

REPAIR INVOICE

[Company Name]
[Street Address]
[City, State, Zip]
[Phone] | [Email]

Invoice #: _____
Date: _____
P.O. #: _____

BILL TO:

[Customer Name]
[Address]
[Contact Phone]

VEHICLE INFORMATION:

VIN: _____
Unit #: _____ Year: _____
Make/Model: _____
Mileage: _____

Qty/Hrs	Description of Parts & Labor	Unit Price	Total

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Labor Subtotal:\$ _____

Parts Subtotal:\$ _____

Shop Supplies:\$ _____

Tax:\$ _____

TOTAL DUE:\$ _____

Notes / Recommendations:

I hereby authorize the repair work described above. All parts removed will be discarded unless otherwise requested.

Customer Signature: _____ Date: _____