

CERTIFIED PRE-OWNED

INVOICE

Invoice #: _____

Date: _____

DEALERSHIP INFO:

[Dealer Name]

[Address Line 1]

[City, State, Zip]

[Phone Number]

CUSTOMER INFO:

[Buyer Name]

[Address Line 1]

[City, State, Zip]

[Phone Number]

VEHICLE DESCRIPTION

Year/Make/Model	VIN	Mileage	Color

CERTIFICATION & WARRANTY DETAILS

Certified Inspection No: _____

Warranty Period: _____

Coverage Type: _____

FINANCIAL SUMMARY

Description	Amount
Vehicle Sale Price	\$

Description	Amount
CPO Certification Fee	\$
Documentation & Processing	\$
Sales Tax	\$
Registration/Title Fees	\$

Subtotal: \$ _____

Trade-In Allowance: (\$ _____)

Total Balance Due: \$ _____

This vehicle has passed a comprehensive multi-point inspection to qualify for Certified Pre-Owned status.

Authorized Signature