

USED CAR INVOICE

FROM

COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY, STATE: _____

ZIP: _____

PHONE: _____

E-MAIL: _____

DETAILS

DATE: _____

INVOICE NO. _____

SALESPERSON: _____

BILLING

COMPANY: _____

ATTN: _____

ADDRESS: _____

CITY, STATE: _____

ZIP: _____

PHONE: _____

E-MAIL: _____

VEHICLE INFORMATION

MAKE: _____

MODEL: _____

YEAR: _____

COLOR: _____

VIN: _____

DESCRIPTION		AMOUNT (\$)
NOTES: _____ _____ _____		SUBTOTAL
		DISCOUNT
		TAX / VAT
		TOTAL

THANK YOU FOR YOUR BUSINESS

