

SERVICE INVOICE

[Service Center Name]
[Address Line 1]
[Phone Number]

Invoice #: _____
Date: _____
Advisor: _____

CUSTOMER INFO

[Name]
[Address]
[Phone]
[Email]

PAYMENT STATUS

Cash Credit Card
 Check #[_____]

Year

Make/Model

VIN

Mileage

DESCRIPTION OF SERVICE / PARTS	QTY	UNIT PRICE	TOTAL
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DESCRIPTION OF SERVICE / PARTS

QTY

UNIT PRICE

TOTAL

Labor Subtotal: \$ _____

Parts Subtotal: \$ _____

Tax: \$ _____

Total Due: \$ _____

Disclaimer: All parts carry a [Number] day warranty. Labor is guaranteed for [Number] miles or [Number] months. Not responsible for loss or damage to cars or articles left in cars in case of fire, theft, or any other cause beyond our control.

Customer Signature: _____ Date: _____