



# 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> FL 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	

*chocolate monkey motors*

TOTAL

NOTES:



chocomnky

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