

ELITE MARQUE MOTORS

INVOICE # _____

DATE: _____

CLIENT INFORMATION

Name: _____

Address: _____

City/State: _____

Phone: _____

DEALERSHIP REPRESENTATIVE

Executive: _____

ID Number: _____

Department: _____

VEHICLE SPECIFICATIONS

YEAR: _____

MAKE: _____

MODEL: _____

VIN: _____

EXTERIOR: _____

INTERIOR: _____

DESCRIPTION	AMOUNT
Base Vehicle MSRP	\$ _____
Premium Package / Options	\$ _____
Destination & Delivery	\$ _____

DESCRIPTION**AMOUNT**

Documentation & Registration

\$ _____

Subtotal \$ _____

Luxury Tax (____%) \$ _____

Total Balance Due \$ _____

Thank you for choosing Elite Marque Motors. This document serves as a formal invoice for the above-described asset.