

## **Connecting Signs, Inc.**

2643 Midpoint Drive, Suite A Fort Collins, CO 80525 Ph: (970) 493-0133 FAX: (970) 493-0469

Email: info@connectingsigns.com
Web: http://www.connectingsigns.com



Page 1 of 2

Order Date:	9/6/2017 3:14:01PM Account No.: 1506		
Billed To: Contact: Address:	Loveland Housing Authority Stephanie Slayton 375 W 37th St Loveland,CO 80538	Created Date: Salesperson: Email: Office Phone: Office Fax:	Bruce Gardner bruce@connectingsigns.com (970) 493-0133
Email: Office Phone:	, , , , , , , , , , , , , , , , , , , ,		

**Description:** Van Graphics

			Quantity	Unit Price	Subtotal		
1	Product: Vehi	icle Wraps	1.00	\$2,485.68	\$2,485.68		
	<b>Description:</b> Partial wrap including perforated (one-way) vinyl graphics on side and back windows; includes installation						
	*** This option includes no graphics on hood and front quarter panels ***						
	• 1- Full Wrap	p on a 3500 Extended Van / 2	017				
	<ul> <li>Printed on Premium Wrap Cast Vinyl 2mil stock material with HP L360 at Normal Mode</li> </ul>						
	<ul> <li>Laminated v</li> </ul>	vith <mark>Premium Cast Gloss La</mark> r	n				
	Drivers Side, Passenger Side, Rear,						
2	Product: Desi	ign	1.00	\$300.00	\$300.00		
•	Description:	Design, Layout, Proofing					

Print Date: 11/2/2017 Tax ID:80-0781746



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Email: info@connectingsigns.com Web: http://www.connectingsigns.com Invoice #: 12927

**Customer #: 1506** 

9/6/2017 3:14:01PM

Order Created:

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## Payments for Order

. uj				
Date	Method	Tracking Number	Amount	
9/06/2017	Freedompay Visa	xxxx3142	2,886.37	
			Order Subtotal:	\$2,785. <del>68</del>
			Total Taxes:	\$100.69
			Total:	\$2,886.37
			<b>Total Payments:</b>	\$2,886.37
			Order Balance:	\$0.00
due upon receipt.			Order Balance.	Ψ
		Date Method 9/06/2017 Freedompay Visa	Date Method Tracking Number  9/06/2017 Freedompay Visa xxxx3142	DateMethodTracking NumberAmount9/06/2017Freedompay Visaxxxxx31422,886.37Order Subtotal: Total Taxes: Total: Total Payments: Order Balance:

Payment Terms: Balance due	eipt.
Date/Time Completed:	Follow Up: YES NO
Technician:	Reason:
Accepted:	Date:

If paying by credit card: (Cardholder's Signature). I agree to pay the above total amount according to the card issuer agreement.

Date

Print Date: 11/2/2017 Tax ID:80-0781746