

NAME		DATE	
ADDRESS		ACCOUNT	
MAKE	COLOUR	LICENSE	
LITRES GASOLINE @		. 16	
LITRES OIL @			
LUBRICATION			
FILTER			
CLERK	REMARKS:	PURCHASES	
		G.S.T.	
CASH	CHQ.	DEBIT CARD	PAID OUT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MDSE RET'D	VISA	M-C	AMEX
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ON ACCT.			
<input type="checkbox"/>			
RECEIVED IN GOOD ORDER BY:		SUB-TOTAL	
		P.S.T.	
		TOTAL	