

Tyrrell Jan 7 2020 500 4-part We Owe form 65D-1
1jn8798 10-8-2019 300 c30848+f4631 s37220+f 4600 Eagle I=92462 10-30-2019

8840



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: 3-26-2020
Billed: 2-4-2020
Entered: 2-4-2020
Delivered: 2-4-2020 # 579242
Received: 1-30-2020

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

INVOICE TO:
Christie Printing Services
5711 Osage Ave., Suite C
Cheyenne, WY 82009

SHIP TO:
Christie Printing Services
5711 Osage Ave., Suite C
Cheyenne, WY 82009

Purchase Order No. **8840**

ORDER DATE 1-9-2020		SHIP VIA	F.O.B.	
Terms	QUOTE 1891 approved 9Jan2020	Cheapest way; Prepaid and add to our invoice.	For Resale Yes	For Use
QUANTITY		PLEASE QUOTE ITEMS LISTED BELOW	UNIT	PRICE
QUOTE	UNIT			
500 exactly	sets	4-part We Owe 65D-1 forms <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• Shrink wrap 50 forms per package <p>Except for the increased quantity, this is an exact reorder of Eagle's previous Invoice 92462 dated 10-30-2019 and Christie Printing's previous PO8798 dated 10-8-2019.</p>		
IMPORTANT Acknowledge if unable to deliver by date required. Please refer to our PO8840 on all correspondence, including the Invoice.			BY: <u>Cynthia L Duke</u>	

COST	
\$359.22	
\$ 46.31 Freight	
\$405.53	
I= <u>92847</u>	dated: <u>1-29-2020</u>
Paid date: <u>6-3-18</u>	Ck#: <u>2-11-2020</u>
Note for Cynthia: Reorder inquiry 4/15/2020	

PRICE	
On Invoice refer to Tyrrell's PO 32560 Deliver to Cathy Thelen	
\$382.20	
\$ 46.00 Freight	
\$428.20	
\$ 22.93 6% tax	
\$451.13 451.13	
Paid date: <u>3-24-2020</u>	Check #: <u>53968</u>

error in addition -
Credit issued on
8864



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 _____