

INVOICE

Paint & Bodywork Services

Invoice #: _____

Date: _____

BUSINESS INFORMATION:

Shop Name: _____

Address: _____

Phone: _____

CUSTOMER INFORMATION:

Name: _____

Address: _____

Phone: _____

Year: _____

Make: _____

Model: _____

VIN: _____

Color: _____

Paint Code: _____

Mileage In: _____

Mileage Out: _____

Description of Work (Parts & Labor)

Qty/Hrs

Price

Total

Description of Work (Parts & Labor)	Qty/Hrs	Price	Total

Notes / Warranty Terms:

Labor Total: \$ _____

Parts Total: \$ _____

Paint/Supplies: \$ _____

Tax: \$ _____

Grand Total: \$ _____

Customer Signature: _____

Technician Signature: _____

Thank you for your business!