

# ***E X A M P L E***

“YOUR COMPANY NAME”  
“YOUR ADDRESS”  
“YOUR TELEPHONE NUMBER”

## SCHEDULE OF VALUES

PROJECT NAME \_\_\_\_\_ DATE OF ESTIMATE \_\_\_\_\_

PROJECT NUMBER \_\_\_\_\_ ESTIMATE NUMBER \_\_\_\_\_

### DESCRIPTION OF WORK

Exterior Sanitary	Labor	\$ 1,000.00
	Material	\$ 5,000.00
	Equipment	\$ 2,000.00
Exterior Storm	Labor	\$ 2,000.00
	Material	\$10,000.00
	Equipment	\$ 3,000.00
Exterior Water	Labor	\$ 8,000.00
	Material	\$20,000.00
	Equipment	<u>\$ 4,000.00</u>
TOTALS		\$53,200.00

### INSTRUCTIONS

- Please be sure your name, address, and phone number appear on this form.
- Fill in the project name, date and estimate number
- Each item should include all taxes, profit and overhead, freight, and any other additional expenses.
- Total of Schedule of Values must be the same as the total of your contract.