into the territory of a Party in an unassembled or a disassembled form but was classified as an assembled good pursuant to rule 2(a) of the General Rules of Interpretation of the Harmonized System; and

(iii) the regional value content of the good, determined in accordance with Article 4.5 (Regional Value Content), is not less than 60 percent if the transaction value method is used, or not less than 50 percent if the net cost method is used; and the good satisfies all other applicable requirements of this Chapter.

FIELD 9 - COUNTRY OF ORIGIN:

Identify the country of origin of the good using the ISO Country Code ("CA" or "US", or "MX").

FIELD 10 - SIGNATURE BLOCK:

The certification must be signed by the certifier. Indicate whether the certifier is the exporter, producer or importer in accordance with Article 5.2 (Claims for Preferential Treatment). An email address and phone number must be provided.

FIELD 11 - DATE

The certification must be dated when signed.

FIELD 12 - PAGES

Please indicate how many pages are included.