



**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: IN STORE PICKUP

Invoice To: 51-034

Branch		
LLOYDMINSTER		*REPRINT*
Date	Time	Page
03/03/22	07:07:45 (B)	01
Account No	Phone No	Inv No
INT02		W01475
Ship Via	Purchase Order	
Tax Exempt ID No.		
		Salesperson
		400

**SERVICE INVOICE**

STK#/FLEET#		HRS	PIN/EIN	WARRANTY DATE	HRS
R0000146	51-034 BOBCAT S5	2765	ALM412079		
51-034	S570 T4	2299			
SEGMENT# 1 C DOC01 NA		02/22/22	02/22/22		
HEADLIGHTS NOT WORKING					.50 HRS
<u>COMPLAINT:</u>					
CHECK AND REPAIR HEADLIGHTS NOT WORKING.					
<u>CORRECTION:</u>					
CD-					
REPLACED RELAYS, WORKING GOOD					
57M9880	RELAY		RETAIL	28.44	
			2 T	21.88	43.76
			PARTS		43.76
			LABOR		82.50
50210502			SEGMENT TOTAL==>		126.26

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

	INTERNAL	CUSTOMER
PARTS	43.76	
LABOR	82.50	
SHOP SUPPLIES	4.12	
INTERNAL TOTAL	130.38	

**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