



# DETAILING INVOICE

Date:  
Time In:  
Time Out:

Invoice #:

CUSTOMER INFORMATION		VEHICLE INFORMATION	
Name: Address:		Make: Color: Odometer:	Model: License:

BEFORE	CHECKLIST	AFTER	VEHICLE DIAGRAM	
	<b>EXTERIOR</b> LF 45° RR 45° Front Rear Wheel macro view Gas cap			
	<b>INTERIOR</b> Driver seat Passenger seat Rear seats (if applicable) Cockpit view Trunk Major stains (if applicable)			
Qty.	SERVICE	COST		
		TOTAL		

*chocolate monkey motors*

NOTES:



chocomnky

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