



Quote

Date	Number
12/27/2022	2216598

Quote valid for 10 days

Exceeding Your Expectations. Enhancing Your Earnings.
 40 Park Place, Lexington, VA 24450 / Ph: 540-463-6510 Fx: 540-463-6710

Bill To	Ship To
LAWRENCEVILLE, GA 30043 US sdewitti@gmail.com ATTN: Accts Payable	LAWRENCEVILLE, GA 30043 US sdewitti@gmail.com

Acct Mgr	Ship On	Ship Via	Payment Terms	PO Number
MJD				

Item	Description	Qty	Each	Total
13LC-003	Catalina Adjustable Sling Chaise Lounge With Arms Case Pack: 2 Pack Frame Color / Sling Color: White Frame with Blue Sling	8 (2 pack)	\$733.90 (\$366.95 per item)	\$5871.20
Estimated Shipping	Options listed below are also available, but not included in the price quote. Call for more information. Call Ahead Liftgate Service (to assist offload) Inside Delivery Residential Delivery Call for pricing.	1	\$435.00	\$435.00

Sales Tax	\$0.00
Order Total	\$6306.20

I agree that the above items are correct, or I have made corrections.

I agree that a signed quote is a final sale.

Delivery of items is as noted above. Additional shipping charges may be incurred for any changes in delivery schedule, and will be the responsibility of the (client) purchaser.

ParknPool will be held harmless against all claims of liability resulting from the installation and use of these products.

Payment terms are noted above. A finance charge of 1.5% per month of the unpaid balance will be charged on overdue accounts. Client agrees to pay collection cost by law, and attorney's fees incurred in the collection of any unpaid balance. The venue for any litigation with ParknPool will be Lexington, Virginia.

Client is responsible for inspecting each shipment for damage before accepting delivery. Client must report any damage and concerns to ParknPool within 24 hours of delivery. Damaged shipments may be rejected or received by the client.

Client is responsible for the unloading and assembly of all items, unless otherwise noted above.

Original manufacturer warranties apply to the products and are available upon request.

AUTHORIZED SIGNATURE _____ Date _____