

Tyrrell-Doyle Auto Centers July 18 2017 1,500 4-part 65D-1 We Owe form
 1jn8000 3-12-2016 1,500 c39179+4410 s45921+f4500 Eagle I=84592 4-5-2016

8351

Christie Printing Service
 P.O. Box 3057 | Cheyenne, WY 82003-3057
 Phone: 630.464.9391 | email : CPrint@ChristiePrinting.com



FOR USE BY CHRISTIE PRINTING
 Complete: 10-5-2017
 Billed: 8-15-2017
 Entered: 8-15-2017
 Delivered: 8-15-2017 # 578935
 Received: 8-10-2017

TO:
 Eagle Business Forms – **BRUCE HELMAN**
 P.O. Box 30255
 Billings, MT 59107

INVOICE TO:
 Christie Printing Services
 1603 Capitol Ave, Suite 413
 Cheyenne, WY 82001

DELIVER TO:
 Christie Printing Services
 1603 Capitol Ave, Suite 413
 Cheyenne, WY 82001

Purchase Order No. **8351**

ORDER DATE 7-19-2017		SHIP VIA Cheapest way; Prepaid and add to our invoice.	F.O.B.	
Terms	QUOTE 10515 approved 7/20/2017		For Resale Yes	For Use
QUANTITY		PLEASE QUOTE ITEMS LISTED BELOW	UNIT	PRICE
QUOTE	UNIT			
1,500 exactly	sets	4-part 65D-1 We Owe forms (8351) <ul style="list-style-type: none"> • Top stub snaps • Detached size: 8-1/2 x 7. Overall: 8-1/2 x 7-3/4 • All parts in BLACK ink on 15 lb. Register Bond • Four parts: White, Canary, Pink & Goldenrod • Use carbonless paper This is an exact reorder of Eagle's previous Invoice 84592 dated 4-5-2016 and Christie Printing's previous PO 8000 dated 3-12-2016.		\$413.04 \$ 44.10 freight \$457.14
IMPORTANT Acknowledge if unable to deliver by date required. Please refer to our PO8351 on all correspondence, including the Invoice.			BY: <u>Cynthia L Duke</u>	

COST
 \$413.04
 \$ 44.10 Freight
 \$457.14
 I= 87821 dated: 8-10-2017
 Paid date: 9-7-2017 Ek#: 5787
 Note for Cynthia: Reorder inquiry 11/18/2018

PRICE
 On Invoice refer to Tyrrell's PO# We Owe July 2017.
 Deliver to Lisa Rivera
 \$479.20
 \$ 45.00 Freight
 \$524.20
 \$ 23.96 5% tax
 \$548.16
 Paid date: 10-5-2017 Check #: 41287

6 @ 250



2142 Lincolnway
Cheyenne, WY 82001
634-2540

we owe

R.O. # _____

Name _____ Stk # _____ New _____ Used _____

Address _____ Year _____ Make _____

City _____ State _____ Zip _____ Model _____

Phone _____ Serial No. _____

Salesman _____ Del. Date _____

QTY.	NAME OF ITEM

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.)

Sales Mgr. _____

Service Mgr. _____

Parts _____

Date _____

Customer _____