



CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773



IMR, MRS., I _____
 ADDRESS _____
 CITY S.

DELIVER WILL CALL 3:30 CASH C.C. CHARGE

MAKE & MODEL PLY YEAR 59 C.C. AUTH. _____

BUSINESS PHONE 293-2326 HOME PHONE _____

LICENSE NO. ALAM 559

DATE SERVICED 6-15-83

MILEAGE 2169

ODE 25 ORDER ESTIMATED BY _____ EMP NO. OR INITIALS _____

REPAIR INSTRUCTIONS

ESTIMATE

ESTIMATED COST	PARTS	LABOR	DO YOU WANT THE OLD PARTS? YES <input type="checkbox"/> NO <input type="checkbox"/>
REVISED ESTIMATE	PARTS	LABOR	
ADDITIONAL WORK APPROVED BY _____			IN PERSON <input type="checkbox"/>
DATE APPROVED TIME OF CALL _____			TELEPHONE <input type="checkbox"/>
			TELEPHONE NO. _____

VEHICLE CHECK

CHECK ITEMS REQUESTED

SERVICE

TIRES	RF	LF	LR	RR	SPARE	LUBRICATION & VEHICLE CHECK	MERCHANDISE	Code	SERVICE
GOOD						QTS. <u>SPARK</u> <u>SAC</u> OIL @			A
FAIR						AIR CONDITIONING SERVICE			B
UNSAFE						ALIGNMENT, FRONT END			C
LBS.						BATTERY SERVICE			D
INFLATE TO <u>F</u> LBS. <u>R</u> LBS.						BATTERY SALE			E
<input type="checkbox"/> INSPECT UNIVERSAL JOINTS						BRAKE SERVICE			F
<input type="checkbox"/> INSPECT MUFFLERS/PIPES						COOLING SYSTEM, SERVICE			G
<input type="checkbox"/> INSPECT SHOCK ABSORBERS						EMISSION CONTROLS			H
<input type="checkbox"/> INSPECT BRAKES <input type="checkbox"/> LINING <input type="checkbox"/> HOSES						ENGINE DIAGNOSIS			I
<input type="checkbox"/> INSPECT IDLER ARM/STEERING LINKAGE						FILTER, AIR			J
<input type="checkbox"/> INSPECT DRAIN PLUGS <input type="checkbox"/> RECHECK						FILTER, GAS			K
<input type="checkbox"/> INSPECT TRANSMISSION/DIFFERENTIAL LEVELS						FILTER, OIL			L
<input type="checkbox"/> INSPECT WIPER BLADES						RAD. HOSE/V-BELT			M
<input type="checkbox"/> INSPECT & TEST COOLING SYSTEM <input type="checkbox"/> + <input type="checkbox"/> -						SHOCK ABSORBERS			N
<input type="checkbox"/> INSPECT POWER STEERING						TIRE SERVICE			O
<input type="checkbox"/> INSPECT BRAKE FLUID						TIRE SALE			P
<input type="checkbox"/> INSPECT & TEST BATTERY/TERMINALS						TRANSMISSION SYSTEM			Q
<input type="checkbox"/> INSPECT FILTERS <input type="checkbox"/> AIR <input type="checkbox"/> EMISSION <input type="checkbox"/> FUEL						TUNE UP <u>8 CYLINDER</u>			R
<input type="checkbox"/> INSPECT PCV VALVE						VEHICLE INSPECTION			S <u>3895</u>
<input type="checkbox"/> INSPECT HOSES/BELTS						WHEEL BALANCE/PACK			T
<input type="checkbox"/> INSPECT & TEST ALL LIGHTS						OTHER MERCHANDISE & SERVICE			U
<input type="checkbox"/> INSPECT & TEST EMERGENCY BRAKE						<u>8-RT19YC SPARK PLUGS</u>	<u>20.00</u>		V
<input type="checkbox"/> INSPECT & LUBE DOOR HINGES						<u>1-SET POINTS (OUTSIDE)</u>	<u>6.43</u>		
<input type="checkbox"/> AFFIX DOOR RECORD/VACUUM/WINDOWS						<u>1-ROTOR (OUTSIDE)</u>	<u>3.43</u>		

WE RECOMMEND THE FOLLOWING REPAIRS _____ WORK AUTHORIZED _____

THEY ARE LISTED BY THEIR URGENCY

NEEDS

NEEDS

Paul Smith

I, the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection of any sums due, I agree to pay costs of collection and reasonable attorney fees. Receipt of a copy of this order is hereby acknowledged. It is understood that the final invoiced price will not exceed the estimate without my approval.

SERVICE TOTAL	<u>3895</u>
MERCHANDISE TOTAL	<u>2986</u>
TAX	<u>194</u>
TOTAL	<u>7075</u>

INVOICE NUMBER 100228

SIGNED _____ CUSTOMER SIGNATURE _____

ALL PARTS NEW UNLESS OTHERWISE SPECIFIED

GASOLINE @ _____ W

CUSTOMER'S INVOICE *Thank You*

No. 0746985

Sears, Roebuck & Co.
1350 W. San Carlos St.
San Jose, Calif. 95126
Certificate of Registration
IAF 22630 D

ACCOUNT NUMBER
NAME (PRINT)
ADDRESS
CITY AND ZIP CODE
PHONE (AREA CODE)

190-LABOR	SHOP CODE	CHARGES	WORK DONE BY
INSTALL TIRES/WHEEL BALANCE		13 90 115	
BATTERY SERVICE			
SHOCKS			
LUBE/OIL CHANGE/OIL FILTER			
TRANSMISSION OIL/FILTER SERVICE			
ALIGNMENT REPAIR			
ALIGNMENT			
ENGINE DIAGNOSIS			
EXHAUST SYSTEM/MUFFLER/TAIL PIPE/EXHAUST PIPE			
BRAKE SERVICE			
COOLING SERVICE FLUSH			

NEW OIL
TWO WITH 172

1214 120-09489
PL4
ALBA 09 210.810

CREDIT APPROVAL STATE LICENSE NO. (if applicable)

VEHICLE IDENTIFICATION NO.

REPLACED PARTS REQUESTED BY CUSTOMER
 YES NO

INITIAL ESTIMATE REVISED ESTIMATE

PARTS LABOR TOTAL

DATE TIME OF DAY

CUSTOMER CONTACTED BY
 IN PERSON BY PHONE

SEE WARRANTY ON REVERSE SIDE

4695 751218/028 9449

95 TIRE	86141	2 MDS	135.98
95 TIRE	99999	2 MDS	51.00
190 WHL BALANCE	11012	2 MDS	13.99
		STL	154.88
		TAX	9.16

(A) LABOR TOTAL (incl. tax if applicable)

QTY.	STOCK NO.	UNIT PRICE	AMOUNT OF SALE (CASH PRICE)	USED RESULT OR RECON. DITCHED	DESCRIPTION OF PARTS ALL PARTS NEW UNLESS OTHERWISE STATED
2	289141		135.98		P 215-75-14
	299999	2.00	1.00		ITEMS
			14091		

12/20/83 1 CSH TTL 164.04

PREVENTIVE MAINTENANCE			
SCHEDULED SERVICE REC.			
OR and Filter			
Lubrication			
Transmission Fluid			
Work			
ENGINE INSPECTION			
DESCRIPTION			
Oil Level			
Fluid Level			
T.C.V. Valve			
Air Filter			

ASK ABOUT OUR LIFETIME WHEEL ALIGNMENT AGREEMENT AND CAR CARE COUPON BOOK

NOTICE TO OUR CALIFORNIA CUSTOMERS

A buyer of this product in California has the right to have this product serviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the buyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty period will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been performed due to delays caused by circumstances beyond the control of the buyer, or if the warranty repairs did not remedy the defect and the buyer notifies the manufacturer or seller of the failure of the repairs within 60 days after they were completed. If, after a reasonable number of attempts, the defect has not been fixed, the buyer may return this product for a replacement or a refund subject, in either case, to deduction of a reasonable charge for usage. This time extension does not affect the protections or remedies the buyer has under other laws.

TAX 9/16

(B) MERCHANDISE TOTAL (including tax)

(A) + (B) = TOTAL AMOUNT OF SALE

DEPOSIT

BALANCE

This purchase is made under my SearsCharge Account Agreement, which is incorporated herein by reference, for the credit sales price consisting of the cash price plus the **FINANCE CHARGE**. This order is subject to the approval of the Credit Sales Department of Sears, Roebuck and Co.

SEARS, ROEBUCK AND CO.





CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773

<input type="checkbox"/> DELIVER	TIME	CASH	C.C. CHARGE
<input type="checkbox"/> WILL CALL		<input type="checkbox"/>	<input type="checkbox"/>
MAKE & MODEL	YEAR	C.C. AUTH	
Plv.	59		



NO.	DATE SERVICED
	1-7-84
MILEAGE	
ORDER ESTIMATED BY	EMP. NO. OR INITIALS

REPAIR INSTRUCTIONS

ESTIMATE

ENGINE RUNNING ROUGH
WATER LEAK
CHECK REAR LIGHTS/FUSES

ESTIMATED COST	PARTS \$	LABOR \$	DO YOU WANT THE OLD PARTS?
REVISED ESTIMATE	PARTS \$	LABOR \$	YES <input type="checkbox"/>
ADDITIONAL WORK APPROVED BY			NO <input type="checkbox"/>
DATE APPROVED			IN PERSON <input type="checkbox"/>
TIME OF CALL			TELEPHONE <input type="checkbox"/>
			TELEPHONE NO. <input type="checkbox"/>

VEHICLE CHECK

CHECK ITEMS REQUESTED

TIRES	RF	LF	LR	RR	SPARE	LUBRICATION & VEHICLE CHECK	MERCHANDISE	Code	SERVICE
GOOD						QTS. BRAND SAC OIL @			A
FAIR						AIR CONDITIONING SERVICE			B
UNSAFE						ALIGNMENT, FRONT END			C
LBS.						BATTERY SERVICE			D
INFLATE TO (F) LBS. (R) LBS.						BATTERY SALE			E
<input type="checkbox"/> INSPECT UNIVERSAL JOINTS						BRAKE SERVICE			F
<input type="checkbox"/> INSPECT MUFFLERS/PIPES						COOLING SYSTEM, SERVICE			G
<input type="checkbox"/> INSPECT SHOCK ABSORBERS						EMISSION CONTROLS			H
<input type="checkbox"/> INSPECT BRAKES <input type="checkbox"/> LINING <input type="checkbox"/> HOSES						ENGINE DIAGNOSIS			I
<input type="checkbox"/> INSPECT IDLER ARM/STEERING LINKAGE						FILTER, AIR			J
<input type="checkbox"/> INSPECT DRAIN PLUGS <input type="checkbox"/> RECHECK						FILTER, GAS			K
<input type="checkbox"/> INSPECT TRANSMISSION/DIFFERENTIAL LEVELS						FILTER, OIL			L
<input type="checkbox"/> INSPECT WIPER BLADES						RAD. HOSE/V-BELT			M
<input type="checkbox"/> INSPECT & TEST COOLING SYSTEM <input type="checkbox"/> + <input type="checkbox"/> -						SHOCK ABSORBERS			N
<input type="checkbox"/> INSPECT POWER STEERING						TIRE SERVICE			O
<input type="checkbox"/> INSPECT BRAKE FLUID						TIRE SALE			P
<input type="checkbox"/> INSPECT & TEST BATTERY/TERMINALS						TRANSMISSION SYSTEM			Q
<input type="checkbox"/> INSPECT FILTERS <input type="checkbox"/> AIR <input type="checkbox"/> EMISSION <input type="checkbox"/> FUEL						TUNE UP			R
<input type="checkbox"/> INSPECT PCV VALVE						VEHICLE INSPECTION			S
<input type="checkbox"/> INSPECT HOSES/BELTS						WHEEL BALANCE/PACK			T
<input type="checkbox"/> INSPECT & TEST ALL LIGHTS						OTHER MERCHANDISE & SERVICE			U
<input type="checkbox"/> INSPECT & TEST EMERGENCY BRAKE									V
<input type="checkbox"/> INSPECT & LUBE DOOR HINGES									
<input type="checkbox"/> AFFIX DOOR RECORD/VACUUM/WINDOWS									

OWN COOLANT

WE RECOMMEND THE FOLLOWING REPAIRS THEY ARE LISTED BY THEIR URGENCY WORK AUTHORIZED

NEEDS	<input type="checkbox"/>	RPL SPARK PLUGS	20.00
NEEDS	<input type="checkbox"/>	8 - JOYCE CAS PLUGS	18.00
		RPL FREEZE PLUGS	40.00
		2 F ENGINES	
		1 - 1 1/2 DASH/CAP PLUGS	3.25

paid via DJ

SERVICE TOTAL	60.00
MERCHANDISE TOTAL	21.25
TAX	1.38
TOTAL	82.63

I the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs.

Contract on this bring suit for reasonable att. It is understood without my

<input type="checkbox"/> GALS.	BRAND	GASOLINE @	W
INVOICE NUMBER	204800	TOTAL	82.63

SIGNED _____ CUSTOMER SIGNATURE

CUSTOMER'S INVOICE *Thank You*



CIVIC CENTER SHELL
 1120 No. 1st Street, San Jose, Ca. 95112
 Telephone: (408) 292-1668
 B.A.R. No. AK 82773

repair order

000161

NAME
 ADDR
 CITY.

YEAR & MAKE OF CAR 59 Plymouth	LICENSE NO. AIANS 59
DATE & MILEAGE WHEN THIS SERVICE WAS AUTHORIZED DATE: 5/22/84 MILEAGE IN/OUT: 200/24	YOUR NEXT INSPECTION & MAINTENANCE SERVICE WILL BE DUE (Date) OR AT MILEAGE (Whichever first)

WILL CALL DELIVER
4-4-84 AM
 CUSTOMER PHONE NO.
 STATE INSPECTION DUE
 PAID BY
 CASH CHECK CR CARD

QTY	PART NUMBER - DESCRIPTION PART CODE—N=New U=Used R=Rebuilt	PART PRICE	SERVICES	CAR SERVICE ORDER	PRODUCT PART PRICE	LABOR AMOUNT
			<input checked="" type="checkbox"/> LUBRICATION <input type="checkbox"/> Standard <input type="checkbox"/> Extended			6.50
			<input checked="" type="checkbox"/> MOTOR OIL <input type="checkbox"/> ADD OIL <input type="checkbox"/> REPLACE	<input checked="" type="checkbox"/> Shell Motor Oil 10W-40 <input type="checkbox"/> Upgrade to 100 SAE 10-20-30	6 QTS	14.40
			<input checked="" type="checkbox"/> FILTER SERVICE <input type="checkbox"/> AIR <input type="checkbox"/> Clean <input type="checkbox"/> Replace	<input type="checkbox"/> GAS <input type="checkbox"/> C.C. VENT	<input checked="" type="checkbox"/> OIL FILTER OUTSIDE	8.75
			<input type="checkbox"/> TRANSMISSION <input type="checkbox"/> AUTO <input type="checkbox"/> Add Fluid <input type="checkbox"/> CONV. <input type="checkbox"/> Replace	<input type="checkbox"/> DIFFERENTIAL <input type="checkbox"/> Add Fluid <input type="checkbox"/> Replace		
			<input type="checkbox"/> WHEEL SERVICE <input type="checkbox"/> REPACK BEARING	<input type="checkbox"/> ALIGN <input type="checkbox"/> BALANCE		
			<input type="checkbox"/> EMISSIONS <input type="checkbox"/> PCV <input type="checkbox"/> Clean <input type="checkbox"/> Replace	<input type="checkbox"/> EXHAUST <input type="checkbox"/> MUFFLER <input type="checkbox"/> TAIL PIPE		
			<input type="checkbox"/> BRAKE SERVICE <input type="checkbox"/> ADJUST <input type="checkbox"/> RELINE	<input type="checkbox"/> FILL RES.		
			<input type="checkbox"/> COOLING <input type="checkbox"/> COOLANT	<input type="checkbox"/> FAN BELTS <input type="checkbox"/> HOSES <input type="checkbox"/> RAD CAP		
			<input type="checkbox"/> AIR CONDITION <input type="checkbox"/> CHARGE	<input type="checkbox"/> LEAK SPOT		
			<input type="checkbox"/> BATTERY <input type="checkbox"/> FILL <input type="checkbox"/> CHARGE	<input type="checkbox"/> NEW CABLE	<input type="checkbox"/> LIGHTS <input type="checkbox"/> CHECK <input type="checkbox"/> ADJUST	
			<input type="checkbox"/> TUNE-UP <input type="checkbox"/> MAJOR <input type="checkbox"/> MINOR			

*Paul Ash
 est. ASH
 R.K.*

TOTAL PARTS (Transfer total to invoice side)												
ESTIMATED COST	PARTS \$	LABOR \$	ESTIMATED BY	REVISE EST.	PARTS \$	LABOR \$						
The services and repairs shown above including parts are hereby authorized. The estimated cost is acceptable to the undersigned. <input type="checkbox"/> Diagnose problems discussed and advise me of work needed. <input type="checkbox"/> Work may be sub-let where necessary as explained to me. <input type="checkbox"/> I do not want replaced parts. <input type="checkbox"/> Return replaced parts, except those returned to supplier for credit.				Revised estimate/add-on approved <input checked="" type="checkbox"/> BY IF PHONE APPROVAL, SHOW: TIME DATE PHONE NO. CALLED			PARTS 23.15 SUB-TOTAL 29.65 TAX 1.50			GALLONS TOTAL 31.15		
<input checked="" type="checkbox"/> BY				GASOLINE <input type="checkbox"/> FILL <input type="checkbox"/> Prem <input type="checkbox"/> Reg <input type="checkbox"/> No Lead REPAIRED BY INSPECTED - CERTIFIED								

Copyright 1978 Prietlow Company, Inc.

CUSTOMER'S COPY

ORIGINAL ESTIMATED PRICE \$45.00

This estimate is based on our inspection and does not cover any additional parts and labor which may be required after the work has been opened up.

REVISED ESTIMATE \$

LOS GATOS
CHRYSLER-PLYMOUTH
 16203 LOS GATOS BLVD. • LOS GATOS, CA 95030
 (408) 358-4191

DATE CONTACTED _____ TIME CONTACTED _____ CONTACTED VIA _____
 PHONE IN PERSON

PRICE OK'D BY _____ I acknowledge notice and oral approval of an increase in the original estimated price.

I hereby authorize the repair work to be done along with the necessary material, and hereby grant your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. Subject to conditions on reverse side of this contract.

I agree that the vehicle may be held until all charges are paid in full.

Signed **CUTS**

PART NO. OR DESCRIPTION _____ SALE _____

YEAR 58 MODEL SAVOY LICENSE NO. TRANSOON SPEEDOMETER 20082

VIN H12341019B3

MECH NO. _____ REPAIR ORDER - INSTRUCTIONS _____

DATE 5/23/59 TAG NUMBER 1041 LABOR CHARGE 45.00

TIME PROMISED	AM	PM	TAG NUMBER	LABOR CHARGE
1	LUBRICATE			
2	CHANGE OIL			
3	FILTER CABT			
4	SERVICE AIR CLEANER			
5	CHANGE TRANS. OIL			
6	SERVICE SHOD DEVICE			
7	PACK FRONT WHEEL BRGS			
8	ADJUST BRAVES			
9	ROTATE TIRES			
10				
11				
12				

Repair faws door lock license plate light does not work (just replaced lamp) 45.00

Comment / customer requests that we keep our time short, please quote the repair, he can rearrange door and license plate light after repaired. - see self 1 HR LABOR

WE RECOMMEND THE FOLLOWING REPAIRS:

CUST. NO. _____ 1041

P.O. NO.	SUBLET REPAIRS - VENDOR	CUST. INITIAL	ACCT. NO.	SALE	KEY	PARTS AND SERVICE SALES		TAX	TOTAL
						CHARGE SALES	CASH SALES		
			C 454A		-	LABOR MECH	C 450A		
			C 456A		-	SUBLET WORK	C 456A		
			C 475A		-	PTS. LAOC MECHL.	C 470A		
			C 458A		-	GAS. OIL & LUBRICANTS	C 458A		
			C		-	QTS. OIL @	C		
			C		-	LBS. GREASE @	C		
			C		-	AUTO. TRANS. OIL	C		
			C 304		+	POLICE WORK SERVICE	2158		
			C 324		+	POLICE WORK SERVICE	110		
			C 346		+	POLICE WORK SERVICE	117		
					+	TOTAL GAS, OIL & GREASE			
						TOTAL SUBLET REPAIRS			



CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773

<input type="checkbox"/> DELIVER	TIME 6:00	CASH <input type="checkbox"/>	C.C. CHARGE <input type="checkbox"/>
<input type="checkbox"/> WILL CALL			
MAKE & MODEL <i>764</i>	YEAR 59	C.C. AUTH	
HOME PHONE			



MR., MRS., M
ADDRESS
CITY

LICENSE NO. *ALAN 59*
DATE SERVICED
MILEAGE
DE ORDER ESTIMATED BY EMP. NO. OR INITIALS

REPAIR INSTRUCTIONS

ROTATE *adv clutch*
TIRES

ESTIMATE

ESTIMATED COST	PARTS	LABOR	DO YOU WANT THE OLD PARTS? YES <input type="checkbox"/> NO <input type="checkbox"/>
REVISED ESTIMATE	PARTS	LABOR	
ADDITIONAL WORK APPROVED BY:			IN PERSON <input type="checkbox"/>
DATE APPROVED TIME OF CALL			TELEPHONE <input type="checkbox"/>

VEHICLE CHECK

CHECK ITEMS REQUESTED

TIRES	RF	LF	LR	RR	SPARE
GOOD					
FAIR					
UNSAFE					
LBS.					
INFLATE TO (F) LBS. (R) LBS.					
<input type="checkbox"/> INSPECT UNIVERSAL JOINTS					
<input type="checkbox"/> INSPECT MUFFLERS/PIPES					
<input type="checkbox"/> INSPECT SHOCK ABSORBERS					
<input type="checkbox"/> INSPECT BRAKES <input type="checkbox"/> LINING <input type="checkbox"/> HOSES					
<input type="checkbox"/> INSPECT IDLER ARM/STEERING LINKAGE					
<input type="checkbox"/> INSPECT DRAIN PLUGS <input type="checkbox"/> RECHECK					
<input type="checkbox"/> INSPECT TRANSMISSION/DIFFERENTIAL LEVELS					
<input type="checkbox"/> INSPECT WIPER BLADES					
<input type="checkbox"/> INSPECT & TEST COOLING SYSTEM [+] [-]					
<input type="checkbox"/> INSPECT POWER STEERING					
<input type="checkbox"/> INSPECT BRAKE FLUID					
<input type="checkbox"/> INSPECT & TEST BATTERY/TERMINALS					
<input type="checkbox"/> INSPECT FILTERS <input type="checkbox"/> AIR <input type="checkbox"/> EMISSION <input type="checkbox"/> FUEL					
<input type="checkbox"/> INSPECT PCV VALVE					
<input type="checkbox"/> INSPECT HOSES/BELTS					
<input type="checkbox"/> INSPECT & TEST ALL LIGHTS					
<input type="checkbox"/> INSPECT & TEST EMERGENCY BRAKE					
<input type="checkbox"/> INSPECT & LUBE DOOR HINGES					
<input type="checkbox"/> AFFIX DOOR RECORD/VACUUM/WINDOWS					

CHECK ITEMS REQUESTED	MERCHANDISE	CODE	SERVICE
LUBRICATION & VEHICLE CHECK			A
QTS. BRAND OIL @			B
AIR CONDITIONING SERVICE			C
ALIGNMENT, FRONT END			D
BATTERY SERVICE			E
BATTERY SALE			F
BRAKE SERVICE			G
COOLING SYSTEM, SERVICE			H
EMISSION CONTROLS			I
ENGINE DIAGNOSIS			J
FILTER, AIR			K
FILTER, GAS			L
FILTER, OIL			M
RAD. HOSE/V-BELT			N
SHOCK ABSORBERS			O
TIRE SERVICE			P
TIRE SALE			Q
TRANSMISSION SYSTEM			R
TUNE UP			S
VEHICLE INSPECTION			T
WHEEL BALANCE/PACK			U
OTHER MERCHANDISE & SERVICE			V
<i>4 tire rotation</i>			<i>10.00</i>

WE RECOMMEND THE FOLLOWING REPAIRS
THEY ARE LISTED BY THEIR URGENCY WORK AUTHORIZED

NEEDS

NEEDS

[Handwritten Signature]
[Handwritten Signature]

I, the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection of any sums due, I agree to pay costs of collection and reasonable attorney fees. Receipt of a copy of this order is hereby acknowledged. It is understood that the final invoiced price will not exceed the estimate without my approval.

SERVICE TOTAL
MERCHANDISE TOTAL
TAX
GALS. BRAND GASOLINE @ W

INVOICE NUMBER *204464* TOTAL *10.00*

SIGNED _____ CUSTOMER SIGNATURE

ALL PARTS NEW UNLESS OTHERWISE SPECIFIED
CUSTOMER'S INVOICE *Thank You*



CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773

<input type="checkbox"/> DELIVER	TIME	CASH	C.C. CHARGE
<input type="checkbox"/> WILL CALL	1:00	<input type="checkbox"/>	<input type="checkbox"/>
MAKE & MODEL	YEAR	C.C. AUTH.	
PLY.	83		
HOME PHONE			



LICENSE NO.	ALAH559
DATE SERVICED	8-7-84
MILEAGE	23801
ZIP CODE	
ORDER ESTIMATED BY	EMP. NO. OR INITIALS

REPAIR INSTRUCTIONS		ESTIMATE	
REPLACE BRAKE LIGHT SWITCH		ESTIMATED COST	PARTS
		REVISOR ESTIMATE	PARTS
ADDITIONAL WORK APPROVED BY		LABOR \$	
DATE APPROVED TIME OF CALL		LABOR \$	
		DO YOU WANT THE OLD PARTS?	
		YES <input type="checkbox"/>	
		NO <input type="checkbox"/>	
		IN PERSON <input type="checkbox"/>	
		TELEPHONE <input type="checkbox"/>	
		TELEPHONE NO.	

VEHICLE CHECK						CHECK ITEMS REQUESTED			MERCHANDISE	CODE	SERVICE
TIRES	RF	LF	LR	RR	SPARE	LUBRICATION & VEHICLE CHECK					
GOOD						QTS. BRAND GAL OIL @				A	
FAIR						AIR CONDITIONING SERVICE				B	
UNSAFE						ALIGNMENT, FRONT END				C	
LBS.						BATTERY SERVICE				D	
INFLATE TO (F) LBS. (R) LBS.						BATTERY SALE				E	
<input type="checkbox"/> INSPECT UNIVERSAL JOINTS						BRAKE SERVICE				F	
<input type="checkbox"/> INSPECT MUFFLERS/PIPES						COOLING SYSTEM, SERVICE				G	
<input type="checkbox"/> INSPECT SHOCK ABSORBERS						EMISSION CONTROLS				H	
<input type="checkbox"/> INSPECT BRAKES <input type="checkbox"/> LINING <input type="checkbox"/> HOSES						ENGINE DIAGNOSIS				I	
<input type="checkbox"/> INSPECT IDLER ARM/STEERING LINKAGE						FILTER, AIR				J	
<input type="checkbox"/> INSPECT DRAIN PLUGS <input type="checkbox"/> RECHECK						FILTER, GAS				K	
<input type="checkbox"/> INSPECT TRANSMISSION/DIFFERENTIAL LEVELS						FILTER, OIL				L	
<input type="checkbox"/> INSPECT WIPER BLADES						RAD. HOSE/V-BELT				M	
<input type="checkbox"/> INSPECT & TEST COOLING SYSTEM <input type="checkbox"/> + <input type="checkbox"/> -						SHOCK ABSORBERS				N	
<input type="checkbox"/> INSPECT POWER STEERING						TIRE SERVICE				O	
<input type="checkbox"/> INSPECT BRAKE FLUID						TIRE SALE				P	
<input type="checkbox"/> INSPECT & TEST BATTERY/TERMINALS						TRANSMISSION SYSTEM				Q	
<input type="checkbox"/> INSPECT FILTERS <input type="checkbox"/> AIR <input type="checkbox"/> EMISSION <input type="checkbox"/> FUEL						TUNE UP				R	
<input type="checkbox"/> INSPECT PCV VALVE						VEHICLE INSPECTION				S	
<input type="checkbox"/> INSPECT HOSES/BELTS						WHEEL BALANCE/PACK				T	
<input type="checkbox"/> INSPECT & TEST ALL LIGHTS						OTHER MERCHANDISE & SERVICE				U	
<input type="checkbox"/> INSPECT & TEST EMERGENCY BRAKE						1-BRAKE LIGHT SWITCH				V	
<input type="checkbox"/> INSPECT & LUBE DOOR HINGES						R/R SWITCH			3.95		8.50
<input type="checkbox"/> AFFIX DOOR RECORD/VACUUM/WINDOWS						BRAKE FLUID			3.50		

WE RECOMMEND THE FOLLOWING REPAIRS THEY ARE LISTED BY THEIR URGENCY WORK AUTHORIZED

NEEDS: BRAKE LIGHT SWITCH MOUNT IN MASTER CYLINDER

NEEDS:

Paul H. [Signature]

I, the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection of any sums due, I agree to pay costs of collection and reasonable attorney fees. Receipt of a copy of this order is hereby acknowledged. It is understood that the final invoiced price will not exceed the estimate without my approval.

SERVICE TOTAL	8.50
MERCHANDISE TOTAL	7.45
TAX	.48
<input type="checkbox"/> GALS. BRAND GASOLINE @ W	
INVOICE NUMBER	100371
TOTAL	16.43

SIGNED _____ CUSTOMER SIGNATURE

ALL PARTS NEW UNLESS OTHERWISE SPECIFIED **CUSTOMER'S INVOICE** Thank You



CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773

<input type="checkbox"/> DELIVER	TIME	CASH	C.C. CHARGE
<input type="checkbox"/> WILL CALL		<input type="checkbox"/>	<input type="checkbox"/>
MAKE & MODEL	YEAR	C.C. AUTH.	
Ply/Sandu	59		



IMR
ADC
CITY

LICENSE NO. **ALANS 59**
 DATE SERVICED **8/16/84**
 MILEAGE **23916**
 ORDER ESTIMATED BY: _____ EMP. NO. OR INITIALS: _____

REPAIR INSTRUCTIONS

*REB CLUTCH
check exhaust support*

ESTIMATE

ESTIMATED COST	PARTS	LABOR	DO YOU WANT THE OLD PARTS? YES <input type="checkbox"/> NO <input type="checkbox"/>
REVISED ESTIMATE	PARTS	LABOR	
ADDITIONAL WORK APPROVED BY			IN PERSON <input type="checkbox"/>
DATE APPROVED TIME OF CALL			TELEPHONE <input type="checkbox"/>
			TELEPHONE NO. _____

VEHICLE CHECK

CHECK ITEMS REQUESTED

MERCHANDISE SERVICE

TIRES	RF	LF	LR	RR	SPARE	LUBRICATION & VEHICLE CHECK			SERVICE
GOOD						QTS. BRAND SAC OIL @			A
FAIR						AIR CONDITIONING SERVICE			B
UNSAFE						ALIGNMENT, FRONT END			C
LBS.						BATTERY SERVICE			D
INFLATE TO F LBS. R LBS.						BATTERY SALE			E
<input type="checkbox"/> INSPECT UNIVERSAL JOINTS						BRAKE SERVICE			F
<input type="checkbox"/> INSPECT MUFFLERS/PIPES						COOLING SYSTEM, SERVICE			G
<input type="checkbox"/> INSPECT SHOCK ABSORBERS						EMISSION CONTROLS			H
<input type="checkbox"/> INSPECT BRAKES <input type="checkbox"/> LINING <input type="checkbox"/> HOSES						ENGINE DIAGNOSIS			I
<input type="checkbox"/> INSPECT IDLER ARM/STEERING LINKAGE						FILTER, AIR			J
<input type="checkbox"/> INSPECT DRAIN PLUGS <input type="checkbox"/> RECHECK						FILTER, GAS			K
<input type="checkbox"/> INSPECT TRANSMISSION/DIFFERENTIAL LEVELS						FILTER, OIL			L
<input type="checkbox"/> INSPECT WIPER BLADES						RAD. HOSE/V-BELT			M
<input type="checkbox"/> INSPECT & TEST COOLING SYSTEM <input type="checkbox"/> <input type="checkbox"/>						SHOCK ABSORBERS			N
<input type="checkbox"/> INSPECT POWER STEERING						TIRE SERVICE			O
<input type="checkbox"/> INSPECT BRAKE FLUID						TIRE SALE			P
<input type="checkbox"/> INSPECT & TEST BATTERY/TERMINALS						TRANSMISSION SYSTEM			Q
<input type="checkbox"/> INSPECT FILTERS <input type="checkbox"/> AIR <input type="checkbox"/> EMISSION <input type="checkbox"/> FUEL						TUNE UP			R
<input type="checkbox"/> INSPECT PCV VALVE						VEHICLE INSPECTION			S
<input type="checkbox"/> INSPECT HOSES/BELTS						WHEEL BALANCE/PACK			T
<input type="checkbox"/> INSPECT & TEST ALL LIGHTS						OTHER MERCHANDISE & SERVICE			U
<input type="checkbox"/> INSPECT & TEST EMERGENCY BRAKE									V
<input type="checkbox"/> INSPECT & LUBE DOOR HINGES									
<input type="checkbox"/> AFFIX DOOR RECORD/VACUUM/WINDOWS									

*Pressure Plate 50.00
Clutch Disc 53.65
Throw-out bearing 34.70
TRANS. Oil 4.80*

WE RECOMMEND THE FOLLOWING REPAIRS THEY ARE LISTED BY THEIR URGENCY WORK AUTHORIZED

NEEDS

NEEDS

R-R clutch 2.5 100.00

Paid

I the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection of any sums due, I agree to pay costs of collection and reasonable attorney fees. Receipt of a copy of this order is hereby acknowledged. It is understood that the final invoiced price will not exceed the estimate without my approval.

SERVICE TOTAL **100.00**
 MERCHANDISE TOTAL **143.15**
 TAX **9.30**

GALS. GASOLINE @ **W**
 INVOICE NUMBER **204285** TOTAL **252.45**

SIGNED _____ CUSTOMER SIGNATURE

ALL PARTS NEW UNLESS OTHERWISE SPECIFIED **CUSTOMER'S INVOICE** *Thank You*

WORK AUTHORIZATION AND ESTIMATE OF REPAIRS

4236 Monterey Hwy.
San Jose, CA 95111
Phone: 224-8801
Lic. # 001513382

ALFA RADIATOR SHOP

The Automotive Cooling Experts

631 E. Hedding St.
San Jose, CA 95112
Phone: 297-2906
Lic. # 4921750

INVOICE
N^o 7054

NAME: _____ DATE: 1/21/85
 ADDR: _____ SOLD BY: _____ REC. CALL: _____
 CITY: _____ P.O. NO.: _____
 PHON: _____ PROMISE DATE: 1/2
 AR 59 MAKE 14 MODEL SAVVY
 CASH CHECK AIR
 C.O.D. CHARGE: _____ TIME IN: _____
 PICK UP WILL CALL
 DELIVER SHIP VIA: _____
 ADDITIONAL AMT. _____ PHONE _____
 AUTHORIZED _____ WRITTEN _____
 REMARKS: _____

TAG NO.	LABOR CHARGES
BOIL AND PRESSURE TEST	
REPAIR	
ROD OUT	
RUN HEADERS	
GAS TANK CLEAN REPAIR	
REMOVE & REPLACE RADIATOR	
REMOVE & REPLACE THERMOSTAT	
A/C EVACUATE & RECHARGE	
A/C REPAIR	
Heater REMOVE & REPLACE	56.00
FLUSH BLOCK & INSPECT COOLING SYSTEM	
LABOR	56.00
PARTS	103.75
CORE CHARGE	
SHIPPING CHARGE	
TAX	4.14
TOTAL	105.93

QUAN.	DESCRIPTION	PART NUMBER	LIST PRICE	NET PRICE
	COMPLETE RADIATOR			
	COMPLETE RADIATOR			
	CORE	5515		63.75
	COMPLETE HEATER			
	AIR CONDENSER			
	OIL COOLER			
	RADIATOR CAP			
	THERMOSTAT			
	BELTS			
	HOSE UPPER			
	HOSE LOWER			
	HOSE CLAMPS			
	ANTI FREEZE			
	PREON			
	CHEMICALS			
	TOTAL PARTS			103.75

LENGTH OF GUARANTEE 90 DAYS ONE YEAR
 ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL
 Sorry No Checks
 We Welcome Visa and Master Charge

TERMS - CASH UNLESS PRIOR ARRANGEMENTS ARE MADE
 I, the Registered Owner authorize you to perform the above repairs and furnish necessary materials. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery or on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection of any sums due, I agree to pay costs of collection and reasonable attorney fees. I also understand that the Dealer is not a depository for personal property left on the vehicle and assumes no risk for loss thereof.
 ANY ITEM LEFT OVER 30 DAYS FOR ESTIMATES OR REPAIRMENT TO CUSTOMER
 RECEIPT OF A COPY OF THIS ORDER IS HEREBY ACKNOWLEDGED. SIGNED: _____



CIVIC CENTER SHELL

1120 N. 1st Street • San Jose, CA 95112
(408) 292-1668

Bureau Of Automotive Repair Registration No. AK82773



MR., MRS., MISS _____
 ADDRESS _____
 CITY _____

DELIVER TIME CASH C.C. CHARGE
 WILL CALL
 MAKE PLYMOUTH YEAR 1987
 BUSINESS PHONE _____ HOME PHONE _____
 LICENSE NO. ALANS59
 DATE SERVICED 3-20-85
 MILEAGE 28994
 ORDER ESTIMATED BY: _____ EMP. NO. OR INITIALS → _____

REPAIR INSTRUCTIONS

ESTIMATE

IGN SWITCH - DAMAGED/INOP
✓ BRAKES & ADVISE

ESTIMATED COST ▶ PARTS \$ _____ LABOR 20.00 DO YOU WANT THE OLD PARTS? YES NO
 REVISED ESTIMATE ▶ PARTS \$ _____ LABOR \$ _____
 ADDITIONAL WORK APPROVED BY: _____ IN PERSON TELEPHONE _____
 DATE APPROVED _____ TIME OF CALL _____ TELEPHONE NO. _____

VEHICLE CHECK

CHECK ITEMS REQUESTED

MERCHANDISE SERVICE

TIRES	RF	LF	LR	RR	SPARE	CHECK ITEMS REQUESTED	MERCHANDISE	SERVICE
GOOD						<input checked="" type="checkbox"/> LUBRICATION & VEHICLE CHECK		A <u>6.50</u>
FAIR						<input checked="" type="checkbox"/> QTS. BRAND <u>10/40</u> OIL @ <u>7 QTS</u>	<u>16.80</u>	B
UNSAFE						<input type="checkbox"/> AIR CONDITIONING SERVICE		C
LBS.						<input type="checkbox"/> ALIGNMENT, FRONT END		D
						<input type="checkbox"/> BATTERY SERVICE		E
						<input type="checkbox"/> BATTERY SALE		F
						<input type="checkbox"/> BRAKE SERVICE		G
						<input type="checkbox"/> COOLING SYSTEM, SERVICE		H
						<input type="checkbox"/> EMISSION CONTROLS		I
						<input type="checkbox"/> ENGINE DIAGNOSIS		J
						<input type="checkbox"/> FILTER, AIR		K
						<input type="checkbox"/> FILTER, GAS		L
						<input checked="" type="checkbox"/> FILTER, OIL <u>5/0 #1077</u>	<u>8.75</u>	M
						<input type="checkbox"/> RAD. HOSE/V-BELT		N
						<input type="checkbox"/> SHOCK ABSORBERS		O
						<input type="checkbox"/> TIRE SERVICE		P
						<input type="checkbox"/> TIRE SALE		Q
						<input type="checkbox"/> TRANSMISSION SYSTEM		R
						<input type="checkbox"/> TUNE UP		S
						<input type="checkbox"/> VEHICLE INSPECTION		T
						<input checked="" type="checkbox"/> WHEEL BEARING/PACK <u>CHECK BRAKES</u>		U <u>20.00</u>
						<input type="checkbox"/> OTHER MERCHANDISE & SERVICE		V
						<u>REPLACE LOCK CYL</u>		<u>20.00</u>
						<u>1 KS 6482 LOCK CYL</u>	<u>7.03</u>	

WE RECOMMEND THE FOLLOWING REPAIRS THEY ARE LISTED BY THEIR URGENCY

NEEDS	WORK AUTHORIZED
	<input type="checkbox"/>
<u>MASTER CYLINDER</u>	<input type="checkbox"/>

PAID IN FULL BY MASTERCARD

I, the Registered Owner, authorize you to perform the above repairs and furnish all materials and include any necessary sublet work in the above estimate. I understand any cost quoted heretofore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained to foreclose this lien or to bring suit for collection, I shall be liable for reasonable attorney's fees and costs. It is understood that I am releasing you and your employees from all liability without my signature.

GAS. 62.09 BRAND _____ GASOLINE @ _____ W _____
 SERVICE TOTAL 46.50
 MERCHANDISE TOTAL 32.58
 TAX 1.03
 INVOICE NUMBER 60198 TOTAL 46.50

ALL PARTS NEW UNLESS OTHERWISE SPECIFIED
 CUSTOMER'S INVOICE
 Thank You 80 11

**WORK
AUTHORIZATION
AND ESTIMATE
OF REPAIRS**

4236 Monterey Hwy.
San Jose, CA 95111
Phone: 224-8801
Lic. # 001513382

ALFA RADIATOR SHOP

The Automotive Cooling Experts

631 E. Hedding St.
San Jose, CA 95112
Phone: 297-2906
Lic. # 4921750

INVOICE
N^o 1238

NAME	DATE	TAG NO.	LABOR CHARGES
ADDRESS	9/23/86	6763	
CITY	SOLD BY	REC. CALL	
PHONE	P.O. NO.	REPAIR	357.00
YEAR	PROMISE DATE	ROD OUT	
MAKE	AUTO <input type="checkbox"/>	RUN HEADERS	
MODEL	AIR <input type="checkbox"/>	GAS TANK CLEAN <input type="checkbox"/>	
CASH <input type="checkbox"/>	CHECK <input type="checkbox"/>	REMOVE & REPLACE RADIATOR	
C.O.D. <input type="checkbox"/>	CHARGE <input type="checkbox"/>	REMOVE & REPLACE THERMOSTAT	
PICK UP <input type="checkbox"/>	WILL CALL <input type="checkbox"/>	A/C EVACUATE & RECHARGE	
DELIVER <input type="checkbox"/>	SHIP VIA:	A/C REPAIR	
ADDITIONAL AMT. AUTHORIZED	PHONE WRITTEN	REMOVE & REPLACE FLUSH BLOCK & INSPECT COOLING SYSTEM	
REMARKS			
NO. OF TUBES CUT:	NO. OF TUBES PLUGGED:	LABOR	577.00
		PARTS	
		CORE CHARGE	
		SHIPPING CHARGE	
		TAX	
		TOTAL	

TERMS - CASH UNLESS PRIOR ARRANGEMENTS ARE MADE

The Registered Owner authorizes you to perform the above repairs and furnish necessary materials. I understand any cost quoted herebefore is an estimate only. Your employees may operate vehicle for inspection, testing, delivery at my risk. You will not be responsible for loss or damage to vehicle or articles left in it. I agree to pay reasonable storage on vehicle left more than 48 hrs. after notification that repairs are completed. An express mechanic lien is acknowledged on above vehicle to secure the amount of repairs hereof, including those from any prior work or repair contract on this vehicle. In the event an attorney is retained for collection, this lien or to bring suit for collection of any sums due) agreed to pay costs of collection and reasonable attorney fees. I also understand that the Dealer's not a dealer position for personal property left on the vehicle and assumes no risk for loss thereof. ANY ITEM LEFT OVER 30 DAYS FOR ESTIMATES OR REPAIRS WILL BE CONSIDERED THE PROPERTY OF THE CUSTOMER.

RECEIPT OF A COPY OF THIS ORDER IS HEREBY ACKNOWLEDGED. SIGNED

QUAN.	DESCRIPTION	PART NUMBER	LIST PRICE	NET PRICE
	COMPLETE RADIATOR			
	COMPLETE RADIATOR			
	CORE			
	COMPLETE HEATER			
	AIR CONDENSER			
	OIL COOLER			
	RADIATOR CAP			
	THERMOSTAT			
	BELTS			
	HOSE UPPER			
	HOSE LOWER			
	HOSE CLAMPS			
	ANTI FREEZE			
	FREON			
	CHEMICALS			
	REBUILD RADIATOR			
	TOTAL PARTS			

LENGTH OF GUARANTEE 90 DAYS ONE YEAR
ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL

Sorry No Checks
We Welcome Visa and Master Charge



1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707

"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

DIAGNOSTIC CHECK

DATE <i>4/24/85</i>	NA		RO# 004231
			ZIP
YEAR <i>1989</i>	MAKE <i>Ply</i>	LIC# <i>ALW551</i>	MILEAGE <i>31220</i>
TRANS TYPE <i>3SP</i>	SERV. REP. <i>Tom</i>	O.S.	C.B.
SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>
CUSTOMER REMARKS <i>Right (R) side wheel cylinder leaking - Tune up. Safety check</i>			
NO APPARENT TRANSMISSION PROBLEM AT THIS TIME		<input type="checkbox"/>	SERVICE DESCRIPTION
TRANSMISSION SERVICE (See Service Description)		<input type="checkbox"/>	
RESEAL SERVICE (See Service Description)		<input type="checkbox"/>	<i>Rebuilt right front wheel cylinder.</i>
MINOR SERVICE (See Service Description)		<input type="checkbox"/>	<i>Rebuilt kit + fluid</i> <i>9.75</i>
INSPECTION SERVICE 1. REMOVE & DISMANTLE TRANSMISSION 2. PERFORM INSPECTION OF INTERNAL PARTS 3. REASSEMBLE & INSTALL TRANSMISSION			<i>Prime bleeding + labor</i> <i>72.50</i>
AUTHORIZATION \$ _____			<i>Engine Tune up</i> <i>60.00</i>
X _____			<i>Plugs</i> <i>10.80</i>
TELEPHONE AUTHORIZATION			<i>Dist. Cap.</i> <i>4.50</i>
DATE <i>4/26/85</i>	FROM _____		<i>Washer</i> <i>21.75</i>
TIME _____	BY <i>Tom</i>		<i>Car cleaner</i> <i>6.50</i>
PHONE _____			
IMPORTANT NOTICE			
The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____			
The price of this same service if we rebuilt your own transmission is \$ _____			
Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.			
You have the right to: (A) the return of your replaced parts unless you are informed otherwise; (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends; (C) have your transmission reassembled and installed for the price of the teardown; and (D) know the prices, terms and conditions of all warranties, if any.			
Check the appropriate boxes below:			
<input type="checkbox"/> Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.			
<input type="checkbox"/> No. I do not want to inspect my parts.			
<input type="checkbox"/> Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____ the price of the teardown.			
<input checked="" type="checkbox"/> Yes. I have read and understand the prices, terms, and conditions of all warranties provided.			
Customer's signature <i>X</i> _____		Date _____	
		AMOUNT	<i>186.00</i>
		TAX	<i>3.75</i>
		TOTAL	<i>189.75</i>
THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY: ALL EXTERIOR AND INTERNAL PARTS CLEANED: ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.			
COMPLETION CERTIFICATE			
I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS REPAIR ORDER			
X _____		X _____	
YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.			

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA 95112
295-1707



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

DIAGNOSTIC CHECK

DATE								RO#	4005
ADDRESS								75125	
YEAR	MAKE	LIC#	MILEAGE	TRANS TYPE	SERV. REP.	O.S.	C.B.		
				CP	13511				
SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS					
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>	NOISE / FINE GATE / ON FILTER / 6004					
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	T.O.P.M.I.G START SLIPS ✓ P.O. / 13511 - 400 707					
NO APPARENT TRANSMISSION PROBLEM AT THIS TIME				<input type="checkbox"/>	SERVICE DESCRIPTION				
TRANSMISSION SERVICE (See Service Description)				<input type="checkbox"/>	Diagnostic check				
RESEAL SERVICE (See Service Description)				<input type="checkbox"/>					
MINOR SERVICE (See Service Description)				<input type="checkbox"/>	action duct to handle				
INSPECTION SERVICE									
1. REMOVE & DISMANTLE TRANSMISSION					Health check				
2. PERFORM INSPECTION OF INTERNAL PARTS					Pressure Plate				
3. REASSEMBLE & INSTALL TRANSMISSION					Thinner out Bearings				
AUTHORIZATION				\$	Pilot bushing				
X					Resurface Flywheel				
TELEPHONE AUTHORIZATION					Ray Follow West				
DATE 4/17/85				FROM	R/C				
TIME				BY	R/C				
PHONE					Wash Input Shaft				
IMPORTANT NOTICE					R/C Labor				
The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$					Fixed Shocks				
The price of this same service if we rebuild your own transmission is \$					PMD MOUNTING #6-198				
Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.					BCC				
You have the right to: (A) the return of your replaced parts unless you are informed otherwise, (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends, (C) have your transmission reassembled and installed for the price of the teardown, and (D) know the prices, terms and conditions of all warranties, if any.					P. 74330				
Check the appropriate boxes below					500 mile				
<input type="checkbox"/> Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.					Check				
<input type="checkbox"/> No. I do not want to inspect my parts.									
<input type="checkbox"/> Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____ the price of the teardown.									
<input type="checkbox"/> Yes. I have read and understand the prices, terms, and conditions of all warranties provided.									
Customer's signature X _____ Date _____									
Paul 200 CAH 228 ²¹ MC 6/19/85					AMOUNT				
					TAX				
					TOTAL				
THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.					COMPLETION CERTIFICATE				
X _____					I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS RE _____				
					X _____				
					YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.				



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707

DIAGNOSTIC CHECK

DATE <i>10/4/85</i>	NAME <i>[Redacted]</i>	RO# <i>14501</i>						
YEAR <i>1989</i>	MAKE <i>Plymouth</i>	LIC# <i>N 14518</i>						
MILEAGE <i>34790</i>	TRANS TYPE <i>5</i>	SERV. REP. <i>Tom</i>						
O.S.	C.B.							
SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS						
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ						
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE						
CUSTOMER REMARKS <i>Warranty work</i>								
NO APPARENT TRANSMISSION PROBLEM AT THIS TIME <input type="checkbox"/>		SERVICE DESCRIPTION						
TRANSMISSION SERVICE (See Service Description) <input type="checkbox"/>								
RESEAL SERVICE (See Service Description) <input type="checkbox"/>								
MINOR SERVICE (See Service Description) <input type="checkbox"/>								
<p style="text-align:center;">INSPECTION SERVICE</p> <p>1. REMOVE & DISMANTLE TRANSMISSION 2. PERFORM INSPECTION OF INTERNAL PARTS 3. REASSEMBLE & INSTALL TRANSMISSION</p> <p style="text-align:right;">\$ _____</p>								
<p>AUTHORIZATION</p> <p><input checked="" type="checkbox"/> _____</p> <p style="text-align:center;">TELEPHONE AUTHORIZATION</p> <p>DATE <i>10/4/85</i> FROM _____</p> <p>TIME _____ BY <i>Tom</i></p> <p>PHONE _____</p>								
<p style="text-align:center;">IMPORTANT NOTICE</p> <p>The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____</p> <p>The price of this same service if we rebuilt your own transmission is \$ _____</p> <p>Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.</p> <p>You have the right to: (A) the return of your replaced parts unless you are informed otherwise; (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends; (C) have your transmission reassembled and installed for the price of the teardown; and (D) know the prices, terms and conditions of all warranties, if any.</p> <p>Check the appropriate boxes below:</p> <p><input type="checkbox"/> Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.</p> <p><input type="checkbox"/> No. I do not want to inspect my parts.</p> <p><input type="checkbox"/> Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____, the price of the teardown.</p> <p><input type="checkbox"/> Yes. I have read and understand the prices, terms, and conditions of all warranties provided.</p> <p>Customer's signature <i>Part as full Tom</i> Date <i>10/4/85</i></p>								
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">AMOUNT</td> <td style="width:50%; text-align:right;"><i>27.25</i></td> </tr> <tr> <td>TAX</td> <td style="text-align:right;"><i>.25</i></td> </tr> <tr> <td>TOTAL</td> <td style="text-align:right;"><i>28.50</i></td> </tr> </table>	AMOUNT	<i>27.25</i>	TAX	<i>.25</i>	TOTAL	<i>28.50</i>
AMOUNT	<i>27.25</i>							
TAX	<i>.25</i>							
TOTAL	<i>28.50</i>							
<p>THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.</p> <p><input checked="" type="checkbox"/> _____</p>								
<p style="text-align:center;">COMPLETION CERTIFICATE</p> <p>I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS REPAIR ORDER.</p> <p><input checked="" type="checkbox"/> _____ <i>10/4/85</i></p>								
<p>YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.</p>								



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707

DIAGNOSTIC CHECK

DATE	NA	RO#
7/18/86		4733

YEAR	MAKE	LIC#	MILEAGE	TRANS TYPE	SERV. REP.	O.S.	C.B.
1979	PY	112057	57663	2 SP	BEN		

SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS MASTER CYLINDER
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>	
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	

NO APPARENT TRANSMISSION PROBLEM AT THIS TIME	<input type="checkbox"/>	SERVICE DESCRIPTION
TRANSMISSION SERVICE (See Service Description)	<input type="checkbox"/>	
RESEAL SERVICE (See Service Description)	<input type="checkbox"/>	
MINOR SERVICE (See Service Description)	<input type="checkbox"/>	

INSPECTION SERVICE

- REMOVE & DISMANTLE TRANSMISSION
- PERFORM INSPECTION OF INTERNAL PARTS
- REASSEMBLE & INSTALL TRANSMISSION

AUTHORIZATION	\$	
X		EXCHANGE REBUILT MASTER CYLINDER 92.86
		REAR LABOR / PRESSURE BURN 75.00
		NEW BRAKE FLUID 4.95
		TOTAL 172.81

TELEPHONE AUTHORIZATION

DATE _____ FROM _____

TIME _____ BY _____

PHONE _____

IMPORTANT NOTICE

The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____

The price of this same service if we rebuilt your own transmission is \$ _____

Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.

You have the right to: (A) the return of your replaced parts unless you are informed otherwise, (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends, (C) have your transmission reassembled and installed for the price of the teardown, and (D) know the prices, terms and conditions of all warranties, if any.

Check the appropriate boxes below:

Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.

No. I do not want to inspect my parts.

Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____ the price of the teardown.

Yes. I have read and understand the prices, terms, and conditions of all warranties provided.

Customer's signature X _____ Date _____

	AMOUNT	172.81
	TAX	6.81
	TOTAL	179.62

COMPLETION CERTIFICATE

I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS REPORT

X _____

YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.



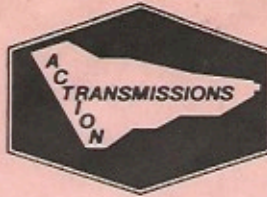
1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707

"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

DIAGNOSTIC CHECK

DATE 2-12-86		NA						RO# 4774
AC								ZIP
YEAR 1969	MAKE PLY	LIC# ALM559	MILEAGE 37665	TRANS TYPE 3 SP	SERV. REP. P.S.U.	O.S.	C.B.	
SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS				
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>	R318 - DRIVE SHAFT EXHAUST PROBLEMS				
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	2) TNU-11 14075017				
NO APPARENT TRANSMISSION PROBLEM AT THIS TIME <input type="checkbox"/>				SERVICE DESCRIPTION				
TRANSMISSION SERVICE (See Service Description) <input type="checkbox"/>				ACTION REPAIR MOTOR 111741				
RESEAL SERVICE (See Service Description) <input type="checkbox"/>				A FULL (90) NINETY DAY				
MINOR SERVICE (See Service Description) <input type="checkbox"/>				PARTS of LABOR LABOR 111741				
INSPECTION SERVICE				ONLY AT ACTION TRANSMISSIONS				
1. REMOVE & DISMANTLE TRANSMISSION				GOOD USED EXHAUST MANIFOLD 45.00				
2. PERFORM INSPECTION OF INTERNAL PARTS				NEW GASKETS 12.96				
3. REASSEMBLE & INSTALL TRANSMISSION				REAR LABOR 1 HR. 47.50				
AUTHORIZATION				NEW CAR TRANSMISSION OIL 27.29				
X <u>Alan Merri</u> \$ 455.86 + TAX				NEW CRANK " " 32.47				
TELEPHONE AUTHORIZATION				NEW TRANSMISSION OIL 13.42				
DATE 2-12-86 FROM ALAN				NEW GASKETS SET 20.29				
TIME 1:30 BY P.S.U.				REAR LABOR 225.00				
PHONE CUSTOMER CENTER				TOTAL 455.86				
IMPORTANT NOTICE				<p>The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____</p> <p>The price of this same service if we rebuilt your own transmission is \$ _____</p> <p>Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.</p> <p>You have the right to: (A) the return of your replaced parts unless you are informed otherwise; (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends; (C) have your transmission reassembled and installed for the price of the teardown; and (D) know the prices, terms and conditions of all warranties, if any.</p> <p>Check the appropriate boxes below:</p> <p><input type="checkbox"/> Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter</p> <p><input type="checkbox"/> No. I do not want to inspect my parts</p> <p><input type="checkbox"/> Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____, the price of the teardown.</p> <p><input type="checkbox"/> Yes. I have read and understand the prices, terms, and conditions of all warranties provided.</p>				
Customer's signature X _____ Date _____				<p>para 2/14/86 \$330.00 cash</p> <p>138.70 VISA</p> <p>+ 5.55 4%</p>				
				AMOUNT		455.86		
				TAX		12.84		
				TOTAL		468.70		
THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY: ALL EXTERIOR AND INTERNAL PARTS CLEANED: ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.				COMPLETION CERTIFICATE				
X _____				I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS REPAIR ORDER				
				X _____				
YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.								

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

DIAGNOSTIC CHECK

DATE 10-10-86	NA	RO# 005286
------------------	----	---------------

YEAR 1957	MAKE OLYMPIA	LIC# AL0559	MILEAGE 41197	TRANS TYPE 3 SP STD	SERV. REP. BS	O.S.	C.B.
--------------	-----------------	----------------	------------------	------------------------	------------------	------	------

SLIPS NOISE LEAKS CUSTOMER REMARKS

NO REV SLOW ENG. ADJ CLUTCH

NO SHIFT CLUNKS SERVICE

NO APPARENT TRANSMISSION PROBLEM AT THIS TIME **SERVICE DESCRIPTION**

TRANSMISSION SERVICE (See Service Description)	<input type="checkbox"/>	ACTION INSTALL NEW CLUTCH
RESEAL SERVICE (See Service Description)	<input type="checkbox"/>	PARTS AT TIME OF ENGINE
MINOR SERVICE (See Service Description)	<input checked="" type="checkbox"/>	REBUILD (SEE R.O.# 5261)
INSPECTION SERVICE		WITH A FULL (90) MINUTE DELAY
1. REMOVE & DISMANTLE TRANSMISSION		PARTS & LABOR WARRANTY ONLY
2. PERFORM INSPECTION OF INTERNAL PARTS		AT ACTION TRANSMISSIONS
3. REASSEMBLE & INSTALL TRANSMISSION		EXCHANGE REBUILD CLUTCH DISC 49.65
AUTHOR	\$	17 " PRESSURE PLATE 51.30
X		NEW THROAT RESERVE POSITION 28.60
TELEPHONE AUTHORIZATION		NEW PILOT BUSH-BERGS/STALE 7.13
DATE 10-10-86	FROM PLM	RESURFACE FLYWHEEL 37.50
TIME 9:48	BY BS	PLATE LABOR N/C
PHONE CHICAGO CALLED		TOTAL 174.18

IMPORTANT NOTICE

The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____

The price of this same service if we rebuilt your own transmission is \$ _____

Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.

You have the right to: (A) the return of your replaced parts unless you are informed otherwise; (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends; (C) have your transmission reassembled and installed for the price of the teardown; and (D) know the prices, terms and conditions of all warranties, if any.

Check the appropriate boxes below:

Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.

No. I do not want to inspect my parts.

Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____ the price of the teardown.

Yes. I have read and understand the prices, terms, and conditions of all warranties provided.

Customer's signature X _____ Date _____

AMOUNT	174.18
TAX	9.57
TOTAL	183.75

R.O.# 5261 \$2102.48
R.O.# 5286 \$193.75
TOTAL \$2296.23
VISA 5249549
041134
136.68

THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.

X _____

COMPLETION CERTIFICATE

I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS R _____

X _____

YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

DIAGNOSTIC CHECK

DATE	NA	RO#
10/29/80		005325

YEAR	MAKE	LIC#	MILEAGE	TRANS TYPE	SERV. REP.	O.S.	C.B.
80	PLYM	AD55	43774	3.5L/5TD	BSN		

SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS TOW-IN - NONSTART - REBUILD CARB
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>	
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	

NO APPARENT TRANSMISSION PROBLEM AT THIS TIME	SERVICE DESCRIPTION
<input type="checkbox"/>	
<input type="checkbox"/>	ACTION TOW-IN
<input type="checkbox"/>	ACTION RECOMMENDED CARBURATION
<input type="checkbox"/>	WITH A FULL (90) MINUTE PM/
	PARTS & LABOR WARRANTY
	ONLY AT ACTION TRANSMISSIONS
	NEW B/U CARB KIT 36.14
	DR. LARSON 3/4 MECH 166.25
	4.45 HRS SCOPES & ADJUST
	TOTAL 202.39

INSPECTION SERVICE

- REMOVE & DISMANTLE TRANSMISSION
- PERFORM INSPECTION OF INTERNAL PARTS
- REASSEMBLE & INSTALL TRANSMISSION

DATE 10-29-80 FROM ALM

TIME 8:00 BY BSN

PHONE CROSSLAND COLONY

TELEPHONE AUTHORIZATION

IMPORTANT NOTICE

The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____

The price of this same service if we rebuilt your own transmission is \$ _____

Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.

You have the right to: (A) the return of your replaced parts unless you are informed otherwise; (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends; (C) have your transmission reassembled and installed for the price of the teardown; and (D) know the prices, terms and conditions of all warranties, if any.

Check the appropriate boxes below:

Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.

No. I do not want to inspect my parts.

Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____, the price of the teardown.

Yes. I have read and understand the prices, terms, and conditions of all warranties provided.

Customer's signature X _____ Date _____

AMOUNT	202.39
TAX	2.53
TOTAL	204.92

(P) 36.14

11 5249552

THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.

I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS RE _____

COMPLETION CERTIFICATE

YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA 95112
295-1707

DIAGNOSTIC CHECK

DATE 12-9-86	NA							RO# 005392
ADD								
YEAR 1979	MAKE OLY	LIC# ALAB	MILEAGE 40526	TRANS TYPE 3SP STD	SERV. REP. TSEA	O.S.	C.B.	
SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS				
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>					
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>					
NO APPARENT TRANSMISSION PROBLEM AT THIS TIME				<input type="checkbox"/>	SERVICE DESCRIPTION			
TRANSMISSION SERVICE (See Service Description)				<input type="checkbox"/>	ACTION 500 MILE VOUT			N/C
RESEAL SERVICE (See Service Description)				<input type="checkbox"/>	RE TORQUE CYLINDER HEADS			N/C
MINOR SERVICE (See Service Description)				<input checked="" type="checkbox"/>	V VALVE ADJUSTMENTS			N/C
INSPECTION SERVICE								
1. REMOVE & DISMANTLE TRANSMISSION					OIL & FILTER CHANGE			N/C
2. PERFORM INSPECTION OF INTERNAL PARTS					ACTION EXCHANGING REBUILD KIT			
3. REASSEMBLE & INSTALL TRANSMISSION					GENERATION WITH A FULL			
AUTHOR: [Redacted]				\$	90) NUTS / DI. / PARTS /			
X					LABOR (SARON) ONLY /			
TELEPHONE AUTHORIZATION					AT ACTION TRANSMISSIONS			
DATE	FROM	TIME	BY		EX-REBUILD GENERATION			56.29
PHONE					P/R LABOR			47.50
					TOTAL			103.79
					CHANGE BATTERY			N/C
IMPORTANT NOTICE								
<p>The price of installing an exchange rebuilt transmission and torque converter in your vehicle, excluding other hand parts is \$ _____</p> <p>The price of this same service if we rebuilt your own transmission is \$ _____</p> <p>Frequently hard parts do not need to be replaced. The purpose of the teardown and inspection is to determine what hard parts are needed, if any.</p> <p>You have the right to: (A) the return of your replaced parts unless you are informed otherwise, (B) know the maximum time in which the repair shop must reassemble and reinstall your transmission if you do not authorize the service the shop recommends, (C) have your transmission reassembled and installed for the price of the teardown, and (D) know the prices, terms and conditions of all warranties, if any.</p> <p>Check the appropriate boxes below:</p> <p><input type="checkbox"/> Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.</p> <p><input type="checkbox"/> No. I do not want to inspect my parts.</p> <p><input type="checkbox"/> Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____, the price of the teardown.</p> <p><input checked="" type="checkbox"/> Yes. I have read and understand the prices, terms, and conditions of all warranties provided.</p> <p>Customer's signature X _____ Date _____</p>								
						AMOUNT	103.79	
						TAX	3.94	
						TOTAL	107.73	
<p>THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNIMPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.</p> <p>X _____</p>				COMPLETION CERTIFICATE				
				<p>I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS RE [Redacted]</p> <p>X _____</p>				
<p>YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.</p>								



"ACTION" THE LAST WORD IN SATISFACTION
WE FIX ANYTHING

1330 NORTH FOURTH ST.
SAN JOSE, CALIFORNIA
95112
295-1707

DIAGNOSTIC CHECK

DATE	NA	RO#	005905
------	----	-----	--------

YEAR	MAKE	LIC#	MILEAGE	TRANS TYPE	SERV. REP.	O.S.	C.B.
				3 SP STD	BSW		

SLIPS	<input type="checkbox"/> NOISE	<input type="checkbox"/> LEAKS	<input type="checkbox"/>	CUSTOMER REMARKS TUNE-UP RATTLING NOISE (EXHAUST PIPE) WONT START UNLESS TUNED
NO REV	<input type="checkbox"/> SLOW ENG.	<input type="checkbox"/> ADJ	<input type="checkbox"/>	
NO SHIFT	<input type="checkbox"/> CLUNKS	<input type="checkbox"/> SERVICE	<input type="checkbox"/>	

NO APPARENT TRANSMISSION PROBLEM AT THIS TIME	<input type="checkbox"/>	SERVICE DESCRIPTION
TRANSMISSION SERVICE (See Service Description)	<input type="checkbox"/>	
RESEAL SERVICE (See Service Description)	<input type="checkbox"/>	
MINOR SERVICE (See Service Description)	<input type="checkbox"/>	

INSPECTION SERVICE

- REMOVE & DISMANTLE TRANSMISSION
- PERFORM INSPECTION OF INTERNAL PARTS
- REASSEMBLE & INSTALL TRANSMISSION

AUTHOR	\$	NEW SPARK PLUG W/RS	47.99
X		8 NEW SPARK PLUGS	13.60
		SCOPE & ADJUST	17.50
		INSU SET CONTACT	11.29
		1 NEW CONDENSOR	7.22
		RUR LABON	47.50
		NEW EXHAUST HANGER	4.29
		RUR HANGER	N/C
		NEW REAR YOKE SEAL	12.99
		REBUILT STARTER (SUB 937)	85.00
		NEW DELTA 24 BATTERY	58.95
		RUR STARTER	27.50
		TOTAL	333.83

TELEPHONE AUTHORIZATION

DATE _____ FROM _____

TIME _____ BY _____

PHONE _____

IMPORTANT NOTICE

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The price of this same service if we rebuilt your own transmission is \$ _____

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Check the appropriate boxes below:

() Yes. Save my parts for inspection or return upon receipt of the vehicle or for _____ days thereafter.

() No. I do not want to inspect my parts.

() Yes. I understand that my transmission will be reassembled and installed in my car within _____ days of the date shown below if I choose not to authorize the service the shop recommends. This will be done for \$ _____ the price of the teardown.

() Yes. I have read and understand the prices, terms, and conditions of all warranties provided.

Customer's signature X _____ Date _____

AMOUNT	333.83
TAX	16.90
TOTAL	350.73

(P) 241.33

Hand 350.73

9-1-87

THIS CERTIFIES THAT THE TRANSMISSION OR OTHER COMPONENT HAS BEEN DISMANTLED OR REBUILT AS NECESSARY; ALL EXTERIOR AND INTERNAL PARTS CLEANED; ALL DEFECTIVE PARTS RESTORED, REBUILT, OR REPLACED AS NEEDED WITH NEW, REBUILT OR UNPAIRED PARTS TO PLACE YOUR TRANSMISSION OR OTHER AUTOMOTIVE COMPONENT IN SOUND WORKING ORDER.

X _____

COMPLETION CERTIFICATE

I HAVE RECEIVED THE CAR SPECIFIED ABOVE AND A COPY OF THIS REP. _____

X _____

YOU ARE ENTITLED TO A QUOTATION SHEET WHICH SETS FORTH THE COST OF THE SERVICES WHICH WERE AVAILABLE TO YOU.



Delta

BATTERY WARRANTY CERTIFICATE

Limited Warranty

The following information must be completed by retailer to validate warranty.

Purchaser: _____

Address: _____

City: _____

State: _____

Make of Vehicle PLYMOUTH Model SAVOY Year 1959

Date of Purchase 9-1-87 Battery Type G-7/24

Limited Full Adjustment Period LX = 60 mos. XL = 40 mos.

Total Pro-Rate Adjustment Period: 24 mos. 36 mos. 40 mos. 60 mos.

RETAILER STAMP:

LOCAL DELTA DISTRIBUTOR:

<p><u>ACTION</u> <u>1330 N. 4TH ST.</u> <u>SAN JOSE, CA,</u> <u>408-295-1707</u></p>	<p>1482 So. Main St. Milpitas, CA 95035</p>
---	---

**IMPORTANT: Keep this certificate and proof of purchase.
Warranty is void without these documents.**

LIMITED WARRANTY

A. FREE ADJUSTMENT PERIOD:

Any battery which becomes unserviceable (not merely discharged) due to defects in material or workmanship within the specified length of warranty indicated in Roman numerals (i.e. XL equals 40 months, LX equals 60 months) of installation will be repaired or replaced only to the original consumer purchaser at retailer place of business. This warranty is non-transferable, applies only to original purchaser and original car. The retailer, at his own volition, may or may not charge a small service fee for labor.

Service calls, towing expense, loss of time, inconvenience, loss of the use of the vehicle or OTHER CONSEQUENTIAL DAMAGES do not apply.

CUSTOMER COMMENTS

SPARKS, David D. POISS



ACTION TRANSMISSIONS
1330 North Fourth Street
San Jose, California 95112
(408) 295-1707
B.A.R. No. AD 086906

1007781

TRANSMISSION
REPAIR
ORDER

ROAD CHECK & DIAGNOSIS

CASH CHECK CHARGE CREDIT CARD

DATE
7.12.88

OUTSIDE-SUBLET REPAIRS

NAME
ADDRESS
CITY

ORDER WRITTEN BY
RSD

TOTAL SUBLET REPAIRS

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

VACUUM FLOW

QTY * Code N-New U-Used R-Rebuilt

LABOR

ROAD CHECK NOT POSSIBLE

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

FLUID LEVEL & CONDITION

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

DETERENTS

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

KICKDOWN

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

SPEEDOMETER FUNCTIONING

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

ESTIMATE
TIME DATE
BY WHOM

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

ESTIMATED AMOUNT

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

REVISED ESTIMATE

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

REB ESTIMATE

TOWED BY:

MAKE
MODEL
YEAR

RY Sany 89

PHONE WHEN READY
 YES NO

LICENSE NO.

SPEEDOMETER

AMOUNT

HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE ALONG WITH THE NECESSARY MATERIAL, AND HEREBY GRANT YOU AND/OR YOUR EMPLOYEES, PERMISSION TO OPERATE THE CAR, TRUCK OR VEHICLE, HEREIN DESCRIBED ON STREETS, HIGHWAYS OR OTHERWISE FOR THE PURPOSE OF TESTING AND/OR INSPECTION, AND TO REMOVE AND REINSTALL THE TRANSMISSION, AND TO MAKE CAR CHECKS OR VEHICLE INSPECTIONS. THE AMOUNT OF REPAIRS THERE TO 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. I HAVE READ AND UNDERSTAND THE ABOVE AND KNOW FULLY THE NATURE OF THE ESTIMATE AND A COPY OF THE SAME. I HEREBY WAIVER ANY WARRANTY ACT.

IMPORTANT NOTICE:

THE PRICE OF INSTALLING AN EXCHANGE REBUILT TRANSMISSION AND TORQUE CONVERTER IN YOUR VEHICLE, EXCLUDING OTHER HARD PARTS, IS \$_____. THE PRICE OF THIS SAME SERVICE IF WE REBUILT YOUR OWN TRANSMISSION IS \$_____. FREQUENTLY HARD PARTS DO NOT NEED TO BE REPLACED. THE PURPOSE OF THE TEARDOWN AND INSPECTION IS TO DETERMINE WHAT HARD PARTS ARE NEEDED, IF ANY.

YOU HAVE A RIGHT TO:

(A) THE RETURN OF YOUR REPLACED PARTS UNLESS YOU ARE INFORMED OTHERWISE.
(B) KNOW THE MAXIMUM TIME IN WHICH THE REPAIR SHOP MUST REASSEMBLE AND REINSTALL YOUR TRANSMISSION IF YOU DO NOT AUTHORIZE THE SERVICE THE SHOP RECOMMENDS.
(C) HAVE YOUR TRANSMISSION REASSEMBLED AND INSTALLED FOR THE PRICE OF THE TEARDOWN.
(D) KNOW THE PRICES, TERMS, AND CONDITIONS OF ALL WARRANTIES, IF ANY.

CHECK THE APPROPRIATE BOXES BELOW:

YES - SAVE MY PARTS FOR INSPECTION OR RETURN UPON RECEIPT OF THE VEHICLE OR FOR ____ DAYS THEREAFTER.
 NO - I DO NOT WANT TO INSPECT MY PARTS.
 YES - I UNDERSTAND THAT MY TRANSMISSION WILL BE REASSEMBLED AND INSTALLED IN MY CAR WITHIN ____ DAYS OF THE DATE SHOWN BELOW IF I CHOOSE NOT TO AUTHORIZE THE SERVICE THE SHOP RECOMMENDS. THIS WILL BE DONE FOR \$_____. THE PRICE OF THE TEARDOWN.

TOTAL LABOR	TX	16.35
TOTAL PARTS		
SUBLET REPAIRS		
TOTAL BEFORE TAX		
TAX		
TOTAL AMOUNT		

X

INTEREST WILL BE CHARGED AT A RATE OF 1 1/2% PER MONTH ON ACCOUNTS OVER 30 DAYS

CUSTOMER COMMENTS: *7/15-17/98 CLUTCH DATE*

ROAD CHECK & DIAGNOSIS: *NOT CLUTCH, WITH "Z" FOR*
LINKAGE FOR CLUTCH

OUTSIDE-SUBLET REPAIRS

TOTAL SUBLET REPAIRS

PLEASE INITIAL HERE

VACUUM FLOW

ROAD CHECK NOT POSSIBLE

FLUID LEVEL & CONDITION

DETENTS

KICKDOWN

SPEEDOMETER FUNCTIONING

TIME *1:30* DATE *7/15/98*

WHOM *DAVID COLE*

ESTIMATE

1 ESTIMATED AMOUNT \$

2 REVISED ESTIMATE \$

3 USED ESTIMATE \$

I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE ALONG WITH THE NECESSARY MATERIAL, AND HEREBY GRANT YOU AND/OR YOUR EMPLOYEES PERMISSION TO OPERATE THE CAR, TRUCK OR VEHICLE HEREIN, DESCRIBED ON STREETS, HIGHWAYS OR OTHERWISE FOR THE PURPOSE OF TESTING AND/OR INSPECTION OF THE TRANSMISSION AND RELATED PARTS AND COMPONENTS. I UNDERSTAND THAT YOU WILL NOT BE HELD RESPONSIBLE FOR LOSS OR DAMAGE TO VEHICLE OR ANY OTHERS LEFT IN VEHICLE IN CASE OF THEFT, ACCIDENT OR ANY OTHER CAUSE BEYOND YOUR CONTROL. I HAVE READ AND UNDERSTAND THE ABOVE AND KNOWLEDGE RECEIPT OF AN ESTIMATE AND A COPY OF THE SHOP REPAIR WARRANTY. *DAVID COLE*

IMPORTANT NOTICE

THE PRICE OF INSTALLING AN EXCHANGE REBUILT TRANSMISSION AND TORQUE CONVERTER IN YOUR VEHICLE, EXCLUDING OTHER HARD PARTS, IS \$ *450*. THE PRICE OF THIS SAME SERVICE IF WE REBUILT YOUR OWN TRANSMISSION IS \$ *240*. FREQUENTLY HARD PARTS DO NOT NEED TO BE REPLACED. THE PURPOSE OF THE TEARDOWN INSPECTION IS TO DETERMINE WHAT HARD PARTS ARE NEEDED, IF ANY.



ACTION TRANSMISSIONS
1330 North Fourth Street
San Jose, California 95112
(408) 275-1707
B.A.R. No. AD 066906

1008578

CASH CHECK CHARGE CREDIT CARD

TRANSMISSION REPAIR ORDER

NAME: [REDACTED] ADDRESS: [REDACTED] CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED] DATE: *12-17-98*

MAKE: *Ply* MODEL: *SPY* YEAR: *51* PHONE WHEN READY: YES NO LICENSE NO. SPEEDOMETER: *R511*

QTY: *1* * Code: *N* (New) *U* (Used) *AR* (Rebuilt) *OT* (Other) * ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE.

QTY	Code	Description	LABOR	AMOUNT
<i>1</i>	<i>N</i>	<i>1 IN STD PML PARTS</i>	<i>2.00</i>	<i>198.50</i>
<i>1</i>	<i>N</i>	<i>1590 M8.1</i>	<i>1.00</i>	<i>198.50</i>
<i>1</i>	<i>N</i>	<i>1590 M8.1</i>	<i>1.00</i>	<i>198.50</i>

YOU HAVE A RIGHT TO:

- (A) THE RETURN OF YOUR REPLACED PARTS UNLESS YOU ARE INFORMED OTHERWISE.
- (B) KNOW THE MAXIMUM TIME IN WHICH THE REPAIR SHOP MUST REASSEMBLE AND REINSTALL YOUR TRANSMISSION IF YOU DO NOT AUTHORIZE THE SERVICE THE SHOP RECOMMENDS.
- (C) HAVE YOUR TRANSMISSION REASSEMBLED AND INSTALLED FOR THE PRICE OF THE TEARDOWN.
- (D) KNOW THE PRICES, TERMS AND CONDITIONS OF ANY WARRANTIES, IF ANY.

CHECK THE APPROPRIATE BOXES BELOW:

- YES - SAVE MY PARTS FOR INSPECTION OR RETURN UPON RECEIPT OF THE VEHICLE OR FOR DAYS THEREAFTER.
- NO - I DO NOT WANT TO INSPECT MY PARTS.
- YES - I UNDERSTAND THAT MY TRANSMISSION WILL BE REASSEMBLED AND INSTALLED IN MY CAR WITHIN DAYS OF THE DATE SHOWN BELOW IF I CHOOSE NOT TO AUTHORIZE THE SERVICE THE SHOP RECOMMENDS.

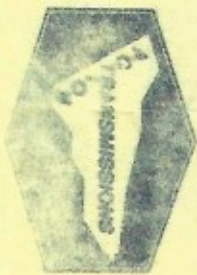
TOTAL LABOR	<i>198.50</i>
TOTAL PARTS	<i>2.00</i>
SUBLET REPAIRS	<i>45.00</i>
TOTAL BEFORE TAX	<i>245.50</i>
TAX	<i>30.00</i>
TOTAL AMOUNT	<i>275.50</i>

INTEREST WILL BE CHARGED AT A RATE OF 14.9% PER MONTH ON ACCOUNTS OVER 30 DAYS.

CUSTOMER COMMENTS: TRUCK IN, CLUTCH OUT,

ROAD CHECK & DIAGNOSIS: NOT CLUTCH, PART "Z" RMR

LINKAGE EN CLUTCH



ACTION TRANSMISSIONS
 1330 North Fourth Street
 San Jose, California 95112
 (408) 295-1707
 B.A.R. No. AD 096906

1008578

TRANSMISSION REPAIR ORDER

NAME: [Redacted] ADDRESS: [Redacted] CITY: [Redacted]
 MAKE: Ply MODEL: SAWY YEAR: 59
 CASH CHECK CHARGE CREDIT CARD
 DATE: 12-17-68

OUTSIDE-SUBLET REPAIRS

TOTAL SUBLET REPAIRS

ESTIMATE NO. 7245-112 TOTAL SUBLET REPAIRS 45 10
 MAKE Ply MODEL SAWY YEAR 59
 OPER. NO. YES NO LABOR AMOUNT

QTY	★ Code	N-New	U-Used	R-Rebuilt	OPER. NO.	LABOR	AMOUNT
1	N	STUD BALL BEARING					192.50
2	R	CLUTCH "Z" BALL LINKAGE, AND DRIVE TROD & ESCAPANT BRACKET					192.50
		WITH A FULL 30 MINUTE DAY PROB OF LABOR APPROXIMATELY ONLY AT ACTION TRANSMISSIONS					

ESTIMATED AMOUNT \$
 REVISED ESTIMATE \$
 ESTIMATE DATE 12-17-68
 HOME PLER 1 5011
 I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE ALONG WITH THE NECESSARY MATERIAL, AND HEREBY GRANT YOU AND/OR YOUR EMPLOYEES, PERMISSION TO OPERATE THE CAR, TRUCK OR VEHICLE HEREIN, DESCRIBED ON THESE TERMS, HIGHWAYS OR STREETS, AND TO REMOVE AND REINSTALL THE TRANSMISSION. AN EXPRESS MECHANIC'S LIEN IS HEREBY ACKNOWLEDGED ON ABOVE CAR, TRUCK OR VEHICLE TO SECURE THE AMOUNT OF REPAIRS THEREON. 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. I HAVE READ AND UNDERSTAND THE ABOVE AND I ACKNOWLEDGE RECEIPT OF AN ESTIMATE AND A COPY OF THE SERVICE WARRANTY WARRANTY ACT.

YOU HAVE A RIGHT TO:
 (A) THE RETURN OF YOUR REPLACED PARTS UNLESS YOU ARE INFORMED OTHERWISE.
 (B) KNOW THE MAXIMUM TIME IN WHICH THE REPAIR SHOP MUST REASSEMBLE AND REINSTALL YOUR TRANSMISSION IF YOU DO NOT AUTHORIZE THE SERVICE THE SHOP RECOMMENDS.
 (C) HAVE YOUR TRANSMISSION REASSEMBLED AND INSTALLED FOR THE PRICE OF THE TEARDOWN.
 (D) KNOW THE PRICES, TERMS, AND CONDITIONS OF ALL

CHECK THE APPROPRIATE BOXES BELOW:
 YES - SAVE MY PARTS FOR INSPECTION OR RETURN UPON RECEIPT OF THE VEHICLE OR FOR ___ DAYS THEREAFTER.
 NO - I DO NOT WANT TO INSPECT MY PARTS.
 YES - I UNDERSTAND THAT MY TRANSMISSION WILL BE REASSEMBLED AND INSTALLED IN MY CAR WITHIN ___ DAYS OF THE DATE SHOWN BELOW IF I CHOOSE

TOTAL LABOR	192.50
TOTAL PARTS	2.75
SUBLET REPAIRS	45.00
TOTAL BEFORE TAX	240.25
TAX	20
TOTAL AMOUNT	260.45

BE CHARGED AT A RATE OF 1 1/2% PER MONTH ON ACCOUNTS OVER 30 DAYS.

Invoice

TERMS AND CONDITIONS OF SALE:

1. No returns on special orders or electrical parts.
2. Merchandise may not be returned for credit without a return authorization number. Merchandise must be returned un-opened and undamaged and may be subject to a 20% restocking charge.
3. Claims for shortages, errors or price corrections must be submitted within 10 days of receipt of shipment.
4. Seller shall not be liable to customer, or to any other person, for any indirect, consequential, or other kinds of damages arising out of this transaction.
5. Attorney's fees and costs: The prevailing party to any legal proceeding shall be entitled to recover as part of its award or judgement, all of its attorney's fees, court costs, and filing fees, as actually incurred and paid in connection with or in preparation for said proceedings.

Invoice # 16303

ATLAS OBSOLETE Motor PARTs
41745 Elm Steet #103
Murrieta, CA 92562
PH: (951) 461-9005 - FAX: (951) 461-9220

This order shall become a binding contract when a copy signed by the buyer is received by the seller or when the buyer accepts delivery of the whole or any part of the goods described below.

Bill To:

Ship To:

Order Date	Ship Date	Invoice Date	Taken By	Shipped Via	PO Number	Terms
9/19/2008		9/19/2008	MB	UPS	370084346484	PayPal

PN	Desc	Qty	Shipped	Unit Price	Disc	Ext. Price
801-169	Blade, w/shield wiper, 16" (2-pack)	1		\$48.99		\$48.99

Material Cost \$48.99

Sales Tax \$3.80

Shipping Cost \$8.85

Total Invoice \$61.64



Motors

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Seller of this item? [Sign in for your status](#)

[Watch this item](#)



[View large picture](#)

Starting bid: **US \$11.77**

Your maximum bid: **US \$**

(Enter US \$11.77 or more)

End time: **Nov-13-08 04:52:00 PST**
(3 days 9 hours)

Shipping: **US \$9.88**
US Postal Service Parcel Post®
Service to [United States](#)
[outside the US](#)

Ships to: **Worldwide**

Item location: **Lewisville, Texas, United States**

History: [View history](#)

You can also:

[Get SMS or email alerts](#) [Email to a friend](#)

Meet the seller

Seller: [522aragwa](#) (107 ☆)
Feedback: **98.9 % Positive**
Member: since Jan-26-99 in United States

- [Give positive feedback](#)
- [Ask seller a question](#)
- [Add to Favorite Sellers](#)
- [View seller's other items](#)

Buy safely

1. Check the seller's reputation
Score: 552 98.9% Positive
[See member's feedback](#)

2. Check how you're protected

[Pay with PayPal](#) and the full price is covered

Listing and payment details:

Starting time: Nov-06-08 04:52:00 PST **Payment methods:** [PayPal](#)

Starting bid: US \$11.77 [See details](#)

Duration: 7-day listing



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[Motorcycles](#) ▾

[Powersports](#) ▾

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1957 - 1959 DODGE CHRYSLER PLYMOUTH DEBOTO - GAS PEDAL

Bidder or seller of this item? [Sign in for your status](#)



Current bid: **US \$9.95**

Your maximum bid: **US \$**
(Enter US \$10.45 or more)

End time: **5 hours 16 mins** (Dec-21-08 17:00:00 PST)

Shipping: **US \$6.95**

Meet the seller

Seller: [19fatboy66](#) (377)

Feedback: **99.8 % Positive**
Member: since Oct-13-02

- [See detailed feedback](#)
- [Ask seller a question](#)
- [Add to Favorite Sellers](#)
- [View seller's other items:](#)



Invoice

DATE	INVOICE #
12/22/2008	15412

SHIP TO

**P.O. Box 748
LaGrange, OH 44050**

440-355-4085 / fax: 440-355-5990

www.v v a p.com

TERMS	SHIP DATE	SHIP VIA	EXP DATE	AUTH #
PayPal	12/22/2008	UPS		
QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
1	1	120346080850 - fuel tank sending unit 57-59 sport fury Shipping & Handling	89.99 10	89.99 10.00
			Total	\$99.99

RETURNS: You may return a part for any reason in its original container in the same condition it was upon shipment within 30 days. If the part is defective, let us know. We accept NO RETURNS and MAKE NO REFUNDS, ADJUSTMENTS OR EXCHANGES AFTER 30 DAYS OF OUR SHIPPING DATE. THERE ARE ABSOLUTELY NO EXCEPTIONS TO THIS POLICY. To receive a refund, A COPY OF THE ORIGINAL INVOICE MUST BE INCLUDED ALONG WITH A REASON FOR THE RETURN.
NO GUARANTEES, WARRANTIES OR REFUNDS ON ELECTRICAL PARTS FOR ANY REASON.

STOCKTON WHEEL

Since 1883

1-800-395-9433

648 W. Fremont St. • Stockton, CA 95203
www.stocktonwheel.com

INVOICE

INVOICE #	INVOICE DATE
52883	02/04/2010



Page: 1

SOLD TO: _____

SHIP TO: _____

Reference: SO #55590
P.O. #: 60 PLYM SAVOY
Job #:
Account #: 29433

Department: SHOP
Event: REPEAT CUSTOMER
Terms: PREPAID
Due Date: 02/04/2010

Ship Via: UPS GROUND
Salesperson: BOBBY
Tax Status: TAXABLE
Tax Zone: SALES TAX

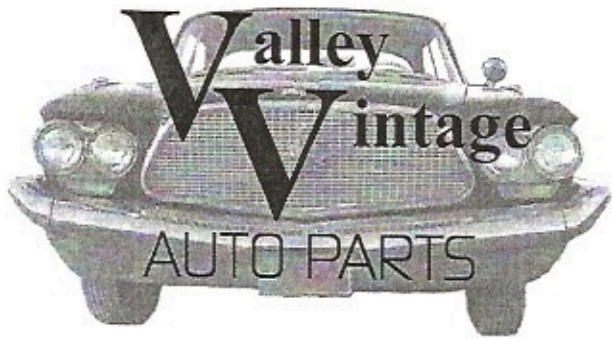
Part #	DESCRIPTION	UNIT	ORD	B/O	SHIP	PRICE	EXTENDED
SWS 4057065	15X7 5-4.50 OEM MOPR BUILD W/ 4" B.S. BLACK	EA	4.00	0.00	4.00	\$139.00	\$556.00
<FREIGHT>	UPS GROUND						\$79.00
HDL HANDLING FEE	SHIPPING & HANDLING FEE	EA	1.00	0.00	1.00	\$20.00	\$20.00
FSC FUEL SURCHARGE	FUEL SURCHARGE	EA	1.00	0.00	1.00	\$4.00	\$4.00
<DEPOSIT>	DEP 01/06/10 DEPOSIT - Visa						\$709.04
	Card #.#####1766 Auth #:816045 F99958 011110						

THANK YOU FOR YOUR BUSINESS
Check Fit on Vehicle prior to Mounting/Painting
NO WARRANTY ON PAINTED/POWDER COATED PRODUCTS
NO Returns after 30 Days.NO Returns on Custom Wheels.
20% RESTOCK FEE ON ALL RETURNS

Taxable Parts: \$556.00
Non Taxable Parts: \$4.00
Non Taxable Labor: \$20.00
Taxable Labor: \$0.00
Sales Tax: \$50.04
Shipping/Handling: \$79.00

Payments: \$709.04

AMOUNT DUE: \$0.00



P.O. Box 748
LaGrange, OH 44050

Invoice

DATE	INVOICE #
9/28/2011	17373

SHIP TO

TERMS	SHIP DATE	SHIP VIA	www.v v a p.com	EXP DATE	AUTH #
PayPal	9/28/2011	UPS			

QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
1	1	1882665 lock Shipping & Handling	39.99	39.99 11.00
<i>No change</i>				

RETURNS: You may return a part for any reason in its original container in the same condition it was upon shipment within 30 days. If the part is defective, let us know. We accept NO RETURNS and MAKE NO REFUNDS, ADJUSTMENTS OR EXCHANGES

Total *50.99*

BOBS CLASSIC AUTO GLASS

29898 E. Enid Rd.
 Eugene, OR 97402
 800-624-2130
 Fax: 541-925-3280

Date	Invoice #
5/11/2015	11651

PAID
 5/11/2015

Bill To	Ship To

P.O. Number	Rep	Via
	DLT	Truck Freight

Quantity	Item Code	Description	Price Each	Amount
1	DW454	1959 Plymouth Savoy 2dr sedan windshield GBN	475.00	475.00
1	shipping	Shipping charge	100.00	100.00

6-5-2015

credit card		Total	\$575.00
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T.O.E. PERFORMANCE PRODUCTS

A DIVISION OF T.O.E. INC
 211 DRIFTWOOD DRIVE
 SUISUN CITY, CA 94585

INVOICE

Invoice Number: 30743
 Invoice Date: Dec 28, 2017

Voice: 707-425-2996
 Fax: 707-425-0443

Bill To:

Ship to:

Customer ID	Customer PO	Payment Terms	
	Engine # 2280	Net 10th of Next Month	
Sales Rep ID	Shipping Method	Ship Date	Due Date
TONY	WILL CALL	12/28/17	1/10/18

Quantity	Item	Description	Unit Price	Amount
60.00	LABOR	DISASSEMBLE & CLEAN PARTS MAGNAFLUX PARTS SURFACE CYLINDER HEADS HONE BLOCK VALVE JOB ON CYLINDER HEADS FIT PISTONS AND RINGS TO BLOCK PAINT PARTS ASSEMBLE ENGINE DYNO TEST ENGINE	85.00	5,100.00
1.00	OUTSIDE	REBUILD ENGINE # 2280	180.00	180.00
1.00	OUTSIDE	BALANCE CRANKSHAFT	300.00	300.00
1.00	TOE-DYNO	REGRIND CAMSHAFT BREAK IN CAM AND DYNO TEST	500.00	500.00

Subtotal	6,080.00
Sales Tax	
Freight	

PLEASE READ TERMS & CONDITIONS ON REVERSE.
 PAYMENT OF THIS INVOICE CONSTITUTES AGREEMENT
 AND ACCEPTANCE BY THE BUYER OR USER TO ALL
 TERMS AND CONDITIONS ON THE REVERSE SIDE OF
 THIS INVOICE.

TOTAL	6,080.00
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T.O.E. PERFORMANCE PRODUCTS

A DIVISION OF T.O.E. INC
 211 DRIFTWOOD DRIVE
 SUISUN CITY, CA 94585

INVOICE

Invoice Number: 30745
 Invoice Date: Dec 28, 2017

Voice: 707-425-2996
 Fax: 707-425-0443

Bill To:

Ship to:

Customer ID	Customer PO	Payment Terms	
	ENGINE # 2280	Net 10th of Next Month	
Sales Rep ID	Shipping Method	Ship Date	Due Date
TONY	WILL CALL	12/28/17	1/10/18

Quantity	Item	Description	Unit Price	Amount
1.00		SET OF PISTONS	842.40	842.40
1.00		SET OF PISTON PINS	78.11	78.11
1.00		SET OF RINGS	141.96	141.96
1.00		SET OF MAIN BEARINGS	87.84	87.84
1.00		SET OF ROD BEARINGS	60.16	60.16
1.00		SET OF CAM BEARINGS	25.35	25.35
1.00		CAMSHAFT	364.00	364.00
1.00		GASKET SET	147.28	147.28
1.00		SET OF INTAKE VALVES	96.72	96.72
1.00		SET OF EXHAUST VALVES	120.70	120.70
16.00		TAPPETS	4.27	68.32
1.00		FREEZE PLUG KIT	19.88	19.88
1.00		SET OF SPARK PLUGS	23.84	23.84
1.00		PCV VALVE	7.00	7.00
6.00		BREAKIN OIL, QT	5.00	30.00
5.00		DYNO FUEL, GAL	4.00	20.00

Subtotal	2,133.56
Sales Tax	178.69
Freight	

PLEASE READ TERMS & CONDITIONS ON REVERSE.
 PAYMENT OF THIS INVOICE CONSTITUTES AGREEMENT
 AND ACCEPTANCE BY THE BUYER OR USER TO ALL
 TERMS AND CONDITIONS ON THE REVERSE SIDE OF
 THIS INVOICE.

TOTAL	2,312.25
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