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| West Madison Utility District  Committed to Providing Cean, Safe Water To All Our Residents | QUOTE |
| 443 Livingston Vernon RoadP.O. Box 27Flora, MS 39071(601) 879-9718wmud.myruralwater.com |  INVOICE \_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Customer ID: \_\_\_\_\_\_\_\_\_\_ | Expiration Date **\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| Person requested Quote  | Job or Service Description | Due date |
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| Job | Description  |  Quote Amount $  |  Total  |
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|  | Subtotal  |   |
|  | Total  |   |

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| Quotation prepared by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *\*This is a quote only for the services named above subject to the approval of the West Madison Utility District Board*.To accept this quotation, sign here and return: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |