

Date	Time Disp.	Time Comp.	P.O. or Call #	Truck #	Driver #	
Customer's Name			Call Back Telephone #			
Year	Make	Model	Color	Plate #	State	Last 6 VIN #
Vehicle Location						
Service Performed or Location Towed To						
TOW CHARGES	MILEAGE CHARGES	OTHER CHARGES	MISC. CHARGES	PAID OUT	TOTAL CHARGES	<input type="checkbox"/> Shop Call <input type="checkbox"/> Auto Club <input type="checkbox"/> Paid Cash <input type="checkbox"/> Paid Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Auth. Charge
Remarks or Comments						

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