

# *ABBOTT'S AVDI WORKORDER*

<b>SERVICE REQUEST #</b>	<b>WO STATUS(PENDING/COMPLETE)</b>		<b>INVOICE #</b>		
<b>CUSTOMER NAME AND INFO</b>	<b>MAKE CHECKS PAYABLE:</b>	<b>TECH</b>	<b>HOURS</b>	<b>TECH</b>	<b>HOURS</b>
	AVDI INC.				
	14805 LEO RD.				
	LEO, IN 46765				

DESCRIPTION OF WORK TO BE PERFORMED:

I APPROVE WORK TO BE PERFORMED SIGNATURE: \_\_\_\_\_ PRINT: \_\_\_\_\_

the above signer agrees to and approves ALL work to be performed and any change orders that may occur during the install

MODEL NUMBER	QTY:	DESCRIPTION OF PRODUCT	PRICE PER	TAX	WAR	ITEM-TOTAL
LABOR-		LABOR-BILLED PER MAN PER 1/2 HOUR				
LABOR-TRIP		TRIP CHARGE				
DISC-		LABOR DISCOUNT				
MISC-HARDWARE		MISC HARDWARE: ZIPTIES, SCREWS, NUTS ETC...				

<b>THE AVDI 8 POINT QUALITY ASSURANCE CHECKLIST:</b>						<b>ITEMS SUB-TOTAL</b>	
CLEAN	OPERATIONAL	ITEM	CLEAN	OPERATIONAL	ITEM	SALES TAX	
		VIDEO SYS			SPEAKERS	LABOR TOTAL	
		DISPLAYS			SATELLITES	TOTAL PRICE	

DESCRIPTION OF WORK ACTUALLY PERFORMED AND FINAL NOTES:

I HEREBY CERTIFY THAT AVDI INC PROVIDED THE SERVICES AND MATERIALS IDENTIFIED ABOVE. I ALSO AGREE BY SIGNING BELOW I AM AUTHORIZING AVDI TO BILL THIS PROJECT IN FULL AND TO RUN MY CREDIT CARD WHEN APPLICABLE. I AGREE TO PAY THE GREATER OF THE TWO, 1% PER MONTH INTEREST OR A \$35 FEE ON ANY PAST DUE BALANCES BEYOND THE PAYMENT TERMS GIVEN BY AVDI AS WELL AS REASONABLE ATTORNEY FEES REQUIRED TO COLLECT ALL PAST DUE AMOUNTS. A \$30 RETURNED CHECK FEE WILL BE APPLIED TO ANY RETURNED CHECKS.

<b>SIGNATURE</b>	<b>PRINT NAME</b>	<b>DATE</b>
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