

MATERIAL USED

ALL PARTS NEW UNLESS SPECIFIED: U-USED, R-REBUILT, RC-RECOMMENDED

| QTY | PART NO. | DESCRIPTION | PRICE | WARRANTY |
|-----|----------|--------------------------|--------|----------|
| | | OUTSIDE REPAIRS | | |
| | | BROUGHT FORWARD | | |
| | | TOTAL PARTS | 178.60 | |
| | | TOTAL ACCESSORIES | | |

Address: _____ PHONE: _____
 2ND AUTHORIZED NAME: _____
 MAKE: Ford TYPE OR MODEL: _____ YEAR: 1985 RECEIVED (DATE & TIME): 11-17-85 A.M.
 SERIAL #/VIN: _____ ENGINE NO.: _____ PROMISED (DATE & TIME): _____ P.M.
 ODOMETER: 115829 LICENSE NO.: MD 617D TERMS: _____ PHONE WHEN READY: YES NO
 MAKE: _____ ORDER WRITTEN BY: _____ CUSTOMER'S ORDER NO.: _____

OPER. NO. _____

INSTRUCTIONS

CHARGE FOR HAZARDOUS OR OTHER WASTE REMOVAL*

ISS: _____ ISJ: _____ LABOR: _____

| | |
|-------------------------|--------------------------|
| LUBRICATION | <input type="checkbox"/> |
| CHANGE OIL | <input type="checkbox"/> |
| CHANGE OIL FILTER CANT. | <input type="checkbox"/> |
| CHANGE TRANS. | <input type="checkbox"/> |
| CHANGE DIFF. | <input type="checkbox"/> |
| PACK FRONT WHEEL BRGS | <input type="checkbox"/> |
| ADJUST BRAKES | <input type="checkbox"/> |
| ROTATE TIRES | <input type="checkbox"/> |
| WASH POLISH | <input type="checkbox"/> |
| STRIP INSPECTION | <input type="checkbox"/> |

Estimated cost \$ _____ Estimate Change _____
 Basis for Change: _____
 self test power balance test
 clear codes
 repair shop wiring test drive
 the best

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:

I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, INCLUDING A COMPLETION DATE, IF MY FINAL BILL WILL EXCEED \$100. (\$50 in Maryland). I REQUEST A WRITTEN ESTIMATE. THE FINAL BILL MAY NOT EXCEED THIS ESTIMATE WITHOUT MY WRITTEN APPROVAL.
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$ _____. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
 I DO NOT REQUEST A WRITTEN ESTIMATE.

*Checked lines apply. (Preparer must check at least one):

This charge represents costs and profits for the motor vehicle repair facility for miscellaneous shop supplies or waste disposal.
 This amount includes a charge of \$ _____ which is required under law.

METHOD OF PAYMENT:

CASH CHECK CHARGE
 LABOR FLAT RATE HOURLY BOTH
 RETAIN PARTS DESTROY PARTS

GAS, OIL, & GREASE

GALS. GAS @ _____

QTS. OIL @ _____

LBS. GREASE @ _____

TOTAL GAS, OIL, & GREASE

PRICE

Shop charge for labor next work has been completed and customer has been notified. No charge shall accrue or be due and payable for a period of 3 working days from date of notification. \$ _____

QUARANTEED ITEMS: _____

GUARANTEE EFFECTIVE UNTIL: _____

TIME: _____

MILEAGE: _____

SIGNED _____

DATE _____

TOTAL LABOR
 TOTAL PARTS
 ACCESSORIES
 GAS, OIL, & GREASE
 OUTSIDE REPAIRS

TOTAL AMOUNT

ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE

NO 5869

5-1526

| QUAN. | PART NO. | DESCRIPTION | SALE AMOUNT |
|-------|----------|----------------------|-------------|
| | | head gaskets set | |
| | | head studs | |
| | | egr delete | |
| | | oil cooler | |
| | | Set programmer | |
| | | exhaust | |
| | | oil filter | |
| | | oil | |
| | | coolant | |
| | | power steering fluid | |
| | | blow plug addresses | |
| | | Fan clutch | |
| | | Thermoset | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

DATE 4-18-14

TIME RECEIVED _____

TIME PROVIDED _____

CUSTOMER'S ORDER NO. _____

YEAR _____ TYPE OF MODEL _____ MOTOR NO. _____ SERIAL NUMBER _____ LICENSE NUMBER _____ ODOMETER _____

OPER. NO. _____

REPAIR ORDER - LABOR INSTRUCTIONS

ORDER WRITTEN BY _____

LUBRICATE CHANGE OIL FLUSH TRANS. FLUSH OIL WASH POLISH

Diagnostic / Trouble shoot

RTR head gaskets, install egr delete

oil cooler, CRP head studs, oil filter

exhaust w/muffler, thermoset

blow plug addresses and fan clutch

SPECIAL REPAIRS

#1277 Thank you!

I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE, ALONG WITH NECESSARY MATERIALS. YOU AND YOUR EMPLOYEES MAY OPERATE ABOVE VEHICLE FOR PURPOSES OF TESTING, INSPECTION OR DELIVERY AT MY RISK. AN EXPRESS MECHANICS LIEN IS ACKNOWLEDGED ON ABOVE VEHICLE TO SECURE THE AMOUNT OF REPAIRS THEREOF. YOU WILL NOT BE HELD RESPONSIBLE FOR LOSS OR DAMAGE TO VEHICLE OR ARTICLES LEFT IN VEHICLE IN CASE OF FIRE, THEFT, ACCIDENT OR ANY OTHER CAUSE BEYOND YOUR CONTROL.

RETAIN PARTS DESTROY PARTS

AUTHORIZED BY _____

RECEIVED BY _____

| | | | | | | |
|--------------------------|---|--|--|--|--|--|
| GAL. GASOLINE | @ | | | | | |
| QTS. OIL | @ | | | | | |
| LBS. GREASE | @ | | | | | |
| TOTAL GAS - OIL - GREASE | | | | | | |

| | | |
|-----------------------|------|-------------|
| TOTAL PARTS | | |
| ESTIMATE AMOUNT | | PARTS LABOR |
| ADD'L AUTH. AMT. | TIME | BY |
| | | |
| ADD'L AUTH. AMT. | | |
| | | |
| ADD'L AUTH. AMT. | | |
| | | |
| ESTIMATE TOTAL | | |

Unless otherwise provided by law, the seller (above named dealership) hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

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