

# **KOJO AUTO SERVICE CENTER**



#### LAGOS:

1, Moshalashi Street, Off Western Avenue, By Ipori Bridge Alaka Surulere, Lagos. Tel: 08077692625, 08077692662, 08077692633

**Item Description** 

FRONT BRAKE PAD

**ENGINE OIL** 

OIL FILTER

### ABUJA:

Plot 1209 Shehu Yar'Adua Way Mabushi Near VIO, Abuja FCT. Tel: 08077692630, 08067779150, 09-2911234

#### BENIN:

45, Agbor Road, Ikpoba Hill, Benin City, Edo State. Tel: 08077692641, 08077692644

#### PORT-HARCOURT:

Plot 117, Trans-Amadi Layout Port Harcourt, Rivers State. Tel: 08077692621, 08077692631, 07037823937

Quantity

7

1

#### AWKA:

Plot C5 and C6 Agu-Akwa Layout Akwa Anambra State Tel: 08077692640, 08077692610

## **JOB INSTRUCTION**

Customer Name/ID:	INTERNATIONAL RESCUE COMMITTEE INC / KJ118554	Date: 13th Jul, 2022	
Organization:		Reg. No: SMK 589 EG	
Vin/Chasis No:	JTEBX3FJ00K246424	Odometer Reading: 79565Km	
Phone Number:	08135402302	E-mail:	
Vehicle Make:	Toyota Landcruiser Prado	Model Number: TRJ150L-GKTE	<b>&lt;</b> V
Address:	JABI ABUJA		

REAR BRAKE PAD	1				
	Additional Job Completionn: □  Value: □  Project Estimatew/Explanationr: □  Car Was Needed?: □  Replaced Part Keep: □				
☐ Cleanness (Exterior/Interior): ☐ ☐ Courtesy Items Removal: ☐ ☐ Outer Mirror Position / Seat Position: ☐ ☐ Clock Adjustment / Radio Sitting: ☐ ☐ Job Completion Notificxation: ☐	Signed 1 Date: Time: Signed 2 Date: Time:	Job Details Explanation :  Fee Explanation :  Result Confirmation with Customer: Walk-Around Check :	Fixed: □ Level Up: □ No Fixed: □ PSFU(Plan) □	Delivery: Dtae:  Time:  Customer:	
Change of Delivery Time:	Job Time:				
Additional Jobs /Job Stoppage/Others		Job Start: Date Time			
Completion Changed:	Job Completion: Date: Time:				
Other Findings:		Actual Hours Clocked:	Technician Name:	Quality Control Staff:	
Job Completion Notification: Date: Time:	Delivered to Owner / Family / Other ()				
P.S.F.U. (Plan):  Date: Time:	Contact Info: Telephone No: (Home/Business/Mobile)  Email:				
P.S.F.U (Actual):	Customer: Owner / Family / Other ()				
Date: Time					
P.S.F.U (GJ) :	Staff Name:				
☐ Fixed ☐ Followup Status (Follow up Again	Confirmed By:				
Date: Time: □ Not Fixed (Appointment Date/Time)	Supplied By: Issued By: Order By: SAMUEL YUSUF FUNDA				
Date:Time:					