[DEALERSHIP NAME]

[Street Address]
[City, State, Zip]
[Phone Number]

INVOICE

Date: _____
Invoice #: _____

CUSTOMER INFORMATION

[Client Name]
[Company Name]
[Client Address]
[Contact Phone]

EQUIPMENT DETAILS

Make: _____
Model: _____
Serial/VIN: _____
Hour Meter: _____

Description of Goods / Services	Qty/Hrs	Unit Price	Amount

TERMS & NOTES

Net [30] Days. All heavy equipment remains property of the dealership until paid in full. Warranty terms as per manufacturer's specification.

Subtotal: $0.00
Sales Tax: $0.00

Freight/Delivery: $0.00

TOTAL: $0.00

Authorized Signature: _____ Date: _____

Thank you for your business.