

YOUR COMPANY NAME

Address
CITY, STATE ZIP CODE
Phone Number

WE OWE

NAME _____ STOCK # _____ NEW USED

ADDRESS _____ YEAR _____ MAKE _____

CITY _____ STATE _____ ZIP _____ MODEL _____

PHONE _____ VIN _____

SALESPERSON _____ DEL. DATE _____

QTY.	NAME OF ITEM OR SERVICE OWED	PART	LABOR

I hereby accept this WE-OWE with the understanding that it is valid for only (30) THIRTY DAYS FROM DATE OF ISSUANCE, and that I must make an ADVANCE APPOINTMENT WITH THE SERVICE DEPARTMENT before the above work can be performed.

(FOR APPOINTMENT CALL SERVICE DEPT.)

CUSTOMER _____

DATE _____

APPROVED _____

MGR.

DEAL JACKET

SA-1506-3