

QUOTATION BY	CONFIRMING OUR VERBAL ORDER	DATE OF ORDER	JOB #	P.O. #
Weston Moore 865-288-6242 orders@readwindow.com	Jason Lilly 770-955-0412 jlilly@rwsco.com	August 13, 2025	1647	647-120-1

SHIP TO: R W Smith Company
c/o Onelife Fitness Macon
245 Tom Hill Sr. Blvd.
Macon, GA 31210 (Bibb County)

VENDOR: Read Window Products, Inc.
5900 Weisbrook Lane
Knoxville, TN 37909

Physical:

PURCHASE ORDER

SHOW ABOVE INFORMATION ON
ALL INVOICES AND SHIPPING
PAPERS.

SEND ALL PAPER WORK TO:

R W SMITH COMPANY
610 Village Trace
Building 22, Suite 200
Marietta, Georgia 30067

VENDOR CODE	VENDOR PHONE/FAX	SHIP VIA	F.O.B.	TERMS	DATE REQUIRED
120	865-288-6242 865-675-5572 Fax	Best Way	Job Site	Subcontract	Progress of Job

QUANTITY	DESCRIPTION	UNIT COST	TOTAL COST
All	Furnish all labor, tools, materials, equipment, supervision, clean up, permits, licenses, taxes, fees, transportation, protection, insurance (including Workers Comp and General Liability), plus anything and everything else necessary and/or required for the final completion of: Drapery and Hardware (see item 16 for additional notes and details to scope of work) All of the above to be in strict accordance with plans and specifications by Architect attached as Exhibit "B", the following scope of work summary, the following provisions, local codes and the attached subcontract for the lump sum of: Provide and install per specifications: <ul style="list-style-type: none"> Three (3) Custom 120% Ripplefold Double Layer Fixed Drapery, unlined, Beaded Weight Bottom Hem <ul style="list-style-type: none"> Height: 120" Width: 96" Fabric: Culp Tactile Marble 54" Goods, No Repeat Three (3) Custom 4004 Single Architrac Hardware, Ceiling Mount (48" wide) Curtains must be stationary Track and track components are to be black Includes measuring and travel fee and installation fees. Installation Date: October 1, 2025 All license copies must be provided prior to start of work including all applicable state, county, and city business licenses as well as professional licenses. Payment will not be released until license copies are received. \$ 5,935.39		

(Signatures on next page)

SHIP TO: Onelife Fitness MaconDATE OF ORDER: August 13, 2025JOB # 1647P.O. # 647-120-1VENDOR: Read Window Products, Inc.

R W SMITH COMPANY

PURCHASE ORDER

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Prior to the start of any work on site, it is mandatory that an Original Certificate of Insurance for General Liability, Automobile Liability, Workers' Compensation, Employer's Liability and Excess Liability, in at least the minimum limits, be delivered to R W Smith Company's corporate office and a copy physically given to the project superintendent at the jobsite. In the "Description of Operations" section of the certificate, the following requirements shall be specifically included in writing: "Job Number 1647, Onelife Fitness Macon, 245 Tom Hill Sr. Blvd, Macon, GA 31210. 1) Policy is endorsed to name R W Smith Company, USF AF Georgia, LLC, US Fitness Holdings, LLC, and WHLR-Rivergate, LLC as additional insured(s) as respects all liability policies. The additional insured endorsement includes products and completed operations for your work and the coverage is primary & non-contributory for work performed by named insured. Note: Umbrella to follow form. 2) Policy is endorsed to provide that the carrier waives it's Right of Subrogation against R W Smith Company, USF AF Georgia, LLC, US Fitness Holdings, LLC, and WHLR-Rivergate, LLC." Insurance to be specifically as per Article 4 of the attached subcontract and attached Exhibit "C".

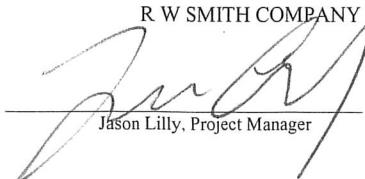
All material and/or labor supplied under this purchase order shall comply with all local, state and federal laws and regulations, including the Occupational Safety and Health Act of 1970. Vendor accepts exclusive liability for any and all Sales Tax, Use Tax or Excise Tax, which may be assessed against materials, equipment or labor, included in this order and agrees to indemnify and hold harmless Contractor with respect thereto.

Please acknowledge acceptance of this order by stating delivery date in space provided, which is not to be later than date required and returning the signed duplicate (yellow) copy. If delivery is not made by date required, the order is subject to cancellation at the discretion of R.W. Smith Company.

Accepted By (Firm) _____ Del. Date _____ Fed. No. _____

By _____
 Signature _____ Title _____ Date _____

By _____
 Print Name _____ Title _____

R W SMITH COMPANY

 Jason Lilly, Project Manager