

QUARTERLY SALES REPORT of New or Used Tanning Equipment

Company Name _____

Registration Number _____

Reported Period _____



DATE OF PURCHASE _____ TELEPHONE NUMBER (____) _____

OWNER NAME _____ SALON NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

MFG. _____ MODEL# _____ SERIAL# _____

Used _____ New _____ Commercial Use _____ Personal Use _____



DATE OF PURCHASE _____ TELEPHONE NUMBER (____) _____

OWNER NAME _____ SALON NAME _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

MFG. _____ MODEL# _____ SERIAL# _____

Used _____ New _____ Commercial Use _____ Personal Use _____



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Used _____ New _____ Commercial Use _____ Personal Use _____

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OWNER NAME _____ SALON NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
MFG. _____ MODEL# _____ SERIAL# _____
Used _____ *New* _____ *Commercial Use* _____ *Personal Use* _____

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OWNER NAME _____ SALON NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
MFG. _____ MODEL# _____ SERIAL# _____ *Used* _____

New _____

Commercial Use _____

Personal Use _____