

DATE _____

SOURCE _____

NAME _____ SALESPERSON _____ MGR. _____

ADDRESS _____ H ()
PHONE W ()

MILEAGE _____ VIN. _____

STOCK NO.	NEW <input type="checkbox"/>	YEAR	MAKE	BODY STYLE
	USED <input type="checkbox"/>			
	DEMO. <input type="checkbox"/>			

TRADE-IN INFORMATION				SALE PRICE
YEAR	MAKE	CYL.	BODY STYLE	

MILEAGE _____ ADDITIONAL ACCESSORIES _____

_____ PAYMENTS OF \$ _____
NUMBER _____ \$ _____

1/3 CASH DOWN
\$ _____

MONTHLY PAYMENTS
\$ _____