# Ned's Beds 1943 Waldeck Ave. Columbus, OH 43201 (740) 294-2337

PURC	HASE ORDER #
DATE	DATE REQ.
SHIP VIA	FOB
	TERMS

QTY	UNIT	DESCRIPTION	TOTAL PRICE
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### **INVOICE**

# Ned's Beds 1943 Waldeck Ave. Columbus, OH 43201 (740) 294-2337

INVOICE NUMBER	
DATE	
TERMS	FOB
SALESPERSON	
SHIPPED VIA	

				[aa.				
SOLD TO:				SHIPPED TO:				
QTY	UNIT	DESCRIPTION	ON ///		UNIT	RICE	TOTAL	PRICE
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								+
					SUB TO	ΤΔΙ		
					TAX			
Comments:					TOTA	<b>AL</b>		
l								

### **SALES ORDER**

# Ned's Beds 1943 Waldeck Ave. Columbus, OH 43201 (740) 294-2337

Sold By				Date				
Name								
Address								
City								
Telephone								
Cash		COD	Charge	Paid Out		Merchandise Received	Paid on Account	
QTY		DESCRI	PTION			PRICE	AMOUI	NT//
	<u>ni ni ni ni ni n</u>	<u>u u u u u u u u u u u u u u u u u u u </u>	<u>a na na</u>				<u>u nu nu</u>	
					S	SUB TOTAL		
						TAX		
Deschard Des						TOTAL		
Received By:								

Thank You

#### **WORK ORDER**

# Ned's Beds 1943 Waldeck Ave. Columbus, OH 43201 (740) 294-2337

SOLD TO:	
	Date
	DATE
The work severed by this and a shall be rear	formed under the come terms and
The work covered by this order shall be per	
conditions as that included in the Original C	
1. The above work to be paid for at actual c	ost of labor and materials.
Pluspercent(	%)
Pluspercent(	e sum of
	_Dollars
Signed	•
	<del></del>

Thank You

#### **STATEMENT**

# Ned's Beds 1943 Waldeck Ave. Columbus, OH 43201 (740) 294-2337

SOLD TO:	]	DATE		
		AMOUNT REMITTED		
DATE DESCRIPTION DESCRIPTION		PREVIOUS BALANCE	AMOL	JNT/

<b>DATE</b>	DESCRIPTION			<b>AMOUNT</b>
		PRE	VIOUS BALANCE	
PREVIOUS BALANCE	CHARGES	PAYMENTS	NEW BALANCE	

Thank You

#### **Bill of Lading**

DESIGNA	ATE WITH AN (X)	)
BY TRUCK	☐ FREIGHT	

THIS SHIPPING ORDER

must be legibly filled in, in Ink, in Indelible Pencil, or in Carbo and retained by the Agent.

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Original Bill of Lading.

the property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned and destined as indicated below, which said carrie (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 to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any of said property, that every service to be performed hereunder shall be subject to all the terms and conditions of the Uniform Domestic Straight Bill of Lading set forth (1) in Uniform Freight Classification in effect on the date hereof, if this is a rail or a rail-water shipment, or (2) in the applicable motor carrier classification or tariff which govern.

Shipper hereby certifies that he is familiar with all the terms and conditions of the said bill of lading, including those on the back thereof, set forth in the classification or tariff which govern

From			DATE			SHIP	PER'S	NO.	
At		1	CARRIER CARRIER'S				RIER'S	S NO.	
CONSIGNEE AND SESTINATION			ROUTE			DELIV	/ERINC	G CARRIER	
I		I	CAR OR	VEHICLE & NO.					
NO. + DESCR	IPTION OF ARTICLES, SPECIAL MARKS AND EXCEPTIONS			*WEI	ЭНТ	CLASS OR RATE	✓	Subject to Section 7 of conditions of bill of lading, if this shipment is to be delivered to the consignee without	
								recourse on the consigner, the consiger shall sign the following following statement. The carrier shall not make delivery of this shipment without payment of frieght and other lawful charges	
								Per (Signature of Consignor)	
								If charges are to be prepaid, write or stamp here, "To be Prepaid".	
								Received \$	
								to apply in prepayment of the char on the property described hereon	
								Agent or Cashier.	
								Per	
								(The signature here acknowledges only the amounts prepaid).	
								Charges Advanced:	
description of material with appropriate UN or NA number as Standard (HM-126C). Provide emergency response phone no	umber in case of incident or accident. (in box at right)	eric		EMERGENC)	RESPONSE	: PHONE I	NO.		
SHIPPERS CERTIFICATION: This is to certify that to classified, described, packaged, marked and labeled, and are ransportation according to the applicable regulations of the D	in the proper condition for			Т	TITLE			\$	
If the shipment moves between two ports by a carrier by we † Shipper's Imprints in lieu of a stamp; not a part of the Bill of tote - Where the rate is dependent on value, shippers are recent the agreed or declared value of the property is hereby specific	ater, the law requires that the bill of lading shall state wheth Lading approved by the Interstate Commerce Commission. quired to state specifically in writing the agreed or declared va- cally stated by the shipper to be not exceeding	er it	is "carrier	's or shipper's	weight".			C.O.D. SHIPMENT C.O.D. Amt	
THIS SHIPMENT IS CORRECTLY DESCRIBED.  CORRECT WEIGHT IS LBS.	†The fibre boxes used for this shipment conform to the specifications set forth in the box makers certificate thereon, and all other requirments of the Consolidated						nipper	Collection Fee	

	Pro	posa	Page No.	of	Pages
PROPOSAL SUBMITTED TO		PHONE		DATE	
STREET		JOB NAME			
CITY, STATE AND ZIP CODE		JOB LOCAT	ION		
ARCHITECT C	DATE OF PLANS	JOB PHONE	i.		
We hereby submit specifications and estimates for:		l			
THE Propose hereby to furnish materia	al and labor - d	complete ir	n accordance with abov	e specifications,	for the sum of:
			dollars (\$		
Payment to be made as follows:					
All material is a constant to the constant of					
All material is guaranteed to be as specified. All work to be completed in manner according to standard practices. Any alteration or deviation from above involving extra costs will be executed only upon written orders, and will charge over and above the estimate. All agreements contingent upon strike delay beyond our control. Owner to carry fire, tomado and other necessar	e specifications become an extra es, accidents or	Authorized Signature			
workers are fully covered by Work men's Compensation Insurance.		witho	Note: This proposal may be drawn by us if not accepted within		days.

Acceptance of Proposal The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

DATE OF ACCEPTANCE:

SIGNATURE

# **Service Request Form**

Customer	Date								
Address			Sales Order Number						
City	State	Zip	Original Sale Date						
Home Phone	Business Phone		Call Taken By						
Service Requested									
Service Performed									
Service Completed By			Date						
This work has been comple	This work has been completed to my satisfaction.								
SIGNATURE			DATE						

## **ESTIMATE DETAIL**

DATE:	
Est.#:	

(Contractor's Name)	( Owner's Name)
(Contractor's License Number)	(Job Address)
(Contractor's Address)	(City,State,Zip)
(City,State,Zip)	(Block) (Tract)
(Telephone - FAX)	(Telephone - FAX)

DESCRIPTION	EQUIP.	EQUIP. UNIT COST OR					LABOR				
	Equipment	Unit	Unit Price	Total Material	Hours	Rate	Total Labor				

TOTAL	
MATERIAL	

TOTAL MANHOURS TOTAL LABOR TOTAL EQUIP.

GRAND TOTAL

QUAN	PART NO.	DESCRIPTION	SA AMO	LE UNT		MOTOR Auto Repa 625 Graham Road Cuyah	MAT			TIME PROMISE AM	D	REPAIR ORDER			
						Auto Repa	ir Centei				PM				
						625 Graham Road Cuyah	oga Fal	s <i>Call 923-STOI</i>	P	YEAR		AKE DA	TE		
_					NAME					MODEL		W	RITTEN B'	Y	
					ADDRE	ESS				LICENSE		MC	OTOR NUM	MBER	
					CITY			PHONE WHEN READY		PURCHASE ORDER			ODOMETER		
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ADD'L AUTH AMT. TIME BY					I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE					LABOR					
ADD'L AUTH AMT.					DONE ALONG WITH NECESSARY MATERIAL. YOU AND YOUR EMPLOYEES MAY OPERATE ABOVE VEHICLE FOR PURPOSES OF TESTING, INSPECTION OR DE- LIVERY AT MY RISK. AN EXPRESS MECHANIC'S LIEN IS ACKNOWLEDGED ON ABOVE VEHICLE TO SECURE THE AMOUNT OF REPAIRS THERETO. YOU WILL NOT BE HELD RESPONSIBLE FOR LOSS OR DAMAGE TO			$\perp$			PARTS			╄	
ADD'L AUTH AMT.  ESTIMATE TOTAL				+						EPA			+		
			VEHICLE OR ARTIOLES LEFT IN VEHICLE IN CASE OF FIRE. THEFT, ACCIDENT OR ANY OTHER CAUSE BEYOND YOUR CONTROL.												
UNLES	S OTHERWISE PROVIDED	BY LAW, THE SELLEF	R, (ABO\	/E											igsqcure
NAMED DEALERSHIP) HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANT -ABILITY OR FITNESS FOR A PARTICULAR PURPOSE AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID PRODUCTS.			A A		SIGNED	·		+			T4.\/	-		$\vdash$	
						TOTAL	$\dagger \dagger$			TOTAL			T		