

[Company Name]

[Street Address]

[City, ST ZIP]

Phone: (000) 000-0000

Fax: (000) 000-0000

[E-mail Address]

# QUOTATION

**QUOTE #**

2034

**DATE**

2/1/2017

**CUSTOMER ID**

**VALID UNTIL**

3/3/2017

## CUSTOMER INFO

*Prepared By:*

[Name]

[Company Name]

[Street Address]

[City, ST ZIP]

[Phone, E-mail]

## DESCRIPTION OF WORK

ITEMIZED COSTS	QTY	UNIT PRICE	AMOUNT
Service Fee Standard Service Call Visit Fee	1	200.00	200.00
Labor: 5 hours at \$75/hr	5	75.00	375.00
Parts,including sales tax	7	12.95	90.65
Maintenance Fee Inspection fee Management fee	1	100.00	100.00
			-
			-
New client discount		(50.00)	(50.00)
			-
			-
<i>Thank you for your business!</i>	<b>SUBTOTAL</b>		<b>715.65</b>
	<b>OTHER</b>		<b>-</b>
	<b>TOTAL QUOTE \$</b>		<b>715.65</b>

This quotation is not a contract or a bill. It is our best guess at the total price for the service and goods described above. The customer will be billed after indicating acceptance of this quote. Payment will be due prior to the delivery of service and goods. Please fax or mail the signed quote to the address listed above.

Customer Acceptance

Signature

Printed Name

Date

If you have any questions, please contact [Name.Phone, email@address.com]

