

REPAIR ORDER

YOUR COMPANY NAME

Address
CITY, STATE, ZIP CODE
Phone Number
Advertising Line

NAME				DATE	
ADDRESS				PH. NO.	
ODOMETER READING		VIN. NO.			
MAKE AND MODEL		LICENSE NO. AND STATE		MOTOR NO.	
LUBRI-CATE <input type="checkbox"/>	BATTERY <input type="checkbox"/>	CHANGE OIL <input type="checkbox"/>	FLAT REPAIR <input type="checkbox"/>	WIPERS <input type="checkbox"/>	TRANS. <input type="checkbox"/>
				DIFF. <input type="checkbox"/>	WASH <input type="checkbox"/>
					POLISH <input type="checkbox"/>
DESCRIPTION		INSTRUCTIONS			AMOUNT
QTY	PART NO.	NAME OF PART	SALE AMT.	Total Labor	
				Total Parts	
				Environmental Charges	
				Oil, Grease	
				Tires, Tubes	
				Shop/Supplies	
				Other	
TOTAL PARTS				TOTAL	
	Qts. Oil	@		TAX	
	Lbs. Grease	@			
TOTAL OIL-GREASE				TOTAL AMOUNT	

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the car, truck or vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car, truck or vehicle to secure the amount of repairs thereto.

Work Authorized by _____ Date Promised _____

Delivered to _____ Date Delivered _____

0001001

ESTIMATES FOR LABOR ONLY-
MATERIAL ADDITIONAL