WORK ORDER

DATE

SALESPERSON	SOURCE	COUNTY

BUYER'S NAME	PHONE
CO-BUYER'S NAME	EMAIL
PHYSICAL ADDRESS	PO BOX / MAILING ADDRESS

CITY	STATE	ZIP	CITY	STATE	ZIP

TRADE-IN				CUSTOMER PURCHASING			
YEAR	MAKE/MODEL		TYPE	YEAR	MAKE/MODEL		TYPE
VIN#				VIN#			
ENGINE	MILES	PLATE	EXP	ENGINE	MILES	PLATE	EXP
PAYMENT	PAYOFF	LIENHOLDER		STOCK#			

ALL USED / WHOLESALE UNITS SOLD "AS-IS" UNLESS OTHERWISE INDICATED

TRADE	PRICE
1 2 3 4 5 6 7 8 9 10	
NORMAL BANK FINANCING REQUIRES 1/3 DOWN	PAYMENT O.A.C.

ABOVE OFFER IS TO BUY NOW AND IF ACCEPTED BY THE SALES MANAGER, TRANSACTION IS COMPLETE.

BUYERS OK:_____ MANAGER OK:_____

CO-BUYER'S OK: _____