

Equipment Bill of Sale Form

Date of the sale of the equipment: _____

Full name of the seller/dealer: _____

Exact location of the shop/retail outlet: _____

Contact phone number: _____

Email id (if any): _____

Official Signature of the seller/dealer: _____

Name of the equipment: _____

Name of the brand: _____

Specific model code: _____

The main features of the equipment: _____

Total price of the equipment (without taxes): _____

Tax amount: _____ Warranty period: _____

Full name of the customer: _____

Contact address: _____

Contact phone number (if any): _____