

# ELECTRICAL REPAIR INVOICE

Shop Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Invoice #: \_\_\_\_\_

Date: \_\_\_\_\_

CUSTOMER INFORMATION Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

VEHICLE INFORMATION Year/Make/Model: \_\_\_\_\_

VIN: \_\_\_\_\_

Mileage: \_\_\_\_\_

## DIAGNOSTIC NOTES & ELECTRICAL FAULTS FOUND

Description of Parts & Labor	Qty/Hrs	Rate	Total

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Subtotal: \$ \_\_\_\_\_

Tax: \$ \_\_\_\_\_

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**TOTAL DUE: \$ \_\_\_\_\_**

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**Warranty:** All electrical repairs are warrantied for \_\_\_\_ months or \_\_\_\_ miles.

**Customer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_