

Car Wash Receipt

_____	_____
Date	Receipt Number

Company Name

City, State, ZIP Code

Address

Phone

Vehicle Information

Make

Model

Year

Color

Description of Services	Quantity	Cost	Total
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
		Subtotal:	\$ _____
		Tax rate:	% _____
		Total:	\$ _____
		Amount paid:	\$ _____

Payment method:

- Cash.
- Credit card.
- Check.
- Other: _____.

Check/Credit card number: _____.

Printed Name

Authorized Signature