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1340 Airport Commerce Dr, Ste 470, Austin, TX 78741

		•	ail: service@fordav.com		
Date	Customer Name		Address		Work Order #
1/5/2015	Williamson Co. EOC		911 Tracey Chambers Drive		703582
Cust. No.				City / State / Zip	
WCTXGEO		Ben Wassink	Vassink Georgetown, TX 786		512-943-1413
P.O. Number	Name	of Person Requesting Service	E-mail Address		FAX
		Ben Wassink	bwassink@wilco.or	g	
		Description of Cus	tomer Request/ Issue		
		No image from back DM tr	ansmitter in conference room		
ESTIMATE FOR SERVICE / REPAIR					
Item / Part	Qty	Desci	ription	Price	Extended Price
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
		This Estimate does not include	sales tax		\$0.00
		Labor is Estimate, Hours worked will be billed **Shipping Estimate**			\$0.00
					\$0.00
Labor/Travel	Unit		ription	Cost / unit	Extended Price
	2	Labor - Onsite		\$120.00	\$240.00
	1	Trip Fee		\$40.00	\$40.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
Scope of Work:					
Diagnose problems with		•		Materials:	\$0.00
*QUOTE DOES NOT INCLUDE REPAIR FROM CRESTRON IF			Labor / Travel: \$280.0 Total Invoice: \$280.0		
NECESSARY					\$280.00
			Down Payment (if applicable): Balance Due Upon Completion: \$280.		****
Fand AV aball invaige the	-l:4	an mantariala dalam and traval and	Balance Due Upon Completion: \$280.00 s upon completion of service. The client's signature below indicates		
		or materials, labor and travel cost and agrees to the costs herein.			
		which are not specifically identifie			
advance of actual repair.	Jortou, V	men are not opcomedity identifie	a. Additional cools of repairs III	ast bo agree	a to by both parties in
Name of Estimator: Cod	ly R. Se	ebohm	Signature of Estimator:		
Date:1/5/16			/yllk		
Name of Authorizing Pa	rtv-		Signature of Authorizing Party:		
Traine of Authorizing Pa	uty.		Signature of Authorizing Party:		

Title: Date: