

FOR VIEWING PURPOSES ONLY

MATERIAL USED

PINELLAS COUNTY SCHOOLS

Vocational Work Order

QUANT	DESCRIPTION	PRICE	AMOUNT

Customer Name _____
 Street _____
 City _____ Zip _____
 Phone Number _____

Date Received _____

Dept. Received _____

Date Work Completed _____

Instructor Signature _____

MAKE	TYPE	YEAR	SERIAL/MODEL NO.	LICENSE NUMBER	SPEEDOMETER READING

OTHER	LAB OBJECTIVE/COMPETENCY	AMOUNT

*Estimated Total Cost \$ _____

*When the non-binding estimate of the work to be done is in excess of \$50, 50% of the estimate

TOTAL PARTS	must be paid prior to the commencement of any work.
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TERMS AND CONDITIONS

- I. All work will be done by students of the Pinellas County Schools for training purposes. The School Board of Pinellas County cannot be responsible for the quality of the work performed by the students.
- II. Pinellas County schools will not be held responsible for loss or damage to equipment or articles left in case of fire, theft, accident or any cause beyond our control.
- III.
 1. All costs will be paid by owner upon receipt of equipment.
 2. Completed item not to be left over 15 days.
- IV. The undersigned authorizes the work under terms and conditions described.

_____ OWNER'S SIGNATURE
 (Signature indicates acceptance of above terms and conditions)

TOTAL PARTS	
35% CHARGE	
LAB FEE	5.00
SUB TOTAL	
SALES TAX	
TOTAL	
LESS DEPOSIT (Receipt No.)	
TOTAL AMOUNT DUE	