



Calkins Auto Brokers, LLC

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Salem, Or 97304-5323

Office 503-763-6688

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Date of Request: _____ Estimated Delivery date: _____

Year _____ Make _____ Model _____

VIN# (last 8) _____

Bill to: _____

Pick up location: _____

Contact : _____ Phone: _____

Ship to location: _____

Contact : _____ Phone: _____

Contract Amount: \$ _____ + Fuel surcharge \$ _____ TOTAL \$ _____

Rate authorization by _____

Additional Information:

NOTES:

Notwithstanding that this account is established in the name of a company, I personally guarantee payment of the account

Signature: _____ Date: _____