PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE IF MY FINAL BILL					M&A Truck and Trailer Repair Inc. 403 North Blvd West Davenport, FL 33837 (352)551-8442		month/mile warranty on all parts and labor unless otherwise specified.		
							Intend	Intended Payment Method:	
WILL EXCEED \$100.				Fax#863-424-0490		CASH CHECK VISA MC			
		WRITTEN ESTIMATE			FLORIDA REGISTRATION #MV88635		Date 1/19/1	Date 1/19/19 Time	
I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCED \$				Name CDST TRANSPORT		Proposed Com	Proposed Completion Date:		
				Address 3102 JOSEPH ROAD		OFFICE			
MY WRITTEN OR ORAL APPROVAL.			City:VALDOSTA State GA Zip31601		CELL	407-468-0641			
I DO NOT REQUEST A WRITTEN ESTIMATE. AUTHORIZED BY: JIM				`	FAX#				
0.0					 Year/Make VOLVO	UNIT 138797	MILEAGE 394785		
SIG	SNED	DA1	l E		VIN 4V4NC9EH8FN191568				
*U/l	Used R/Rebuilt RC/Reco	nditioned NC/ No Chg /Warranty	RD/Reduced/		Save Old Parts: ☐ Yes ☐ N	No (Core may apply)		<u> </u>	
QTY	PART NO	DESCRIPTION	PRICE	EXTEND	Customer Complaint/Problem	n WEEKLY INSP			
1	OPTLP91CB	TAG LIGHT	\$3.21						
					LABOR CHARGES BASED ON: □ FLAT RATE ξ HOURLY RATE \$ 60.00 HR □ BOTH APPLY x Mileage\$1.25per mile		ESTIMATE/DIAGNOSTIC FEE: \$/OR HOURLY AT \$ PER HOUR		
					A storage fee of \$ per day may be applied to vehicles which are not claimed within 3 world		ring days of notification of completion		
					INVOICE # 13626 DESCRIPTION OF REPAIR:		LABOR	CHARGES	
					LE 4 4 100 DE 4 5 100			PARTS \$3.21	
					LF 14/32 RF 15/32 LFI 14/32 LFO 14/32 LRI 21/	32 I PO 20/32		LABOR HR@\$ 60.00 HR	
								\$ 30.00	
					RFI 14/32 RFO 14/32 RRI 19	9/32 RRO 21/32			
								MILES R/TRIP @\$1.25mi	
								** DISPOSAL FEE	
								\$	
Estima	ate good for 30 days. Not respon	nsible for damage caused by theft, fire or a	acts of nature. I here	by authorize				TOLLS \$	
the above repairs, including sublet work, along with the necessary materials. You and your employees may operate my vehicle for the purpose of testing, inspection and delivery at my risk. If I cancel repairs prior to their							SUBTOTAL \$33.21		
completion for any reason, a tear down and reassembly fee of \$ will be applied.						TAX \$2.32			
X		Date					1	BALANCE DUE: \$35.53	