



93055

PLEASE PAY FROM THIS INVOICE

1231 Perry Road • Suite 106 • Apex, N.C. 27502 • (919) 467-8823

CUSTOMER P.O. NO.

24-240 Carrier

TECHNICIAN: Brad / Kenny

| | | | _ | | | | • | <u> </u> | |
|---|--------------------------|--------------|-------------------|---------------------|-------------------|------------|--------------|--------------|--|
| INVOICE TO Anthony Powell | | | | JOB NAME | | | | | |
| ADDRESS 2 Long Circle Rd | | | | ADDRESS | | | | | |
| CITY NEW HI | | STATE | 257563 | CITY | | STATE | PHON | E | |
| SERVICE REQUEST | | | | 910-257-3456 | | | | | |
| EQUIPMENT MAKE | MODEL NO. | | | SERIA | SERIAL NO. | | | | |
| EQUIPMENT MAKE | MODEL NO. | | | SERIAL NO. | | | | | |
| WORK PERFORMED | | | QTY MATERIAL | | | | | | |
| 59TP6C100V21-20 | | | | Carrier 96% 2-Stage | | | | | |
| 3624946308 | | | | Gas Furnace 0 | | | | | |
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| AGAGCANPSOIC | | | LP Conversion Kit | | | | | | |
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| | | | | | <u></u> | TOTAL W | ORK | | |
| | | | TRIP CHARGE | | | | | | |
| JOB STATUS COMP INC. | | | TOTAL BEFORE TAX | | | | | | |
| | | | | | | | TAX | | |
| | | | | | T(| OTAL WITH | I TAX | | |
| | | | | | 3% CREDIT CARD PR | | د | | |
| | Management of the Street | inki | and the second | area i e | | GRAND TO | JATC. | 36698.00 | |

TERMS: The title and right of possession to said equipment and malerial shall be and remain in the contractor untit all of said indebtedness is fully paid at which time ownership shall pass to the customer. In case of default in payment, the contractor may enter the outstomer's premises and remove said property without legal process and without liability for trespass or demage to customer's property caused by the removal of said personal property, and this right shall be a continuing one and shall not be waived by contractor's acceptance of partial payments on account or by contractor's exercise of other legal remedies. A service charge of 1.15% per month will be added to invoices thirty-one days after invoice date.

| I HAVE CHECKED WORK AND CHARGES AS STATED ARE CORRECT AND SATISFACTORY: | |
|---|----------------------|
| | CUSTOMER'S SIGNATURE |