

PAID ON REC NO.	
PAYMENT CASH () CHECK ()	
DATE PAID	RECEIVED BY



**BEVILL STATE
COMMUNITY
COLLEGE**

NO:	
DEPT:	
DATE:	20

Live Work Order

LAST NAME	FIRST	MIDDLE INITIAL	NUMBER	STREET	CITY
PHONE NO.	PHONE WHEN READY? () YES () NO	RECEIVED DATE	20	PROMISED DATE	20

MAKE AND MODEL:

DESCRIPTION OF NEEDED REPAIR:

MATERIALS USED

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT	SUPPLIER'S INVOICE NO.

Any item left 30 days after notice will become the property of Bevill State Community College.

I hereby authorize the above work to be done, along with any necessary materials. I do hereby acknowledge that the work will be done by students, and that in view of this fact, I may not hold anyone responsible for any errors or quality of workmanship. No warranties offered, expressed, or implied.

Customer's Signature

TOTAL					COMMENTS:
SHOP FEE					
SUB-TOTAL					
TAX OR TAX NO.					
LESS DEPOSIT					
PAY THIS TOTAL					