

LAYAWAY FORM

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Date \_\_\_\_\_

Salesperson: \_\_\_\_\_

(Sold to: \_\_\_\_\_ )  
 ( ) To Be Picked Up

( \_\_\_\_\_ )  
 ( ) Delivered

Item	Description	Quant.	Unit	Amount
Number :	:	:	Cost :	:

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PAYMENT PLAN

_____	Payments	_____
_____	SUB-TOTAL	
\$ _____	each	
_____	SALES TAX	
\$ _____	final payment	
	TOTAL	
: Date	: Amount Due	: Payment : DUE _____
:	:	: _____
:	:	:
:	:	: Deposit _____
:	:	:
		**Balance _____**
		*****Due-----**