

SERVICE ORDER
DEALER TRADE
DELIVERY
PICK UP
MARK ONE BOX ONLY

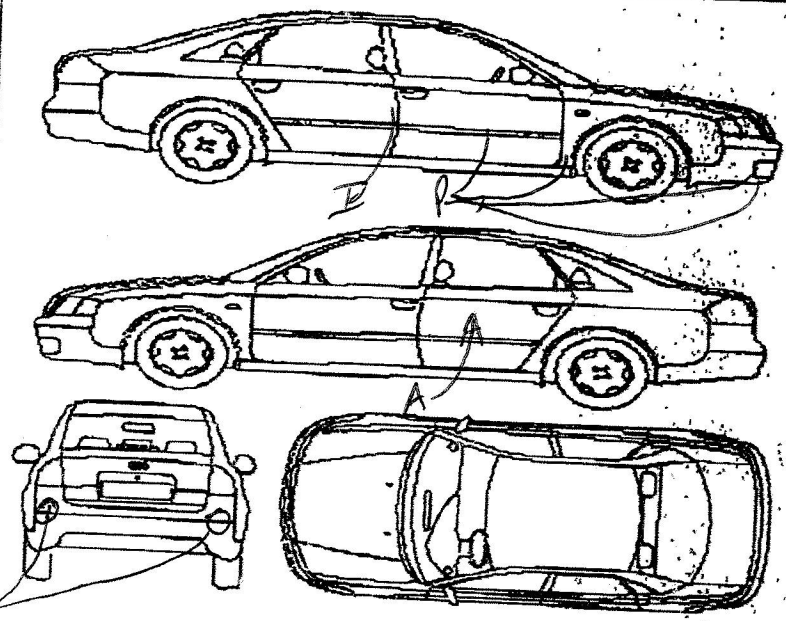
CLIENT

DATE 1/22/09

WILSON Transport
 Robert Wilson
 209-620-9592

Year: 01 **Make:** MIT **Model:** Mustang **Color:** Sil **VIN:**
OUTGOING (VEH. #1) **INCOMING (VEH. #2)** **CONTACT:**
OUTGOING Beg miles: **End Miles:** **VIN Verified**
INCOMING Beg miles: **End Miles:** **VIN Verified**

INVENTORY	
1	2
VEHICLE #	
Keys/# of	
Remotes/# of	
Owner's Manual	
Floor Mats	
Spare Tire /Cover	
Jack/Tool Kit	
Gas Cap	
Antenna	
On Star Antenna	
Navigation CD	
Ent. package	
CD Cartridge	
Window Sticker	
Equipment Verified	
Paperwork	
# of Headrests	



Legend

A- SCRATCHED	B- DENTED	C- BENT	D- CAVED IN	E- CRUMBED	F- BROKEN	G- LOOSE
H- PAINT	I- CRACKED	J- SCRAPED	K- DING	L- BUBBLED	M- NICKED	N- PITTED
O- SCUFFED	P- CHIPPED	Q- NUMEROUS SCRATCHES	R- NUMEROUS DINGS & DENTS			

INSPECTION	
1	2
VEHICLE #	
Front Grill Area	
Lt. Front Fender	
Lt. Doors	
Lt. Rims & Tires	
Lt. Rear 1/4 Panel	
Trunk / Rear End	
Rt. Rear 1/4 Panel	
Rt. Doors	
Rt. Rims & Tires	
Roof Area	
Rt. Front Fender	
Hood Area	
Windshield	
All Other Glass	
Fluid Levels	
Front Seats	
Dashboard Area	
Headliner	



Interior is pretty worn

(Damage) **OUTGOING VEHICLE (Veh #1)** **INCOMING VEHICLE (Veh #2)**

Signature Robert Barry **Signature** *[Signature]*

(Print Name) Robert Barry **(Print Name)** *[Signature]*

I the above signed, acknowledge the above noted damage is an accurate depiction of this vehicle's condition equipment and mileage upon its release to Dealer Transport Inc.

Veh. #1 Signature: _____ Print Name _____ Time _____

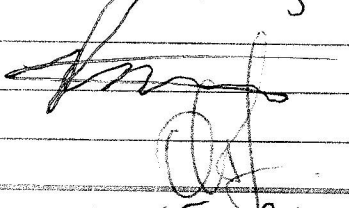
Veh. #2 Signature: _____ Print Name _____ Time _____

I the above signed, hereby state that I am legally authorized and entitled to take possession of the above described vehicle. I further agree to pay the transport cost (as applicable) for said vehicle. I have received this vehicle in satisfactory condition with any and all damage duly noted. I hereby release Dealer Transport Inc. of any further obligations.

Order # _____ **Drivers Signature** *[Signature]* **Drivers Name** Robert Wilson

INVOICE

SOLD TO MAKMAI North America		SHIP TO ALEX NAUMOV / West Coast Shipping	
ADDRESS 92 Davenport dr		ADDRESS 1055 Broadway Ave	
CITY, STATE, ZIP Richmond Hill, ON L4E 5A7		CITY, STATE, ZIP SAN PABLO, CA, 94806	
CUSTOMER ORDER NO.	BOUGHT BY Robert Wilson	TERMS	DATE 1-28-09

DESCRIPTION	PRICE	UNIT	AMOUNT
Wilson Transport delivered (1) 2001 Mitsubishi Montero car 1-28-09 Vin # 029123	400	1	400.00
Vehicle is delivered with no damage other than preexisting.			
 <div data-bbox="737 783 976 880"> WILSON TRANSPORT ROBERT WILSON 1045 MONTANA AVE TURLOCK, CA 95380 </div>			
			400.00

FORM 457219

Please remit payment TO Stamped ADDRESS ABOVE