## TOWING COMPANY INVOICE

I From me: mpany Name: reet Address: y, ST ZIP Code: one:	Bill To  Name: Company Name: Street Address: City, ST ZIP Code: Phone:		Invoice No Invoice Date:  Due Date:	
Description		Quantity / Hours	Price (\$)	Total (\$)
			Subtotal	
			Sales Tax	
			Other	
			Total	
Thank you for your business. F will be a% per	Please send pa	ms and Conditions ayment within days	of receiving this invo	ice. There

## **Please Choose a Payment Type**





## **Credit Card**

☐ Visa ☐ MasterCard	☐ Discover	☐ American Express
Cardholder Name Account/CC Number Expiration Date/_ CVV Zip Code		
this authorization form ac authorization is for the go only, and is valid for one	cording to the term ods/services desc (1) time use only. I not dispute the pa	ridual to charge the credit card indicated in ns outlined above. This payment ribed above, for the amount indicated above certify that I am an authorized user of this yment with my credit card company; so long indicated in this form.
SIGNATURE(cardholder n	ama)	DATE
BANK		
Bank Wire		
Name on Bank Account: Street Address: Bank Name: Account Number: Routing Number: Account Type:		
PayPal		
Email:		

