PAYMENT RECEIPT FOR OUTDOOR MAINTENANCE

| Service Provider's Name:Service Provider's Telephone Number:Customer's Name: | | | | | | | |
|--|------------------------|-----------------|-------------------------|---------------------|--|--|----------------------|
| | | | | Address for Service | : | | |
| | | | | | asonal contract and the actual se seasonal contract must be provid | | ized, the start date |
| DATE OF SERVICE (YY/MM/DD) | DESCRIPTION OF SERVICE | COST OF SERVICE | DATE PAID (YY/MM/DD) | | | | |
| (17,1111122) | | | (1.77 | | | | |
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| | | TOTAL PAID: [| | | | | |
| Signature of Service | Provider: | Date: | | | | | |

Personal Information on this form is collected under the authority of the Municipal Act 2001, SO 2001, c. 25 and will be used to process your application. Questions about the collection of this personal information only should be directed to the Manager, Revenue & Taxation, Revenue and Materiel Management Division, City of Mississauga, 300 City Centre Drive, Mississauga, Ontario L5B 3C1, Telephone 905-615-3200, ext. 5250. All other inquiries please call 3-1-1 or 905-615-4311.