

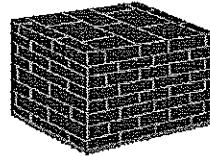
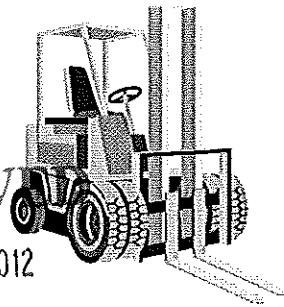
A-1 SOD INC. dba
 COTTOM'S A-1 SOD
 4250 MARION COUNTY ROAD
 WEIRSDALE, FL 32195
 USA

Voice: 352-751-4434
 Fax: 352-751-4503

RECEIVED

NOV - 8 2012

LAKE COUNTY
 ROAD OPERATIONS



INVOICE

Invoice Number: 217080
 Invoice Date: Nov 5, 2012

Bill To:
 LAKE COUNTY ROAD OPERATIONS
 PO BOX 7800
 TAVARES, FL 32778

Ship to:
 UNDERPASS RD. AND SR 50
 ON CR 33 EAST SHOULDER

Customer ID	Customer PO	Payment Terms	
19007	20130083	Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
166	INSTALL		12/5/12

Quantity	Item	Description	Unit Price	Amount
		6900 SF BAHIA SOD INSTALLED AND ROLLED LAKE COUNTY ROAD OPERATIONS UNDERPASS RD AND SR 50 ON CR 33 EAST SHOULDER		1,138.50

OK TO PAY. Signature: *[Signature]*
 PO#: 20130083 11/13/12
 Acct#: 1120.5053200.830 530
 Date Goods Rec'd 11-05-12

TERMS: CASH ON RECEIPT UNLESS CREDIT HAS BEEN ESTABLISHED, NET 10 DAYS AFTER DATE OF INVOICE. 1 1/2 % MONTHLY SERVICE CHARGE ON ALL PAST DUE ACCOUNTS.

Subtotal	1,138.50
Sales Tax	
Total Invoice Amount	1,138.50
Payment/Credit Applied	
TOTAL	1,138.50

[Handwritten: 11-09-12]

GUARANTEE: New Installs-30 Days-Provided proper maintenance is done: Watering and starting a spray program for bugs and fungus within 10 days of installation. All problems with any grass must be reported within 7 days. There is NO GUARANTEE on grass picked up or delivered, as we are not responsible once sod is accepted by customer. All grass must be installed within 24 hours of taking possession. With proper watering, spraying, & sunlight, grass will thrive.

Title to the material herein described is retained by Cottom's A-1 Sod, Inc. and the same shall not pass or become vested in purchaser until the full purchase price for same has been paid in full. In case of default in the payment of any part of the purchase price, the entire unpaid balance shall at once become due and payable and Cottom's A-1 Sod, Inc. shall have full right and power to repossess the material herein. In case of default, the purchaser shall pay all costs and damages including reasonable attorney's fees which may be sustained by Cottom's A-1 Sod, Inc.

SIC



To: Cottoms Sod **From: Public Works Road Operations**

Fax: 352-728-2199 **Phone : (352) 343-6439**

Phone: 352-728-2913 **Pages: 1**

Re: Sod Installation

REQUEST FOR SOD INSTALLED

Install Date Requested: A.S.A.P.

Road Seg. #: 2-2409-04

Delivery address: CR 33

Section: 14 Town: 22 Range: 24

Directions to Delivery Point: Work area is between Underpass Road and SR 50 on CR 33 east shoulder

Type of sod: bahia Quantity: 6,900 sq. ft.

Notes:

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

County Representative: Bob Baker

Date: 10-30-12

Work completed and OK to Pay, Yes No

Inspected by: Bob Baker

Date: 11-05-2012

Invoice # : 217080

DW



LAKE COUNTY
FLORIDA

To _____ From: **Public Works Road Operations**

Fax: _____ Phone : **(352) 343-6439**

Phone: _____ Pages: **1**

Re: Sod Installation

REQUEST FOR SOD INSTALLED

CR33

Install Date Requested: ASAP _____ **Road Segment # 2-2409-04**

Delivery address: Between SR 50 and Underpass RD. East Side

Section: 14 **Town: 22** **Range: 24**

Directions to Delivery Point: SR27 to SR50 west to Mascotte to Cr33North one half of mile east side of road.

Type of sod: Bahia **Quantity : 6240 sq. ft.** *6,900 sq. ft.*

Notes: *This is for a road edge*

Prior to performance of work, questions concerning the measurements shall be addressed and agreed upon in writing either by the Maintenance Area Supervisor or the Senior Contracting Officer. No work shall be done without an agreement. Please send invoice to the address listed below.

Please Contact us if there is a different quantity needed than what was ordered.

County Representative: _____

Date: _____

Work completed and OK to Pay, Yes <input type="checkbox"/> No <input type="checkbox"/>	
Invoice #	
Inspected by :	Date: