



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: 91-019

Branch		
COLD LAKE		*REPRINT*
Date	Time	Page
05/11/16	09:44:03 (B)	01
Account No	Phone No	Inv No
INT01	000 0000000	W02445
Ship Via	Purchase Order	
Tax Exempt ID No.		
		Salesperson
		401

SERVICE INVOICE

STK#/FLEET#		HRS	PIN/EIN	WARRANTY DATE	HRS
R0000377	2005 TRAVIS CLAM D		X 48XEF393351003706		
91-019	XXXX	49945			

REPAIR# 1 C BOU01 NA 05/09/16 05/09/16

Change up Wiring

COMPLAINT:

Plug needs to be replaced to work with trailer functions

CORRECTION:

RB MAY 9 2016- GOT UNIT HOOKED UP TO TRUCK, TESTED OPERATION AND FOUND THAT CLAM WOULD ONLY OPEN UP AND NOT CLOSE. HAD TO CHANGE SOME WIRES TO MAKE IT WORK ON THIS TRUCK (24-002).

	LABOR	405.00
50210501	REPAIR TOTAL==>	405.00

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

	INTERNAL	CUSTOMER
LABOR	405.00	
SHOP SUPPLIES	20.25	
INTERNAL TOTAL	425.25	

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