

CAR REPAIR RECEIPT

Company Name: abc repair

Date: August 1, 2024

Street Address: washington

Receipt #: _____

City, State, Zip: _____

Phone: 11221122

Fax: _____

Email: _____

Website: _____

Customer Information

Name: _____

City : _____

Phone: _____ Year, Make, Model: _____

Services Rendered	Price	Parts	Qty./Price	Total
general service	2000		1	
oil change	500		1	
brake pads	1000		2	
catalytic	1000		1	
Amount Paid: _____			Subtotal	
			Total	5500

Name(s) of Service Person(s): _____

Printed Name: _____



