

Company or Individual Name

[Street Address, City, ST ZIP Code]

Telephone:

A point of contact for the seller is mandatory in order for the part to be accepted

PACKING SLIP / INVOICE

DATE

BILL TO

SHIP TO

INSTRUCTIONS

[Name]

[Street Address]

[City, ST ZIP Code]

[Add additional instructions]

QUANTITY

DESCRIPTION

UNIT PRICE

TOTAL

Description of Major Component Part

Must list whether part is new, used or aftermarket. If used VIN number must be printed on this document

Invoice must explicitly state that the part was paid

SUBTOTAL

SALES TAX

SHIPPING & HANDLING