

State of Florida



# Public Service Commission

CAPITAL CIRCLE OFFICE CENTER • 2540 SHUMARD OAK BOULEVARD  
TALLAHASSEE, FLORIDA 32399-0850

**-M-E-M-O-R-A-N-D-U-M-**

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**DATE:** September 27, 2018

**TO:** Carlotta S. Stauffer, Commission Clerk, Office of Commission Clerk

**FROM:** Robert E. Graves, Public Utilities Supervisor, Division of Engineering *RG*

**RE:** Docket No. 20180063-WS - Application for limited proceeding rate increase in Polk County by Orchid Springs Development Corporation.

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Please file the attached documents (payment information) provided by Orchid Springs in the above referenced docket file.

Thank you.

RG/jp

Attachment

ORCHID SPRINGS DEVELOPMENT CORP.

15450

Invoice #	Date	Description	Amount	Discount	Net Due
2016-00000050	07/06/16	Acct # 2819	2,759.43		2,759.43

07/15/16 Ck#: 15450 CITY02: City of Winter Haven

Page 1 of 1

2,759.43

Requesting Department: Utility Services  
Contact: Cheryl Lundy  
Date: 07/01/16

**INVOICE REQUEST**

Forward to Accounting

Accounting Use Only:

Customer ID 2819

Invoice Number:

CUSTOMER NAME: Orchid Springs Development Corp.

MAILING ADDRESS: 346 E. Central Avenue

Winter Haven, FL 33880

MESSAGE:\*\* Orchid Springs water plant maintenance, water/sewer system repairs and  
responding to customer calls for the month of June 2016.

<u>Description</u>	<u>Account Code</u>	<u>Amount</u>
<u>Water Plant Maintenance</u>	<u>402-369006-000</u>	<u>\$ 1,062.31</u>
<u>Water/Sewer Repairs</u>	<u>402-369006-000</u>	<u>1,504.13 1,663.00/2,763.</u>
<u>Lift Station Routes</u>	<u>402-369006-000</u>	<u>192.99 2,763.00</u>
<u>Customer Calls (minor)</u>	<u>402-369006-000</u>	<u>-</u>
	<u>Total:</u>	<u>\$ 2,759.43</u>

*S. Davis 7/1/16*

## Utility Department Invoice

**Bill To:** Orchid Springs Development Corp.      **Date of Repair:** 6/6/2016  
**Address:** 346 E. Central Avenue      **Job Address:** Lift Station 383  
Winter Haven, FL 33880      **Type of Job:** Replaced broken pump

**Notes:** Pulled bad pump, discovered broken shaft. Replaced pump and put back on line.

Material										
Quan.	Size	Item	Unit Price	Total	Quan.	Size	Item	Unit Price	Total	
		Brass Check Valve		0.00			PVC Pipe Blue		0.00	
		Pump Breaker		0.00			PVC Pipe Blue		0.00	
		Gate Valve		0.00			PVC Tee		0.00	
		Hydromatic Pumps		0.00			Adapter Dresser		0.00	
		PVC Male Adapter		0.00			PVC Elbow 90		0.00	
		Curbstop		0.00			PVC x PVC Fernco		0.00	
		Meter		0.00			Threaded Bushing		0.00	
		Curbstop for yoke		0.00			Galvanized Nipple		0.00	
		Plastic meter box & lid		0.00			Galv 90 elbow		0.00	
		PVC coupling		0.00			Brass Nipple		0.00	
		Poly coupling		0.00			3pc Adj. Valve Box		0.00	
		Riser Ring		0.00			Trans gasket kil		0.00	
		5 gal Quick Plug		0.00			Valves		0.00	
		Parts from Lowes		0.00			Double Check Valve		0.00	
		Concrete		0.00			Concrete Box W/Lid		0.00	
		Asphalt Patch		0.00			Caps (PVC)		0.00	
	ea	Streets Department		0.00			Nipple		0.00	
	Gals	Water loss		0.00			Nipple		0.00	
<b>Sub Total Column 1</b>				<b>0.00</b>	<b>Sub-Total Column 2</b>				<b>0.00</b>	
See attached for detail of materials									<b>1,350.00</b>	

Labor				Equipment			
Employee	Rate Per Hour	Hours	Total	Equipment	Rate Per Hour	Hours	Total
See attached for detail of labor charges			0.00	See attached for equipment detail			0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
See attached for detail of labor charges			<b>\$ 94.13</b>	See attached for equipment detail			<b>\$ 60.00</b>

<b>Material Total:</b>	<b>1,350.00</b>
<b>Equipment Total:</b>	<b>60.00</b>
<b>Labor:</b>	<b>94.13</b>
<b>Total:</b>	<b>\$ 1,504.13</b>

  
 \_\_\_\_\_  
 Mike Britt  
 Utility Services Assistant Director

\_\_\_\_\_  
 7/1/16  
 Date

# Work Orders Details

Filter : Work Order Number: 115785  
 Working Set Date : Not Applicable  
 Sort : Not Applicable  
 Group By : Work Order Number

## Work Orders Details

### Work Order Number 115785

Address Number 383	Status Completed
Route LIFT STATION	Activity Replace
Details PULL PUMP #2- HAD BAD SHAFT, WAS BROKEN. REPLACED.	Total Cost Actual \$1,504.13
Department Utility Services	
Estimator jgarza	Phase
Priority High	Duration Estimated
Start Date Estimated	Duration Actual
Start Date Actual 6/6/2016	Stop Date Actual 6/6/2016

#### Labor (Estimate)

Start Date	ID	Last Name	Activity	Total Hours	Cost
				Labor Cost	\$0.00

#### Labor (Actual)

Start Date	ID	Last Name	Activity	Total Hours	Cost
6/6/2016	NOE BILLY 3266	NOE	Replace	2.00	\$45.11
6/6/2016	Pipkens, Matt	Pipkens	Replace	2.00	\$49.02
				Labor Cost	\$94.13

#### Equipment (Estimate)

Start Date	ID	Description	Activity	Total Usage	Cost
				Equipment Cost	\$0.00

#### Equipment (Actual)

Start Date	ID	Description	Activity	Total Usage	Cost
6/6/2016	4070	BOOM TRUCK, 4004 AUTO CRANE	Replace	2.00	\$60.00
				Equipment Cost	\$60.00

#### Material (Estimate)

Start Date	ID	Description	Activity	Quantity	Cost
				Material Cost	\$0.00

#### Material (Actual)

Start Date	ID	Description	Activity	Quantity	Cost
6/6/2016	327186	L/S 383 PUMP (28200004)	Replace	1.00 ea	\$1,350.00
				Material Cost	\$1,350.00

#### Other (Estimate)

Start Date	Account	Activity	Cost
		Other Cost	\$0.00



FEI\_WINTER HAVEN,FL WATERWORKS  
 #1588  
 2439 7TH ST SW  
 WINTER HAVEN, FL 33880-1948

Deliver To: jeremy.goff@ferguson.com  
 From: Jeremy Goff  
 Comments:

14:45:30 DEC 15 2015

FEI-WINTER HAVEN, FL WW

Order Confirmation  
 Phone : 863-401-2764  
 Fax : 863-291-4240

Page # 1

Order No...: 1509069  
 Order Date: 12/11/15  
 Writer.....: JDG

Req Date: 12/19/15

Ship Via...: COUNTER PICK-UP  
 Terms.....: NET 10TH PROX

Sold To: CITY OF WINTER HAVEN  
 PO BOX 2277  
 WINTER HAVEN, FL 33884

Ship To: CITY OF WINTER HAVEN  
 PO BOX 2277  
 WINTER HAVEN, FL 33884

Cust PO#...: DALE PCARD

Job Name: SHOP

Item	Description	Quantity	Net Price	UM	Total	Cust-Cd
Z8200004	NONAUTOMATIC PUMP ONLY	1	1350.000	EA	1350.00	

Net Total: \$1350.00  
 Tax: \$0.00  
 Freight: \$0.00  
 Total: \$1350.00

**WARRANTY PROVISIONS**

The purchaser's sole and exclusive warranty is that provided by the manufacturer, if any. Seller makes no express or implied warranties. SELLER DISCLAIMS ALL EXPRESS OR IMPLIED WARRANTIES INCLUDING ALL IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS OR FITNESS FOR A PARTICULAR PURPOSE. IN NO EVENT WILL SELLER BE LIABLE FOR ANY INCIDENTAL, PUNITIVE, SPECIAL OR CONSEQUENTIAL DAMAGES ARISING DIRECTLY OR INDIRECTLY FROM THE OPERATION OR USE OF THE PRODUCT. SELLER'S LIABILITY IF ANY, SHALL BE LIMITED TO THE NET SALES PRICE RECEIVED BY SELLER. Complete Terms and Conditions are available upon request or can be viewed on the web at [http://wolselena.com/terms\\_conditionsSale.html](http://wolselena.com/terms_conditionsSale.html).

LEAD LAW WARNING: It is illegal to install products that are not "lead free" in accordance with US Federal or other applicable law in potable water systems anticipated for human consumption. Products with "NP" in the description are NOT lead free and can only be installed in non-potable applications. Buyer is solely responsible for product selection.

ORCHID SPRINGS DEVELOPMENT CORP.

15495

Invoice #	Date	Description	Amount	Discount	Net Due
2819	09/01/16	August maintenance billing	3,228.02		3,228.02

09/23/16 Ck #: 15495 CITY02: City of Winter Haven

Page 1 of 1

3,228.02

Requesting Department: Utility Services  
 Contact: Cheryl Lundy  
 Date: 09/01/16

**INVOICE REQUEST**

Forward to Accounting

Accounting Use Only:

Customer ID 2819

Invoice Number:

**CUSTOMER NAME:** Orchid Springs Development Corp.

**MAILING ADDRESS:** 346 E. Central Avenue

Winter Haven, FL 33880

**MESSAGE:\*\*** Orchid Springs water plant maintenance, water/sewer system repairs and  
responding to customer calls for the month of August 2016.

Description	Account Code	Amount
<u>Water Plant Maintenance</u>	<u>402-369006-000</u>	<u>\$ 1,512.01</u>
<u>Water/Sewer Repairs</u>	<u>402-369006-000</u>	<u>1,523.02 1,663.00/2,163.00</u>
<u>Lift Station Routes</u>	<u>402-369006-000</u>	<u>192.99 2,136.00</u>
<u>Customer Calls (minor)</u>	<u>402-369006-000</u>	<u>-</u>
	<b>Total:</b>	<b>\$ 3,228.02</b>

1,636.00 1,694.92  
 2,736.00 954.50  
 1,618.00 542.60  
 1,635.00 36.00  
3,228.02

PKL  
 9.22.16



## Utility Department Invoice

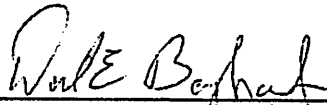
**Bill To:** Orchid Springs Development Corp.      **Date of Repair:** 8/10/2016  
**Address:** 346 E. Central Avenue      **Job Address:** LS 383  
Winter Haven, FL 33880      **Type of Job:** Replaced Pump

**Notes:** Pulled bad lift station pump and replaced with new pump from Ferguson.

Material										
Quan.	Size	Item	Unit Price	Total	Quan.	Size	Item	Unit Price	Total	
		Brass Check Valve		0.00			PVC Pipe Blue		0.00	
		Pump Breaker		0.00			PVC Pipe Blue		0.00	
		Gate Valve		0.00			PVC Tee		0.00	
		Hydromatic Pumps		0.00			Adapter Dresser		0.00	
		PVC Male Adapter		0.00			PVC Elbow 90		0.00	
		Curbstop		0.00			PVC x PVC Femco		0.00	
		Meter		0.00			Threaded Bushing		0.00	
		Curbstop for yoke		0.00			Galvanized Nipple		0.00	
		Plastic meter box & lid		0.00			Galv 90 elbow		0.00	
		PVC coupling		0.00			Brass Nipple		0.00	
		Poly coupling		0.00			3pc Adj. Valve Box		0.00	
		Riser Ring		0.00			Trans gasket kit		0.00	
		5 gal Quick Plug		0.00			Valves		0.00	
		Parts from Lowes		0.00			Double Check Valve		0.00	
		Concrete		0.00			Concrete Box W/Lid		0.00	
		Asphalt Patch		0.00			Caps (PVC)		0.00	
	ea	Streets Department		0.00			Nipple		0.00	
	Gals	Water loss		0.00			Nipple		0.00	
<b>Sub Total Column 1</b>				<b>0.00</b>	<b>Sub-Total Column 2</b>				<b>0.00</b>	
See attached for detail of materials									<b>1,350.00</b>	

Labor				Equipment					
Employee	Rate Per Hour	Hours	Total	Equipment	Rate Per Hour	Hours	Total		
See attached for detail of labor charges				0.00	See attached for equipment detail				0.00
			0.00				0.00		
			0.00				0.00		
			0.00				0.00		
			0.00				0.00		
			0.00				0.00		
			0.00				0.00		
			0.00				0.00		
See attached for detail of labor charges			<b>\$ 131.02</b>	See attached for equipment detail			<b>\$ 42.00</b>		

<b>Material Total:</b>	<b>1,350.00</b>
<b>Equipment Total:</b>	<b>42.00</b>
<b>Labor:</b>	<b>131.02</b>
<b>Total:</b>	<b>\$ 1,523.02</b>

  
 \_\_\_\_\_  
 David Bayhan, Jr.  
 Utility Services Director

9-2-16  
 \_\_\_\_\_  
 Date

# Work Orders Details

Filter (Work Order Number is equal to "115789")  
 Working Set Filter <Not Applicable>  
 Sort <Not Applicable>  
 Group By Work Order Number

## Work Orders Details

### Work Order Number 115789

Address Number 383	Status Completed
Route LIFT STATION	Activity Replace
Details PULLED BAD PUMP AND REPLACED	Total Cost Actual \$1,523.02
Department Utility Services	
Estimator jgarza	Phase
Priority High	Duration Estimated
Start Date Estimated	Duration Actual
Start Date Actual 8/24/2016	Stop Date Actual 8/24/2016

#### Labor (Estimate)

Start Date	ID	Last Name	Activity	Total Hours	Cost
				Labor Cost	\$0.00

#### Labor (Actual)

Start Date	ID	Last Name	Activity	Total Hours	Cost
8/24/2016	ANDERSO	ANDERSON	Replace	1.50	\$60.42
	N	JOHNNIE			
	2955				
8/24/2016	NOE BILLY	NOE	Replace	1.50	\$33.83
	3266				
8/24/2016	Pipkens,	Pipkens	Replace	1.50	\$36.77
	Matt				
				Labor Cost	\$131.02

#### Equipment (Estimate)

Start Date	ID	Description	Activity	Total Usage	Cost
				Equipment Cost	\$0.00

#### Equipment (Actual)

Start Date	ID	Description	Activity	Total Usage	Cost
8/24/2016	3244	TRUCK	Replace	1.50	\$21.00
8/24/2016	3260	Truck	Replace	1.50	\$21.00
				Equipment Cost	\$42.00

#### Material (Estimate)

Start Date	ID	Description	Activity	Quantity	Cost
				Material Cost	\$0.00

#### Material (Actual)

Start Date	ID	Description	Activity	Quantity	Cost
8/24/2016	327186	L/S 383 PUMP (Z8200004)	Replace	1.00 ea	\$1,350.00
				Material Cost	\$1,350.00

FEI-WINTER HAVEN, FL NW  
 REMIT TO ADDRESS:  
 PO BOX 100206  
 ATLANTA, GA 30384-0206  
 PH: 863-401-2764 FAX: 863-291-4240

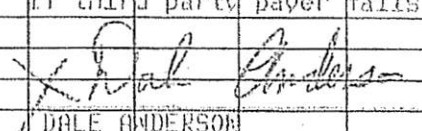
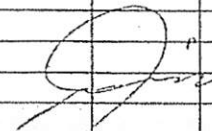
ACCEPT BILL =  
 SHOWROOM =  
 SOURCE =  
 LB FRT =  
 OB SHIP =

ORDER NO. \_\_\_\_\_ REQUIRED DATE \_\_\_\_\_ SHIP WHS. \_\_\_\_\_ SELL WHS. \_\_\_\_\_

**PAYMENT ON ACCOUNT**

PA031765 08/10/16 1500 1500

CUSTOMER NO. 96	CUSTOMER ALPHA WINTERHAV	CONTRACT NO.	BID NO.	ORDER DATE	ORDERED BY	INSTRUCTIONS	WRITER	SALESMAN				
<b>SOLD TO</b> CITY OF WINTER HAVEN PO BOX 2277 WINTER HAVEN, FL 33004 CUST PH: 863-291-5053						<b>SHIP TO</b>			MM			
									TAG PO. NO.			
						SHIP VIA	OML CONTACT					
						PCS	BAGS	BOXES	CRATES	LENGTHS	BUNDLES	VENDOR
						SHIP WT.	SHIP DATE	DELIVERED BY	PACKED BY	CHECKED BY	VENDOR P.O. NO.	
						ROUTE NO.	RUN NO.	DEPA	ROUTE DESC.			

LINE	ORDER QTY.	SHIP QTY.	ITEM CODE	DESCRIPTION	UNIT PRICE	U/M	TOTAL	P.O. NO.	AISSLE L
				DATE.....: 08/10/16					
				CARD TYPE.....: MasterCard					
				ACCT #.....: XXXXXXXXXXXX1451					
				AUTHORIZATION #.....: 010876					
				AMOUNT.....: \$1350.00					
I agree to pay the total amount of this purchase. By signing below, I understand and authorize backordered products to be pre-authorized and charged to my credit card account upon shipment. If third party payer fails to pay for any reason, then I agree to pay any unpaid balance.									
 DALE ANDERSON									
									

NO RETURNS ALLOWED WITHOUT PROPER AUTHORIZATION, RETURNED MATERIALS SUBJECT TO HANDLING CHARGES. SEE REVERSE SIDE FOR IMPORTANT TERMS AND CONDITIONS OF SALE AND LIMITATIONS OF WARRANTY.	SUBTOTAL	INBOUND FREIGHT	OUTBOUND SHIPPING	TAX	LESS DEPOSIT	TOTAL DUE

CUSTOMER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ TERMS: \_\_\_\_\_

ORCHID SPRINGS DEVELOPMENT CORP.

15348

Invoice #	Date	Description	Amount	Discount	Net Due
2819-116	01/06/16	Acct # 2819	3,547.73		3,547.73

01/22/16 Ck #: 15348 CITY02: City of Winter Haven Page 1 of 1 3,547.73

Requesting Department: Utility Services  
 Contact: Cheryl Lundy  
 Date: 01/04/16

**INVOICE REQUEST**

Forward to Accounting

Accounting Use Only:

Customer ID                      2819

Invoice Number:

**CUSTOMER NAME:**            Orchid Springs Development Corp.

**MAILING ADDRESS:**        346 E. Central Avenue

Winter Haven, FL 33880

**MESSAGE:\*\***    Orchid Springs water plant maintenance, water/sewer system repairs and  
responding to customer calls for the month of December 2015.

<u>Description</u>	<u>Account Code</u>	<u>Amount</u>
<u>Water Plant Maintenance</u>	<u>402-369006-000</u>	<u>\$ 1,327.51</u>
<u>Water/Sewer Repairs</u>	<u>402-369006-000</u>	<u>1,952.51</u> 1,663.00/1,763.
<u>Lift Station Routes</u>	<u>402-369006-000</u>	<u>159.17</u> 2,736.00
<u>Customer Calls (minor)</u>	<u>402-369006-000</u>	<u>108.54</u> 2,736.00
	<b><u>Total:</u></b>	<b><u>\$ 3,547.73</u></b>

1,636.00 = 975.71  
 1,618.00 = 351.80  
 1,663.00 = 976.26  
 2,763.00 = 976.25  
 2,736.00 = 267.71  
3,547.73

*S. Myers 1/5/16*

## Utility Department Invoice

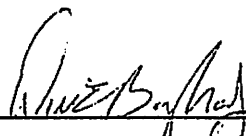
Bill To: Orchid Springs Development Corp.	Date of Repair: 12/10 - 12/17/15
Address: 346 E. Central Avenue	Job Address: Lift Station 383
Winter Haven, FL 33880	Type of Job: Repairs to Lift Station

**Notes:** Required 3 separate trips to derag lift station, returned 12/11 to hook up bypass pump for weekend and returned again on 12/17 to replace burned out pump.

Material									
Quan.	Size	Item	Unit Price	Total	Quan.	Size	Item	Unit Price	Total
		Brass Check Valve		0.00			PVC Pipe Blue		0.00
		Pump Breaker		0.00			PVC Pipe Blue		0.00
		Gate Valve		0.00			PVC Tee		0.00
		Hydromatic Pumps		0.00			Adapter Dresser		0.00
		PVC Male Adapter		0.00			PVC Elbow 90		0.00
		Curbstop		0.00			PVC x PVC Femco		0.00
		Meter		0.00			Threaded Bushing		0.00
		Curbstop for yoke		0.00			Galvanized Nipple		0.00
		Plastic meter box & lid		0.00			Galv 90 elbow		0.00
		PVC coupling		0.00			Brass Nipple		0.00
		Poly coupling		0.00			3pc Adj. Valve Box		0.00
		Riser Ring		0.00			Trans gasket kit		0.00
		5 gal Quick Plug		0.00			Valves		0.00
		Parts from Lowes		0.00			Double Check Valve		0.00
		Concrete		0.00			Concrete Box W/Lid		0.00
		Asphalt Patch		0.00			Caps (PVC)		0.00
	ea	Streets Department		0.00			Nipple		0.00
	Gals	Water loss		0.00			Nipple		0.00
<b>Sub Total Column 1</b>				<b>0.00</b>	<b>Sub-Total Column 2</b>				<b>0.00</b>
See attached for detail of materials									<b>1,350.00</b>

Labor				Equipment			
Employee	Rate Per Hour	Hours	Total	Equipment	Rate Per Hour	Hours	Total
See attached for detail of labor charges			0.00	See attached for equipment detail			0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
			0.00				0.00
See attached for detail of labor charges			<b>\$ 385.51</b>	See attached for equipment detail			<b>\$ 217.00</b>

<b>Material Total:</b>	<b>1,350.00</b>
<b>Equipment Total:</b>	<b>217.00</b>
<b>Labor:</b>	<b>385.51</b>
<b>Total:</b>	<b>\$ 1,952.51</b>

  
 David Bayhan, Jr.  
 Utility Services Director

1-4-16  
 Date

## Request for Invoice Due to Damages

Bill to: Orchid Springs

Phone# \_\_\_\_\_

Desc. Of Damage 4S 383 Pump burnt up

Address 4S 383

In City Limits? Yes \_\_\_\_\_ No

Date of Repair 12-10-15, 12-11-15, 12-17-15

Labor	Employee Name	# Hours
	Dale Anderson	6
	Jose Vega	6

Materials Used	Description of Parts	Quantity	Unit Price
	4S Pump 28200004	1	1350.00

Water Loss Running Time \_\_\_\_\_ # of Gallons \_\_\_\_\_

Equipment Used	Description of Equipment	# Hours	Cost per Hr.
	Utility Boom truck	6	30.00
	Bypass pump 140 HP	1	37.00

Additional Comments \_\_\_\_\_





501 WINTER HAVEN, FL 32909  
 PHONE TO ORDER: 800-441-2764  
 PO BOX 140-800  
 ATLANTA, GA 30384-0800  
 FAX: 800-291-5853

F A B I C I O N A C C O U N T

DATE: 12/15/15  
 TIME: 10:00 AM  
 BY: [Signature]

ORDER NO. 1029310 REQUIRED DATE 12/15/15 SHIP WHS. 1500 SELL WHS. 1500

CUSTOMER NO.	CUSTOMER ALPHA	CONTRACT NO.	BID NO.	ORDER DATE	ORDERED BY	INSTRUCTIONS
	WINTERHAV					
CITY OF WINTER HAVEN PO BOX 2277 WINTER HAVEN, FL 32984						SHIP VIA
CUST PH: 800-291-5853						
CUSTOMER P.O. NO.	JOB NAME	ATTN:		SHIP WT.	SHIP DATE	DELIVERED BY
					12-15-15	CPV

WRITER	SALESMAN	
JOB		
TAG P.O. NO.		
OHL CONTACT		
VENDOR		
VENDOR P.O. NO.		
ROUTE NO.	RUN NO.	DEPART T
ROUTE DESC.		
PACKED BY	CHECKED BY	
[Signature]		

LINE	ORDER QTY.	SHIP QTY.	ITEM CODE	DESCRIPTION	UNIT PRICE	U/M	TOTAL	P.O. NO.	aisle loc
			LS 383	Position 2					
DATE	12/15/15								
CARD TYPE	MasterCard								
DOC #	XXXXXXXXXXXX1451								
AUTHORIZATION #	015944								
AMOUNT	\$1350.00								
I agree to pay the total amount of this purchase. By signing below, I understand and authorize backordered products to be pre-authorized and charged to my credit card account upon shipment. If third party payer fails to pay for any reason, then I agree to pay any unpaid balance.									
DALE ANDERSON									
[Signature]									

RETURNS ALLOWED WITHOUT PROPER AUTHORIZATION. RETURNED MATERIALS SUBJECT TO HANDLING CHARGES. SEE REVERSE SIDE FOR IMPORTANT TERMS AND CONDITIONS OF SALE AND LIMITATIONS WARRANTY.	SUBTOTAL	INBOUND FREIGHT	OUTBOUND SHIPPING	TAX	LESS DEPOSIT	TOTAL DUE

CUSTOMER'S Dale Anderson P-CARD