

**Miracle of KY &**

931 Commerce Drive

Leitchfield, KY 42754

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Prepared By: Jessalynn Elliott

**Customer**

Oldham County Preschool

Office Manager

4309 Brown Blvd.

LaGrange, KY 40031

Phone 502-222-3700

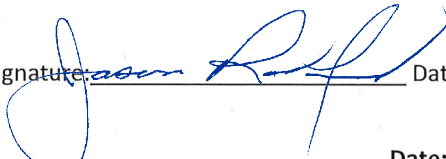
**Quote**

<b>Date:</b>	9/1/2023
<b>Quote #</b>	23-0901-31
<b>Project:</b>	Post Pads
<b>Contact:</b>	Jeannine B. Konesko

QTY	Model #	Description	Total
4		Open Cell Pad: 6" Diameter, 4' Tall, 1" Thick Foam, Velcro Closure-Red	\$ 639.00
4		Open Cell Pad: 7" Diameter, 4' Tall, 1" Thick Foam, Velcro Closure- Red	\$ 648.00
Install:			\$ 400.00
Freight:			\$ 195.00
Total Due:			\$ 1,882.00

**Terms and Conditions**

Installation prices will assume normal soil conditions and does not include rock excavation \$75 per foot for rock break minimum plus equipment rental fees. Installation charges are not included in quote unless stated. Unless otherwise noted quote does not include prevailing wages, taxes, freight, permits, state or local approvals, performance bond, engineering seals, testing, site preparation, borders, safety surfacing, unloading, storage, security, fencing, landscaping, trash removal or soils. (We are not responsible for the seed and straw of disturbed areas.) Must be given clear path 10' to playground area. Not responsible for damage to existing concrete or asphalt. Not responsible for underground utilities or drain pipes. Any product that is coming from a vendor, other than Miracle, needs to be inspected when shipment is received. Please note any damage on the freight bill before signing for the shipment. This quotation, after acceptance by the buyer and when thereafter approved by an authorized official of the seller, in writing, will become a contract. Until so approved, is not a contract and is not binding on the seller in any way. If buyer does not give acceptance within 15 days, this quotation is subject to possible price revision. Sales are final and parts can not be returned.

Name of Buyer: Jason Radford Authorized Signature:  Date: 9.7.23

Seller: Miracle of KY &amp; TN Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_