



# [Quick Lube Name]

[Fast,FriendlyService]  
[Address] | [Phone]

## SERVICE RECEIPT

#[INV-0001]  
[MM/DD/YYYY] [Time]

### CUSTOMER

[Customer Name]  
[Phone Number]  
[Email Address]

### VEHICLE

Year/Make/Model: [2024 Toyota Camry]  
License Plate: [ABC-1234]  
Mileage: [45,678]

### [SERVICE PACKAGE NAME]

[e.g., Premium Full Synthetic Oil Change]

**\$[0.00]**

### SERVICES PERFORMED

| Service                             | ✓ | Price    |
|-------------------------------------|---|----------|
| [Oil Change - Type: Full Synthetic] | ✓ | Included |
| [Oil Filter Replacement]            | ✓ | Included |
| [Fluid Top-Off (All)]               | ✓ | Included |
| [Tire Pressure Check & Adjust]      | ✓ | Included |
| [Exterior Light Check]              | ✓ | Included |
| [Air Filter Inspection]             | ✓ | Included |

### ADDITIONAL SERVICES

|                          |   |          |
|--------------------------|---|----------|
| [Air Filter Replacement] | 1 | \$[0.00] |
| [Cabin Air Filter]       | 1 | \$[0.00] |
| [Wiper Blades - Pair]    | 1 | \$[0.00] |

#### NEXT SERVICE DUE:

[Date: MM/DD/YYYY]  
or [Mileage: 00,000 miles]

Subtotal: \$[0.00]

Tax: \$[0.00]

**TOTAL: \$[0.00]**

Thank you for choosing [Shop Name]!  
[Website] • [Email]