

# Invoice

Date	Invoice #
9/9/2025	39184

Bill To

[Redacted]

P.O. No.	Terms	Due Date
	Due on receipt	9/9/2025

Qua...	Description	Rate	Amount
2	R803108 SLACK ADJUSTER, MERITOR	[Redacted]	[Redacted]
2	BRAKE CHAMBER SC20	[Redacted]	[Redacted]
2	CLEVIS KIT R810019 <B12>	[Redacted]	[Redacted]
2	R810005LW PIN, CLEVIS <B12>	[Redacted]	[Redacted]
6	ZIP TIES	[Redacted]	[Redacted]
3	LABOR BRAKE CHAMBER AND SLACK ADJUSTER LABOR Environmental Fee/Shop Supplies	[Redacted]	[Redacted]
	TRUCK HAD THE DRIVERS SIDE WINDSHIELD REPLACED. HAD THE RCOK CHIP REPAIRED IN THE PASSENGER SIDE WINDSHIELD.  REPLACED THE RIGHT FRONT DRIVE AXLE AIR BAG. REPLACED THE LEFT REAR DRIVE AIR BAG AS NEEDED. 2 HOURS ADVISED THE OWNER THE TAG AXLE NEEDS THE TIRES REPLACED REMOVED AND REPLACED THE U-JOINT AT THE CARRIER BEARING 2 HOURS REMOVED AND REPLACED THE ENGINE BELTS THEY WERE BOTH CRACKED. .5 HOURS REWired THE REVERSE LIGHT THE CORRECT WAY TO GET IT TO WORK. REPLACED THE TAIL LIGHT THAT WAS INOP LIGHT LABOR 1 HOURS REPLACED THE GLAD HAND SEAL THAT WERE INOP FOUND THE DRIVERS SIDE WHEEL BEARING WAS LOOSE. DISASSEMBLED THE WHEEL END. REMOVED AND REPLACED THE WHEEL BEARING. INSTALLED THE HUB WITH A NEW WHEEL SEAL. ASSEMBLED THE WHEEL END. INSTALLED THE WHEELS AND TIRES. 3 HOURS LABOR	[Redacted]	[Redacted]
		<b>Total</b>	
		Payments/Credits	
		Balance Due	



NAME		PHONE	
ADDRESS			
2ND AUTHORIZED NAME		PHONE	
MAKE <i>Pete</i>	TYPE OR MODEL	YEAR	RECEIVED (DATE & TIME) A.M. P.M.
SERIAL #/VIN	ENGINE NO.		PROMISED (DATE & TIME) A.M. P.M.
ODOMETER	LICENSE NO.	TERMS	PHONE WHEN READY <input type="checkbox"/> YES <input type="checkbox"/> NO
MVE	ORDER WRITTEN BY	CUSTOMER'S ORDER NO.	

DIS	ISJ	LABOR CHARGE
LUBRICATION	<input type="checkbox"/>	
CHANGE OIL	<input type="checkbox"/>	
CHANGE OIL FILTER CART	<input type="checkbox"/>	
CHANGE TRANS.	<input type="checkbox"/>	
CHANGE DIFF.	<input type="checkbox"/>	
PACK FRONT WHEEL BRGS	<input type="checkbox"/>	
ADJUST BRAKES	<input type="checkbox"/>	
ROTATE TIRES	<input type="checkbox"/>	
WASH POLISH	<input type="checkbox"/>	
STATE INSPECTION	<input type="checkbox"/>	

**MATERIAL USED**  
ALL PARTS NEW UNLESS SPECIFIED. IS USED, IS REBUILT, OR RECONDITIONED

QTY.	PART NO.	DESCRIPTION	PRICE	WARRANTY YR.
1		<i>Line EXT</i>	<i>500.00</i>	
<i>Thank You</i> OUTSIDE REPAIRS				
PARTS SAVED		BROUGHT FORWARD		
RETURNED		TOTAL PARTS <i>1500.00</i>		

OPER. NO.	INSTRUCTIONS
	CHARGE FOR HAZARDOUS OR OTHER WASTE REMOVAL*
	<i>R &amp; I Clutch 9564, Inspect fan damage - found ok, throw out Slegue dry &amp; Lube &amp; Reinstalled, greased and verified operation</i>
Estimated cost \$	Estimate Charge
Reason for Charge	

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:  
 I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, INCLUDING A COMPLETION DATE, IF MY FINAL BILL WILL EXCEED \$100. (\$50 in Maryland)  
 I REQUEST A WRITTEN ESTIMATE. THE FINAL BILL MAY NOT EXCEED THIS ESTIMATE WITHOUT MY WRITTEN APPROVAL.  
 I DO NOT REQUEST A WRITTEN ESTIMATE, AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$\_\_\_\_\_. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.  
 I DO NOT REQUEST A WRITTEN ESTIMATE.

\*Checked lines apply (Preparer must check at least one)  
 This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal.  
 This amount includes a charge of \$\_\_\_\_\_, which is required under law.

We are entitled by law to the return of all parts released, except those for which there is a core charge, unless you agree otherwise by indicating the following: \_\_\_\_\_ I do not desire the return of any of the parts that are replaced during the authorized repairs.  
 Estimate good for 30 days. Not responsible for damage caused by theft, fire or acts of nature. I authorize the above repairs, along with any necessary materials. I authorize you and your employees to garage my vehicle for the purpose of testing, inspection, and delivery at my risk. An express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of the repairs thereon. If I cancel repairs prior to their completion for any reason, a late cancel and reschedule fee of \$\_\_\_\_\_ will be applied.

SIGNED \_\_\_\_\_  
 DATE \_\_\_\_\_

QTY.	ACCESSORY NO.	ACCESSORIES	PRICE
		TOTAL ACCESSORIES	

METHOD OF PAYMENT: <input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CHARGE		GAS, OIL, & GREASE		PRICE
LABOR <input type="checkbox"/> FLAT RATE <input type="checkbox"/> HOURLY <input type="checkbox"/> BOTH		GALS. GAS @		
<input type="checkbox"/> RETAIN PARTS <input type="checkbox"/> DESTROY PARTS		QTS. OIL @		
		LBS. GREASE @		
		TOTAL GAS, OIL, & GREASE		

Daily storage fee after repair work has been completed and customer has been notified. No charges shall accrue or be due and payable for a period of 3 working days from date of notification. \$_____	TOTAL LABOR
GUARANTEED ITEM(S) _____	TOTAL PARTS
GUARANTEE EFFECTIVE UNTIL _____	ACCESSORIES
TIME _____	GAS, OIL, & GREASE
MILEAGE _____	OUTSIDE REPAIRS
	STORAGE FEE (if applies)
	TAX
	TOTAL AMOUNT <i>1000.00</i>



# Invoice Customer Copy



Invoice Date	Due Date	Customer #	Invoice #
5/14/24		103	3698076-00
Order Date	PO #		Page #
5/14/24	515-212-0661		1

Bill To  
**COD ACCT 1 L**  
  
  
**IA**

Ship To  
**SCHEIB**  
  
  
**IA**

**Ship Point**  
 01DM - MIDWEST WHEEL COMPANIES, 1436 EAST OVID, , DES MOINES, IA, 50316, 515-265-1491

**Remit To**  
 MIDWEST WHEEL COMPANIES, P.O. Box 1461, Des Moines, IA 50305-1461 - For Account Inquires: [acctrec@midwestwheel.com](mailto:acctrec@midwestwheel.com) / 1-800-888-0248 Ext.1520

Taken By	Salesman	Via	Shipped	Terms	Phone
UJR	180	<b>** CUST WAIT</b>	5/14/24	<b>COD ONLY</b>	

**Notes**

24 Hr. Haz. Material Emergency Contact Tel. No. 800-424-9300 ccn# 990885

Line	Haz Mat	Product and Description	Order Quantity	Backorder Quantity	Shipped Quantity	Qty UM	Unit Price	Amount(Net)
1		<b>FW SLTPL7000</b> LH7000	1	0	1	EA	1,215.44	1,215.44
2		<b>FW KIT-PIN-191</b> PIN & BUSHING KIT- 1 PIE	1	0	1	EA	126.63	126.63
<b>2 Lines Total</b>			<b>Qty Shipped Total</b>	<b>2</b>			<b>Subtotal</b>	<b>1,342.07</b>
							<b>Taxes</b>	<b>93.94</b>
							<b>Down Payment</b>	<b>1,436.01</b>
							<b>Total</b>	<b>0.00</b>

**Terms Notice**  
 Credit is extended with the understanding that all bills will be paid within the terms stated. Late charge is computed on past due balance at the end of each month at a rate of 1.25% per month which is an annual rate of 15%. Any warranties on the product sold hereby are those made by the manufacturer. The seller hereby disclaims all warranties, either express or implied, including any warranty of merchantability or fitness purpose, and the seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products. Any limitation herein does not apply where prohibited by law.



Customer ID: 

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