

Your Firm Info

1 Address St., State, City, Zip
Phone (222) 333-4444
Email: email-address.com

DVR PICK UP:	ORDER#	INVOICE#
DVR DROP OFF:	DVR:	TRUCK:

BILL TO:	DATE: / /
ADDRESS:	PHONE:
CITY/STATE/ZIP:	CONTACT:

SHIP FROM:
PH#1: PH#2:

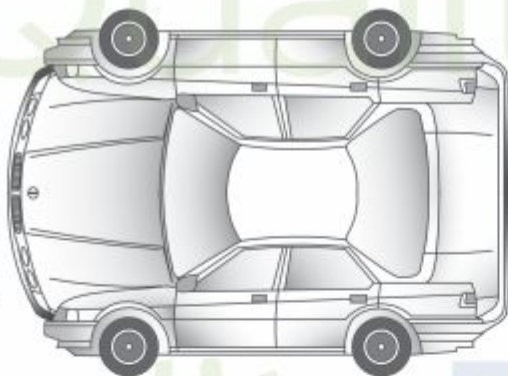
SHIP TO:
PH#1: PH#2:

YEAR	MAKE	MODEL	COLOR	LICENSE#
VIN# (LAST 8)		STOCK#	MILES	

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VIN# (LAST 8)		STOCK#	MILES	

☐ All Books & Manuals ☐ 4 Keys (2 Master/wallet/valet) ☐ - Keyless Go Switch
☐ Remote Entry ☐ Gg, Lighter ☐ CD Cartridge ☐ In-Dash CD Changer ☐ iPod Connector
☐ Blue Tooth Insert ☐ Navigation CD ☐ Headphone & Remotes
☐ Wind Reflectar ☐ Floor Mats ☐ Cargo Mat ☐ Cargo Net ☐ Cargo Container
☐ Cargo Cover ☐ Tools ☐ First Aid Kit ☐ Spare Tire ☐ Wheel Locks ☐ Air Compressor
☐ Front License Plate Holder ☐ Tow Hook Cover ☐ Roof Rail & Keys
☐ Contract ☐ Registration Sticker ☐ License Plates ☐ Other(s) ☐ Audio Conn.

CAR#
1



- A ☐ Scratches
 B ☐ Dents
 C ☐ Broken/Cracked
 D ☐ Missing
 E ☐ Water Spots
 F ☐ Factory Defects
 G ☐ Unclean
 H ☐ Damaged
 I ☐ Others

COMMENTS:

DRIVER: DATE: / /

PICK-UP: DATE: / /

DELIVERY TO: DATE: / /

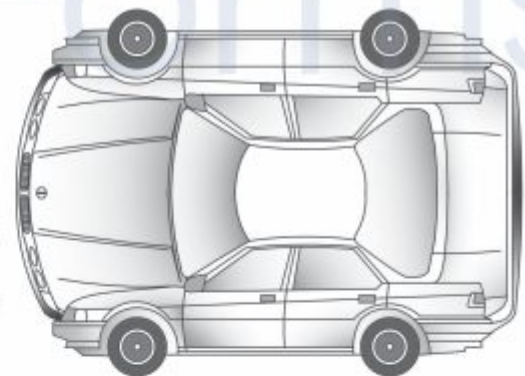
DELIVERY EXCEPTIONS:

Any Signature Will Prove the Understanding of ALL Policies Printed & Read

SIGNATURE

DATE

CAR#
2



- A ☐ Scratches
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 I ☐ Others

COMMENTS:

DRIVER: DATE: / /

PICK-UP: DATE: / /

DELIVERY TO: DATE: / /

UNITS @	\$
OTHER CHARGES	\$
PAY THIS AMOUNT	\$
<input type="checkbox"/> P. O. <input type="checkbox"/> CHECK# <input type="checkbox"/> CASH <input type="checkbox"/> C/C <input type="checkbox"/> CHARGE	