



PHONE# **800-554-9454**  
 LOCAL# **613-652-1430**  
 FAX# **613-652-2020**  
 ALT. FAX# **613-652-2900**

INVOICE # \_\_\_\_\_  
 DATE            /        /

\*\* PLEASE FILL OUT ALL INFO COMPLETELY \*\*

**ORDERED BY** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**BILL TO** \_\_\_\_\_ **PO#** \_\_\_\_\_  
 COMPANY \_\_\_\_\_ **CONTACT** \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ **CELL #** \_\_\_\_\_  
 CITY \_\_\_\_\_ **BUS PH #** \_\_\_\_\_  
 PRV / STE \_\_\_\_\_ **P.CODE** \_\_\_\_\_ **FAX #** \_\_\_\_\_

**PICKUP LOCATION** \_\_\_\_\_ **PO#** \_\_\_\_\_ **DATE READY**        /        /  
 COMPANY \_\_\_\_\_ **CONTACT** \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ **CELL #** \_\_\_\_\_  
 CITY \_\_\_\_\_ **BUS PH #** \_\_\_\_\_  
 PRV / STE \_\_\_\_\_ **P.CODE** \_\_\_\_\_ **FAX #** \_\_\_\_\_

**DELIVERY LOCATION** \_\_\_\_\_ **PO#** \_\_\_\_\_ **DEL. DATE**        /        /  
 COMPANY \_\_\_\_\_ **CONTACT** \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ **CELL #** \_\_\_\_\_  
 CITY \_\_\_\_\_ **BUS PH #** \_\_\_\_\_  
 PRV / STE \_\_\_\_\_ **P.CODE** \_\_\_\_\_ **FAX #** \_\_\_\_\_

YEAR	MAKE & MODEL	\$ VALUE	LAST 8 VIN #	STATE	\$ RATE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

**Specific Instructions** \_\_\_\_\_  
**Border** \_\_\_\_\_ **R.I.** \_\_\_\_\_ **Broker** \_\_\_\_\_  
**Visa** \_\_\_\_\_ **Mastercard** \_\_\_\_\_ **Exp.**        /        /  
**Card #** \_\_\_\_\_ **Signature** \_\_\_\_\_

\*\*PRICES QUOTED ARE SUBJECT TO APPLICABLE TAXES ( NOT INCLUDED )\*\*

**5547 CARMAN ROAD, IROQUOIS, ON K0E 1K0**