

Summary of Sheriff's Documentation
05/20/2025

	<u>Amount</u>	<u>Check #</u>
Sale of Surplus Equipment		
364041	\$190	0003171
Insurance Proceeds - Automobile	\$3,071	0013843
364080	\$327	0138833
	<u>\$3,398</u>	
	<u><u>\$3,588</u></u>	

Marion County Sheriff's Office

Post Office Box 1987
Ocala, Florida 34478-1987

COPY

4/10/2025

RECEIPT # 54710

CASH RECEIPT

<u>Received From:</u>	<u>Payment Type</u>	<u>Reference #</u>	<u>Amount Received</u>
D&S PALLET RECYCLE LLC	Check	0003171	190.00

Description:
PALLET RECYCLING 1/31/25 - 3/28/25

001-0000-000 208000.000 DUE TO BOCC 190.00



D&S PALLET RECYCLE LLC
2640 NW 35th ST
OCALA, FL 34475

South State Bank
4905 NW BLITCHTON RD
OCALA, FL 34482
83-1403/631

3171

04/02/2025

PAY TO THE ORDER OF Marion County Jail \$ ****190.00**

One hundred ninety and 00/100*****

DOLLAR

Marion County Sheriffs Office
PO Box 1987,
Ocala, FL 34478

VOID AFTER 90 DAYS



[Handwritten Signature]
AUTHORIZED SIGNATURE MP

MEMO



FEB 13 2025

LC.

WE BUY SELL & REPAIR USED PALLETS

BY FISCAL

1/31/25

RECEIPT

INVOICE NO.

DATE _____

P.O. #

TERMS

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
56		✓ 100% 197		
Total			TOTAL	

Thank You!



Marion County Jail

[illegible]



RECEIPT

INVOICE NO.
DATE <u>2/7/25</u>
P.O. #
TERMS <u>Net 30</u>

Marron County Jail

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
<u>60</u>		<u>Pallets In</u>		
<u>58</u>		<u>48x40's</u>		
<u>2</u>		<u>Nova Inc</u>		
		<u>197</u>		
TOTAL				

Thank You!



TERMS

Marion County Jail

[illegible]



Marion County Jail

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
49		Pallets In		
45		48x40's		
4		No Value		
		✓ Oct 1977		
			TOTAL	



RECEIPT

INVOICE NO.
DATE <u>2/24/25</u>
P.O. #
TERMS <u>pdch #3171</u>

Marion County Jail

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
50		Pallets In	APP 3.50	
42		48x40's		
8		No Value	BY FISCAL	
TOTAL				

Thank You!
2/24/25



2/28/25

Alvin (only) Jan 1
Decker, FL

Thank You!



RECEIPT

INVOICE NO.
DATE <u>2/28/25</u>
P.O. #
TERMS <u>pdch #3171</u>

<u>Marion County Jail</u>
<u>Ocala FL</u>

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
22		pallets In		
21		48x40's		
1		No Value		
Cp #6363				
TOTAL				

Thank You!



RECEIVED

RECEIPT

MAR 21 2025

Marion County, Ind.

BY FISCAL

DATE _____

P.O. #

TERMS

[illegible]

Thank You!



Marron County Jail

[illegible]



TERMS

MAR 21 2025

BY FISCAL

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
85		Pallets In		
		X Pallets 197		
Thank You!				TOTAL

Thank You!



Marion County Jail

RECEIVED

[illegible]

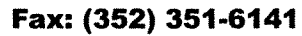
Thank You!



Marion County Jail

~~RECEIVED~~

Thank You!



Order #3171

Marion County Jail

QTY.	GRADE	DESCRIPTION	UNIT PRICE	AMOUNT
52		Pallets In		APR 10 2025
48		48 x 40's		
4		No Value		BY FISCAL
		S. Smith 197		
Thank You!				TOTAL

Marion County Sheriff's Office

Post Office Box 1987
Ocala, Florida 34478-1987

COPY

4/16/2025

RECEIPT # 54791

CASH RECEIPT

<u>Received From:</u>	<u>Payment Type</u>	<u>Reference #</u>	<u>Amount Received</u>
FLORIDA SHERIFF'S RISK MANAGEMENT	Check	0013843	3,070.57

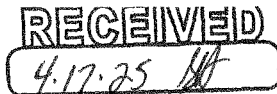
Description:

VEH DAMAGE REIMBURSEMENT S. STRUBLE VEH# 40493, CASE# EV2025092886 AND R. STRADLING VEH#56996, EV2025092515

001-0000-000 208000.000 DUE TO BOCC

3070.57

FL Sheriffs Risk Mgmt Fund
To: Marion County S.O.



MAR1000

Check Number: 0000138343
Date: 03/27/2025

Claimant/Memo	Claim Number	Invoice No./Ref	Loss/Service Dates	Payment Code	Paid Amount
Marion EV2025092515 - B. Schaffer Unit # 56996	APHD20250098421				1035-\$2,630.57
Marion EV2025092886 - B. Schaffer Unit # 40493	APHD20250098892				1016-\$440.00

TOTALS: \$3,070.57

WARNING - THIS CHECK IS PROTECTED BY SPECIAL SECURITY FEATURES

FL Sheriffs Risk Mgmt Fund
2750 Chancellorsville Drive
Tallahassee, FL 32312

BB&T
Tallahassee, FL 32317-2090
63-9138/2631

0000138343

DATE
03/27/2025

PAY Three Thousand Seventy Dollars and 57 Cents

AMOUNT
\$3,070.57

TO THE
ORDER OF Marion County Sheriff's Office

P.O. Box 1987
Ocala, FL 34478

VOID AFTER 90 DAY:

SECURITY FEATURES INCLUDE MICROPRINTING • VOID PANTOGRAPH • ENDORSEMENT BACKER • BROWNSTAIN CHEMICAL REACTANT

Memorandum

Date: March 27, 2025

To: Stacy Hall, Marion County SO

From: Brandy Schaffer *BS*

Re: Windshield Claim-Unit # 40493

The information contained in this communication is confidential and intended solely for the use of the addressee and may be subject to an attorney/client privilege and/or exempt from disclosure under the public records laws. Any unauthorized use, disclosure or copying is prohibited and may be unlawful. If you have received this communication in error, please contact the undersigned immediately.

Our Event #: **EV2025092886**

Check Amount: **\$440.00**

Please see the attached check.

*Windshield Claim
Event Date 3-19-25
Steven Struble # 5846 (Dept # 1016)
Veh # 40493 2021 Ford F3500*

Marion County Sheriff's Office
 Post Office Box 1987
 Ocala, Florida 34478-1987

**PURCHASE
 REQUISITION NO. 78381**

Requesting Office:
 FLEET SERVICES

Requested By:
 Jamie Nelson

Vendor:
 ACCURATE AUTO GLASS
 690 NW 30TH AVE
 OCALA, FL 34475

Reason for Request:
 WINDSHIELD REPLACEMENT FOR VEH 40493
 DEPT 1016 INV 8101

Date of Requisition 3/20/2025		Date Needed 3/20/2025	Purchase Order #		Requisition Total \$440.00	
Item #	Qty	U/M	Description		Unit Price	Amount
1	1.00	EACH	WINDSHIELD REPLACEMENT - MULTIPLE STONE CHIPS IN WINDSHIELD STARTING TO CRACK		440.000	440.00
			<u>Account Codes</u>	<u>Distribution Amounts</u>	<u>Total Requested</u>	<u>\$440.00</u>
			000-0000-000 000000.000	440.00		

APPROVALS	

8101

Accurate Auto Glass LLC

175 Marion Oaks Pass
Ocala, FL 34473
Florida Registration # MV-65212

352-245-4200
Fax: 352-307-4396

INVOICE DATE

B Name: _____
L Address: _____
L City & State: _____
T Zip Code: _____
O Phone no.'s: (H) _____

Name: _____
Address: _____
City & State: _____
Zip Code: _____
Phone no.'s: (H) _____

AGENT	POLICY #	P.O. CLAIM #	AUTHORIZED BY AGENT

VEHICLE INFORMATION					
YEAR	MAKE	MODEL	VEHICLE ID. #	TAG #	DATE OF LOSS
Qty.	Inventory #	Description	List Price	Net Price	Amount

LOCATION OF VEHICLE / COMMENTS

while in for service inspection found
multiple stone chips in windshield
starting to crack

I HAVE COMPARED THE GOODS RECEIVED
TO THE DOCUMENT AND NOTE THE
FOLLOWING TO BE ACCEPTABLE

DESCRIPTION WindshieldQUANTITY 1 CONDITION Good3925 SIGNATURE Roy Green

Labor

Sealants / Kit

Moldings

Other

Misc. Materials & Supplies

5723 SUB TOTAL

Sales Tax

Sub Total
Before DeductibleLess
Customer Deductible

I WILL NOT ACCEPT WINDSHIELD REPAIR
HAVING BEEN GIVEN THE ALTERNATIVE
AND HAVING SEEN IT'S EFFECT.

X

☐ CASH
☐ CHECK
☐ CREDIT
CARD

RAT / UNIT NO.

MILEAGE

INSTALLER'S NAME

CONSISTANT WITH FLORIDA MOTOR VEHICLE
REPAIR ACT, F.S. 559.901-559.922, I HEREBY
ACKNOWLEDGE RECEIPT OF WRITTEN ESTIMATE

ESTIMATE

S

Please Pay to **Accurate Auto Glass** →

TOTAL

FULL SETTLEMENT OF ALL LOSS UNDER YOUR POLICY DESCRIBED ABOVE AND UPON SUCH
PAYMENT BEING MADE, ALL CLAIM (AND DEMAND) FOR LOSS AND DAMAGE DESCRIBED ABOVE
SHALL BE THEREBY FOREVER DISCHARGED. IF FOR REASONS NOW UNKNOWN, MY POLICY
DOES NOT COVER THIS CLAIM, I AGREE TO PAY THE FIRM LISTED ABOVE FOR THE REPAIRS

There will be a finance charge calculated at 1% per month on any
outstanding balance carried from this invoice in excess of 30 days. In
the event it becomes necessary for Accurate Auto Glass to institute
any legal action for the collection of sums due under this invoice, then
the purchaser agrees to pay all costs including all reasonable attorney fees incurred.

CUSTOMER
SIGNATURE (X)DATE
INSTALLED

RECEIVED
4.17.25 SA



Memorandum

Date: March 27, 2025
To: Stacy Hall, Marion County SO
From: Brandy Schaffer *BS*
Re: Marion County SO-Unit # 56996

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Our Event #: EV2025092515
Check Amount: \$2,630.57
Please see the attached check.

*Trans # 2501170096
Event Date 2-17-25
Rodney Stradling # 5723 (Dept 1035)
Veh # 56996 2024 Ford F150*

Marion County Sheriff's Office
 Post Office Box 1987
 Ocala, Florida 34478-1987

**PURCHASE
 REQUISITION NO. 78380**

Requesting Office:
 FLEET SERVICES

Requested By:
 Jamie Nelson

Vendor:
 RALPH DHANRAJ
 DBA EFFICIENT AUTO BODY
 10857 SW 91ST AVE
 OCALA, FL 34481

Reason for Request:
 REPAIRS TO VEH 56996 DEPT 1035 INV
 932912 ACC TR # 2501170096

Date of Requisition 3/20/2025		Date Needed 3/20/2025		Purchase Order #		Requisition Total \$5,130.57	
Item #	Qty	U/M	Description			Unit Price	Amount
1	1.00	EACH	PARTS			3,929.570	3,929.57
2	10.20	EACH	BODY LABOR			55.000	561.00
3	6.40	EACH	PAINT LABOR			55.000	352.00
4	6.40	EACH	PAINT SUPPLIES			45.000	288.00
			<u>Account Codes</u>		<u>Distribution Amounts</u>		<u>Total Requested</u>
			000-0000-000 000000.000		5130.57		\$5,130.57
							<i>Ded. - 2500.00</i>
							<i>\$ 2,630.57</i>

APPROVALS	

EFFICIENT AUTO BODY INC.
10857 SW 91 AVENUE
Ocala, FL 34481

Invoice

Date	Invoice #
03-13-2025	932912

Fax: # 352-624-0091

Bill To
Marion County Sheriff's Office
692 NW 30th Ave
Ocala, FL 34475

Email	P.O. No.	Terms
Efficientabinc3@aol.com		

Quantity	Description	Rate	Amount
1	VIN # 1FTFW1L59RKD31151		
2	VEH # 56996		
3	Parts		\$3,929.57
4	Body Labor	\$55.00	\$561.00
5	Paint Labor	\$55.00	\$352.00
6	Paint Supplies	\$45.00	\$288.00
<p><i>Accident Transaction # 2501170096</i></p> <p>I HAVE COMPARED THE GOODS RECEIVED TO THE DOCUMENT AND NOTE THE FOLLOWING TO BE ACCEPTABLE</p> <p>DESCRIPTION <u>Accident</u></p> <p>QUANTITY <u>1</u> CONDITION <u>Good</u></p> <p>DATE <u>3-19-25</u> SIGNATURE <u>[Signature]</u></p> <p><u>D 1035</u></p> <p><u>W 94687</u></p> <p><u>V 56996</u></p>			
Subtotal			\$5,130.57
Sales Tax(7.0%)			
Total Cost Rep			\$5,130.57
Deductible			
Net Cost of Rep			\$5,130.57
BALANCE DUE			\$5,130.57

EFFICIENT AUTO BODY
10857 S W 91ST AVE, OCALA, FL 34481
Phone: (352) 624-0037

Workfile ID: 11ee6d38
PartsShare: 8rSbqH
Federal ID: 205482966

Preliminary Estimate

Customer: MARION COUNTY, SHERIFF'S OFFICE VEH # 56996

Job Number:

Insured: MARION COUNTY,
SHERIFF'S OFFICE VEH #
56996

Policy #:

Claim #:

Type of Loss:

Date of Loss:

Days to Repair: 0

Point of Impact:

Owner:

MARION COUNTY, SHERIFF'S OFFICE
VEH # 56996
(352) 732-8181 Business

Inspection Location:

EFFICIENT AUTO BODY

10857 S W 91ST AVE
OCALA, FL 34481
Repair Facility
(352) 624-0037 Business

Insurance Company:

VEHICLE

2024 FORD F-150 XL SuperCrew 4WD w/6.5' Box 4D LONG 8-5.0L Gasoline Port/Direct Injection

VIN: 1FTFW1L59RKD31151

Interior Color:

Mileage In:

Vehicle Out:

License:

Exterior Color:

Mileage Out:

State:

Production Date:

Condition:

Job #:

TRANSMISSION

Automatic Transmission

4 Wheel Drive

POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

Heated Mirrors

DECOR

Dual Mirrors

Tinted Glass

Overhead Console

CONVENIENCE

Air Conditioning

Intermittent Wipers

Tilt Wheel

Cruise Control

Keyless Entry

Alarm

Steering Wheel Touch Controls

Telescopic Wheel

Navigation System

Backup Camera

Parking Sensors

Remote Starter

RADIO

AM Radio

FM Radio

Stereo

Search/Seek

Auxiliary Audio Connection

Satellite Radio

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wheel Disc Brakes

Traction Control

Stability Control

Front Side Impact Air Bags

Head/Curtain Air Bags

Hands Free Device

Xenon or L.E.D. Headlamps

Blind Spot Detection

Lane Departure Warning

SEATS

Cloth Seats

WHEELS

Styled Steel Wheels

PAINT

Clear Coat Paint

OTHER

California Emissions

TRUCK

Rear Step Bumper

Trailer Hitch

Trailer Package

Preliminary Estimate

Customer: MARION COUNTY, SHERIFF'S OFFICE VEH #
56996

Job Number:

2024 FORD F-150 XL SuperCrew 4WD w/6.5' Box 4D LONG 8-5.0L Gasoline Port/Direct Injection

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		FRONT BUMPER					
2		O/H front bumper				4.2	
3	*	Repl Bumper w/o front park aid pnt to mtch	RL3Z17757BAPTM	1	368.10	Incl.	1.3
4		Add for Clear Coat					0.5
5	#	Repl R Frt Bumper Cover Reinforcement		1	41.10		
6	*	Repl RT Frt Bumper Air duct	ML3Z17F804B	1	54.29	Incl.	
7	#	R&I Frt Upr Bumper Assy				0.2	
8	#	Repl Frt Bumper Face Bar		1	1,078.95		
9	#	Repl RT Frt Bumper Fog Lamp Bezel		1	72.05		
10	*	Repl RT Frt Upper Bumper bracket	RL3Z17B836B	1	16.88	Incl.	
11	#	Repl R Frt Bumper Lamp Mount Bracket		1	50.00		
12	#	Repl R Frt Lwr Bumper Bracket		1	23.75		
13	#	Adjust Headlamp		1		0.4	
14	#	Repl R Frt Combination Lamp Assembly		1	1,547.27	0.6	
15		GRILLE					
16		R&I R&I grille assy				Incl.	
17	#	Ajust / Check Fog Lamps		1		0.4	
18	#	Repl R Frt Fog Lamp Assembly		1	102.37	0.2	
19		FENDER					
20		Repl RT Fender (ALU)	VL3Z16005E	1	294.63	2.7	2.2
21		Add for Clear Coat					0.9
22		Add for Edging					0.5
23	*	Repl RT Fender liner	ML3Z16102T	1	280.18	Incl.	
24	#	R&I R Cowl Top Grille				0.2	
25		FRONT DOOR					
26	*	Blnd RT Door Outside					1.0
27		R&I RT Handle, outside black				0.7	
28	*	R&I RT Frt Rear View Mirror				0.3	
29		R&I RT Belt molding black				0.3	
30	#	CLAIM # EV2025092515		1			
31	#	VEH # 56996		1			
SUBTOTALS					3,929.57	10.2	6.4

Preliminary Estimate

**Customer: MARION COUNTY, SHERIFF`S OFFICE VEH #
56996**

Job Number:

2024 FORD F-150 XL SuperCrew 4WD w/6.5' Box 4D LONG 8-5.0L Gasoline Port/Direct Injection

ESTIMATE TOTALS

Category	Basis		Rate	Cost \$
Parts				3,929.57
Body Labor	10.2 hrs	@	\$ 55.00 /hr	561.00
Paint Labor	6.4 hrs	@	\$ 55.00 /hr	352.00
Paint Supplies	6.4 hrs	@	\$ 45.00 /hr	288.00
Subtotal				5,130.57
Grand Total				5,130.57

****IN BUSINESS SINCE '06****

****STATE LICENSE # MV61573****

THANK YOU FOR LETTING US SERVE YOU

PRICES ARE SUBJECT TO CHANGE AFTER 3 MONTHS

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE (FLORIDA STATUTES TITLE XLVI, CHAPTER 817.234). FAILURE TO USE THE INSURANCE PROCEEDS IN ACCORDANCE WITH THE SECURITY AGREEMENT, IF ANY, COULD BE A VIOLATION OF S. 812.014, FLORIDA STATUTES. IF YOU HAVE ANY QUESTIONS, CONTACT YOUR LENDING INSTITUTION. IF A CHARGE FOR SHOP SUPPLIES OR HAZARDOUS OR OTHER WASTE REMOVAL IS INCLUDED ON THIS ESTIMATE, PLEASE NOTE THE FOLLOWING: "THIS CHARGE REPRESENTS COSTS AND PROFITS TO THE MOTOR VEHICLE REPAIR FACILITY FOR MISCELLANEOUS SHOP SUPPLIES OR WASTE DISPOSAL." IF A CHARGE FOR NEW TIRES OR A NEW OR REMANUFACTURED LEAD-ACID BATTERY IS INCLUDED ON THIS ESTIMATE, PLEASE NOTE THE FOLLOWING: A \$1.00 FEE FOR EACH NEW MOTOR VEHICLE TIRE SOLD AT RETAIL IS IMPOSED ON ANY PERSON ENGAGING IN THE BUSINESS OF MAKING RETAIL SALES OF NEW MOTOR VEHICLE TIRES WITHIN THE STATE OF FLORIDA. FLORIDA STATUTES TITLE XXIX CHAPTER 403.718. A \$1.50 FEE FOR EACH NEW OR REMANUFACTURED LEAD-ACID BATTERY SOLD AT RETAIL IS IMPOSED ON ANY PERSON ENGAGING IN THE BUSINESS OF MAKING RETAIL SALES OF NEW OR REMANUFACTURED LEAD-ACID BATTERIES WITHIN THE STATE OF FLORIDA. FLORIDA STATUTES TITLE XXIX 403.7185.

Marion County Sheriff's Office

Post Office Box 1987
Ocala, Florida 34478-1987

4/24/2025

RECEIPT # 54839

CASH RECEIPT

<u>Received From:</u>	<u>Payment Type</u>	<u>Reference #</u>	<u>Amount Received</u>
FLORIDA SHERIFF'S RISK MANAGEMENT	Check	0138833	327.41

Description:

VEH DAMAGE REIMBURSEMENT POWELL VEH #40014, EV2025093231

001-0000-000 208000.000 DUE TO BOCC

327.41

FL Sheriffs Risk Mgmt Fund
To: Marion County S.O.



MAR1000

Check Number: 0000138833
Date: 04/22/2025

Claimant/Memo	Claim Number	Invoice No./Ref	Loss/Service Dates	Payment Code	Paid Amount
Marion EV2025093231 - B. Schaffer Unit # 40014	APHD20250099263				1015-\$327.41

001-0000-000 208000.000

TOTALS: \$327.41

WARNING - THIS CHECK IS PROTECTED BY SPECIAL SECURITY FEATURES

FL Sheriffs Risk Mgmt Fund
2750 Chancellorsville Drive
Tallahassee, FL 32312

BB&T
Tallahassee, FL 32317-2090

0000138833

63-9138/2631

DATE
04/22/2025

PAY Three Hundred Twenty Seven Dollars and 41 Cents

AMOUNT
\$327.41


TO THE
ORDER OF Marion County Sheriff's Office

P.O. Box 1987
Ocala, FL 34478

VOID AFTER 90 DAY:

RECEIVED
4.24.25 SK

Memorandum

Date: April 22, 2025
To: Stacy Hall, Marion County SO
From: Brandy Schaffer 
Re: Windshield Claim-Unit # 40014

The information contained in this communication is confidential and intended solely for the use of the addressee and may be subject to an attorney/client privilege and/or exempt from disclosure under the public records laws. Any unauthorized use, disclosure or copying is prohibited and may be unlawful. If you have received this communication in error, please contact the undersigned immediately.

Our Event #: EV2025093231

Check Amount: \$327.41

Please see the attached check.

Windshield Claim
Event Date 4.1.25
Tyler Powell # 7232 Dept # 1015
Veh # 40014 2019 Ford Int. SUV

Marion County Sheriff's Office
 Post Office Box 1987
 Ocala, Florida 34478-1987

**PURCHASE
 REQUISITION NO. 78628**

Requesting Office:
FLEET SERVICES

Requested By:
 Jamie Nelson

Vendor:
 ACCURATE AUTO GLASS
 175 MARION OAKS PASS
 OCALA, FL 34473

Reason for Request:
 WINDSHIELD REPLACEMENT FOR VEH 40014
 DEPT 1015 INV 8117

Date of Requisition 4/04/2025		Date Needed 4/04/2025		Purchase Order #		Requisition Total \$327.41	
Item #	Qty	U/M	Description			Unit Price	Amount
1	1.00	EACH	WINDSHIELD REPLACEMENT FOR VEHICLE 40014			327.410	327.41
			<u>Account Codes</u>		<u>Distribution Amounts</u>	<u>Total</u>	
			000-0000-000 000000.000		327.41	<u>Requested</u>	<u>\$327.41</u>

APPROVALS	

8117

Accurate Auto Glass LLC

175 Marion Oaks Pass
Ocala, FL 34473
Florida Registration # MV-65212

352-245-4200
Fax: 352-307-4396

INVOICE DATE

B Name: _____
I Address: _____
L City & State: _____
T Zip Code: _____
O Phone no.'s: (H) _____

Name: _____
Address: _____
City & State: _____
Zip Code: _____
Phone no.'s: (H) _____

AGENT	POLICY #	POL. CLAIM #	AUTHORIZED BY AGENT

VEHICLE INFORMATION

YEAR	MAKE	MODEL	VEHICLE I.D. #	TAG #	DATE OF LOSS
------	------	-------	----------------	-------	--------------

Qty.	Inventory #	Description	List Price	Net Price	Amount
------	-------------	-------------	------------	-----------	--------

LOCATION OF VEHICLE / COMMENTS

On 4-1-25 while driving west on
Hwy 40 A turkey flew up hitting
windshield causing it to break

HAVE COMPARED THE GOODS RECEIVED
TO THE DOCUMENT AND NOTE THE
FOLLOWING TO BE ACCEPTABLE

DESCRIPTION windshield

QUANTITY 1 CONDITION good

DATE 4-3-25 SIGNATURE [Signature]

Labor

Sealants / Kit

Moldings

Other

Misc. Materials & Supplies

SUB TOTAL

Sales Tax

Sub Total
Before DeductibleLess
Customer DeductiblePlease Pay to **Accurate Auto Glass** →

TOTAL

FULL SETTLEMENT OF ALL LOSS UNDER YOUR POLICY DESCRIBED ABOVE AND UPON SUCH
PAYMENT BEING MADE, ALL CLAIM (AND DEMAND) FOR LOSS AND DAMAGE DESCRIBED ABOVE
SHALL BE THEREBY FOREVER DISCHARGED. IF FOR REASONS NOW UNKNOWN, MY POLICY
DOES NOT COVER THIS CLAIM, I AGREE TO PAY THE FIRM LISTED ABOVE FOR THE REPAIRS

There will be a finance charge calculated at 1% per month on any
outstanding balance carried from this invoice in excess of 30 days. In
the event it becomes necessary for Accurate Auto Glass to institute
any legal action for the collection of sums due under this invoice, then
the purchaser agrees to pay all costs including all reasonable attorney
fees incurred.

CUSTOMER
SIGNATURE (X)DATE
INSTALLED