Parking Receipt

Date _____

Vehicle Make/Model: _____

License Plate No.: _____

Vehicle may be parked at _____ for a total of _____ hours, or from _____ a.m./p.m. to _____ a.m./p.m.

After _____ , vehicle will be charged at a rate of _____ per hour.

Please place this receipt on the dashboard of your car

www.PrintableCashReceipts.com

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