

**Wayne's Garage**  
**342-3941 Eugene 746-7142 Springfield**

**Name:** First: \_\_\_\_\_ Last: \_\_\_\_\_

**Address:**  
Street: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_

**Vehicle:**  
Model: \_\_\_\_\_ License: \_\_\_\_\_

**Services to be Performed:** \_\_\_\_\_

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**Please circle the number you can be reached TODAY.**

**Daytime** \_\_\_\_\_  
**Phone:**

**Evening** \_\_\_\_\_  
**Phone:**

**Other:** \_\_\_\_\_

**E-Mail** \_\_\_\_\_ @ \_\_\_\_\_ . \_\_\_\_\_

**Were you given an estimate? \_\_\_\_\_**

**Minimum Inspection/Diagnostic Charge: \$40.00**

**Please Sign:** \_\_\_\_\_