

# REPAIR INVOICE

Luthier/Shop Name: \_\_\_\_\_

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

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

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

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## CUSTOMER INFORMATION

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

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

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

## INSTRUMENT DETAILS

Make/Model: \_\_\_\_\_

Serial #: \_\_\_\_\_

Finish/Color: \_\_\_\_\_

## INITIAL SETUP/CONDITION NOTES

Action (12th Fret): \_\_\_\_\_ String Gauge: \_\_\_\_\_ Relief: \_\_\_\_\_

| Description of Service / Parts | Qty/Hrs | Rate  | Total |
|--------------------------------|---------|-------|-------|
| _____                          | _____   | _____ | _____ |
| _____                          | _____   | _____ | _____ |

