

Vehicle Maintenance Receipt

Receipt No.:

Date:

Customer Name:

Contact Number:

Vehicle Make/Model:

License Plate:

Mileage:

Service Description	Parts Used	Cost
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
Total:		<input type="text"/>

Technician Name:

Signature:

Thank you for trusting us with your vehicle maintenance.