



**R & B
CONSTRUCTION, LLC
(330) 720-3740**

Date 7/14/23

PROPOSAL SUBMITTED TO:

NAME _____
ADDRESS
14631 ROBESON RD
NEWTON FALLS GA
PHONE NO _____

WORK WILL BE PERFORMED AT:

ADDRESS

We hereby propose to furnish the materials and perform the labor necessary for the completion of

* REPAIR LEAKING TOILET REMOVE INSTAL NEW WAX RING

* REPAIR & CHANGE LEAKING TOILET SUPPLY LINE

* REMOVE & INSTAL NEW TOILET IN BASEMENT

* PATCH MISC DRYWALL

We hereby propose to furnish material and labor - complete in accordance with the above specifications

Any alteration or deviation from above specifications involving extra costs will be executed only upon written order, and will become an extra charge over and above the estimate

DOWN	\$0
WHEN COMPLETED	\$900
TOTAL:	\$900

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payments will be made as outline above.

Signature _____ Date _____

Signature _____ Date _____

Done Right Services Inc.
PO Box 4
Canfield, OH 44406
Dave Gregory 330-718-6053
donerightservices99@gmail.com

Contractor's Invoice

TO		WORK PERFORMED AT
14631 ROBINSON RD		
N. FALLS OH		
DATE	YOUR WORK ORDER NO	OUR BID NO
2-28-23		

DESCRIPTION OF WORK

TROUBLESHOOT NO POWER TO BATHROOMS
AND FRONT PORCH.
FOUND ISSUE IN OUTSIDE PORCH PLUG.
BACKSTABBED W/ PREP. HOT TAP OUT OF PACK
REWIRE & INSTALL GFI. LINE ONLY.

LABOR
MATERIAL

\$ 125.00

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of _____

_____ Dollars (\$ _____).

This is Partial Full Invoice due and payable by: _____
Month Day Year

In accordance with our Agreement Proposal No _____ Dated _____
Month Day Year



QUALITY PLUMBING & DRAIN

2293 South Lipkey Rd. • North Jackson, OH 44451

OH. Lic. #44870

Phone: (330) 538-7151

Customer Name <i>Mrs Cavucci</i>			Service Tech <i>L11</i>
Address <i>1463/ Robinson Rd</i>			Date of Service <i>2/5/23</i>
City <i>Horton Falls</i>	State <i>OH</i>	Zip <i>44444</i>	Type of Service <input type="checkbox"/> Sewer Drain <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/> Plumbing
Sewer Service Requested			

DESCRIPTION OF WORK / PARTS	CHARGE
<i>Called out For Salt Delivery, R/o</i>	<i>189.90 Salt</i>
<i>Filters/Sewer System Check/chem-</i>	<i>497.50 R/o</i>
<i>Clean, Basement Dropped 10 Bags</i>	<i>285 Chem Clean</i>
<i>#40 all types of Salt Changed</i>	<i>125 Basement Drop</i>
<i>5 stage R/o filters w/ Membrane,</i>	
<i>Ran Chemical Cleaner through</i>	
<i>Iron filter + Softener, Set Computer</i>	
<i>Programming - System will be</i>	
<i>due for leak alarm + Clean this</i>	
<i>Fall, Blow up well Shock - Chemical</i>	<i>Day</i>
<i>entire job site → hauled away</i>	<i>1,097 tax</i>
<i>clean - * Office C-MARK 4</i>	<i>- 329.10</i>
<i>Disc applied</i>	

CHK # 1868

WORK ORDER AUTHORIZATION

I hereby authorize you to perform the above described services and I agree to pay the amounts indicated to the right. I hereby certify that I am duly authorized to order and approve the work requested.

SUB TOTAL

767.90

TAX

-

TOTAL

767.90

SIGNATURE

Patricia Cavucci

DATE

2/5/23