

✓ CUSTOMER



OFFICE ADDRESS:



Name: _____
Address: _____
Tel: _____

No: **Tel:** 08033310227, 08034504259

0068

INVOICE

Date	Month	Year
28	10	20

QTY.	DESCRIPTION OF GOODS	RATE	AMOUNT	
			N	K
5	liters engine oil		10,000	7,000
1	oil filter		5,000	2,000
1	front brake pads		1,000	7,000
1	labor		5,000	2,500
			<u>18,500</u>	

ENGINE NO:

CHASIS NO:

TOTAL 4000

3000

Received the above goods in good condition
No refund of money after payment

Amount in words

thirty thousand naira

Customer's Signature

Naira -
Thanks for your Patronage
Please call again

Naira

-Kobo

Manager's Signature