

Southwest Spring, Inc.

3863 West Columbus Avenue

Chicago, IL 60652

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WBE CERTIFIED**INVOICE**

INVOICE NO	246944
INVOICE DATE	07/25/2025
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499300 Mi

Cust #: CASH

S O L D T O	RAYA EXPRESS INC					
	Home: (708) 369-0169					
Resale	License	Year	Make	Model	Miles	VIN
No	P1244699	2021	FREIGHTLINER	CASCADIA	499300	FM7046

Labor PerformedALIGN - LARGE TRUCK FRONT WHEEL
ALIGN - LARGE TRUCK TANDEN**Mechanic**CURT
RICARD170.00
200.00

Parts	.00	Freight	.00	Tax	.00	MASTERCD	370.00
Labor	370.00	Misc	.00	Total	370.00		
Sublet	.00	Supplies	.00	Change	.00		

MOTOR VEHICLE REPAIR LICENSE #5614**UBOLTS ARE NON RETURNABLE****PAID MASTERCARD # 1017****THANK YOU - WE APPRECIATE YOUR BUSINESS - RETIGHTEN UBOLTS AFTER 500 MILES****Signed** _____**Date** _____

Motor Vehicle Repair Work - City of Chicago. Required under Chapter 4-228, Municipal Code.

I REQUEST THE RETURN OF PARTS REPLACED ☐ I DO NOT WANT REPLACED PARTS RETURNED TO ME

You are entitled by law to the return of all parts replaced, except those which are too heavy or large, and those required to be sent back to the manufacturer or distributor because of warranty work or an exchange agreement. You are entitled to inspect the parts which cannot be returned to you.

You are entitled to a price estimate for the repairs you have authorized. The repair price may be less than the estimate, but will not exceed the estimate by more than 10% or \$15.00, whichever is less, without your consent. You may waive your right to a written estimate and require that you be notified if the price exceeds the amount you have specified.

You may waive your right to an estimate which gives the repair shop the right to set the price without your permission. YOUR SIGNATURE BELOW INDICATES YOUR SELECTION: choose (a), (b) or (c)

(a) I request an estimate in writing before you begin repairs. Signature _____

(b) Proceed with repairs but call me for approval before continuing if price exceeds \$ _____

(c) I do not want an estimate and you may set the price of repairs. Signature _____ Date _____ Time _____

Total Revised Cost \$ _____ Explanation _____

Date/Time called _____ Phone _____ OK'd by _____

This estimated price for authorized repairs will be honored if the motor vehicle is delivered to the shop within 10 days.

ALL REPAIR WORK AND ALL PARTS USED ARE: ☐ WARRANTED ☐ NOT WARRANTED

FOR A MINIMUM OF 90 DAYS AND/OR 30,000 MILES

ANY WARRANTIES ON THE PRODUCTS SOLD HEREBY ARE THOSE MADE BY THE MANUFACTURER

THE SELLER (ABOVE NAMED DEALERSHIP) HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES EITHER EXPRESSED OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER

PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID PRODUCTS.

I hereby authorize the above repair work to be done along with the necessary materials you and your employees may operate above vehicle for the purpose of testing, inspection or delivery at my risk. An expressed mechanic's

In is hereby acknowledged on above vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to vehicle or articles lost in vehicle in case of fire, theft, accident or any other cause beyond your control.

Customer Signature _____

If outside additional work will have to be performed, I hereby give my consent.

Customer Signature _____

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