



**Brown's Industrial Sales**

Highway 16 W & Range Road 20  
 P.O. Box 21092 Lloyd Mall  
 Lloydminster, AB T9V 2S1  
 780-875-2339 • Fax: 780-875-0262

**PLEASE REMIT TO:**  
 63214 Highway 892 • P.O. Box 1267  
 Cold Lake, AB T9M 1P3  
 780-826-2399 • Fax: 780-826-2390

Ship To: SAME AS BELOW

Invoice To: 10-046 SERVICE TRUCK

Branch LLOYDMINSTER *REPRINT*		
Date 09/09/18	Time 18:31:16 (B)	Page 01
Account No INT02	Phone No	Inv No W00668
Ship Via	Purchase Order	
Tax Exempt ID No.		
		Salesperson 400

**SERVICE INVOICE**

STK#/FLEET#		HRS	PIN/EIN	WARRANTY DATE	HRS
R0000028	10-046 C5500 SERVI		X 1GDE5C3957F424294		
10-046	C5500	145622			

SEGMENT# 1 C GEO01 NA 08/23/18 08/23/18 08/23/18

REPLACE TIRES

COMPLAINT:

REPLACE 4 REAR TIRES AND DRIVE UNIT 50 KM'S THEN RETORQUE

\*\*\*\*\*

TIRES CHARGED OUT ON PARTS INVOICE P02445

	LABOR	199.80
50210502	SEGMENT TOTAL==>	199.80

\*\*\*\*\* WORK ORDER TOTALS \*\*\*\*\*

	INTERNAL	CUSTOMER
LABOR	199.80	
INTERNAL TOTAL	199.80	

**TERMS AND CONDITIONS**

I request the above work to be done and the above materials to be supplied and installed on the following conditions.

I promise to pay the amount due upon completion of the work. I acknowledge the lien of the operator for the value of the work and materials supplied. I authorize you, your agents, or independent contractors to drive my vehicle for the purpose of inspection and repairs. I authorize you to subcontract work as necessary, including releasing the vehicle or parts thereof to third parties. I will be responsible for any and all charges that any third party warranty company fails to pay for.

X

Authorized By