|  |  |  |
| --- | --- | --- |
| [Company Name] |  | Client / Customer |
| Name: [Name]  Street Address: [Street Address]  City, State: [City, State]  ZIP Code: [ZIP Code]  Phone: [Phone]  E-mail: [E-Mail] | Name: [Name] Street Address: [Street Address]City, State: [City, State] ZIP Code: [ZIP Code]  Phone: [Phone]  E-mail: [E-Mail] |

**CAR SALE INVOICE**

|  |  |
| --- | --- |
| Invoice # [No] | Date: 10/09/20XX |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **DESCRIPTION** | **QUANTITY** | | **$ / UNIT** | | **AMOUNT ($)** |
|  | |  | |  |  |
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|  | |  | |  |  |
|  | |  | |  |  |
|  | |  | |  |  |
| [Comments or Special Instructions]  Payment is due within [Number (#)] days.  Thank you for your business! | |  | | SUBTOTAL |  |
|  | |  | | DISCOUNT |  |
|  | |  | | TAX |  |
|  | |  | | **TOTAL** |  |