

Tyrrell Apr 29 2020 500 4-part We Owe form 65D-1
1jn8840 1-7-2020 500 c35922+f4631 s38220+f4600 Eagle I=92847 1-29-2020

8880

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: 6-30-2020
Billed: 5-19-2020
Entered: 5-19-2020
Delivered: 5-19-2020 # 579268
Received: 5-15-2020

TO:
Modern Printing – **BRIAN FLOROM**
P.O. Box 1125
Laramie, WY 82070

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. **8880**

ORDER DATE		SHIP VIA		F.O.B.	
5-1-2020		Cheapest way; Prepaid and add to our invoice.			
Terms	QUOTE 4972 approved 1May2020			For Resale Yes	For Use
QUANTITY		PLEASE QUOTE ITEMS LISTED BELOW		UNIT	PRICE
QUOTE	UNIT				
600 exactly	sets	Provide a PROOF for approval 4-part We Owe 65D-1 forms - Changes (see markup): - Move "we owe thru Date down on the page. - phone number for Lincolnway address - Add 2 additional locations - 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 New product for Modern Printing so no historic info.			\$378.84 \$7.50 ship
IMPORTANT Acknowledge if unable to deliver by date required. Please refer to our PO8880 on all correspondence, including the Invoice.				BY: <u>Cynthia L. Duke</u>	

COST

\$378.84
\$ 7.50 Freight
\$386.34

I= 32785 dated: 5-19-2020
Paid date: 7-1-2020 ck#: 6035
7-1-2020

Note for Cynthia: Reorder inquiry 7/30/2020

PRICE

On Invoice refer to Tyrrell's PO 36483. Deliver to Cathy Thelen

\$456.00
\$ 46.00 Freight
\$502.00
\$ 27.36 6% tax
\$529.36

Paid date: 6-30-2020 Check #: 55048

4 @ 150
1 @ 600



2142 Lincolnway
Cheyenne, WY 82001
307-634-2540

1919 Westland Road
Cheyenne, WY 82001
307-634-1924

3609 Grand Avenue
Laramie, WY 82070
307-745-7315

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 _____