

WORK ORDER / INVOICE

Handyman Services

Order #: _____

Date: _____

PROVIDER:

Name:

Phone:

Email:

CUSTOMER / JOB SITE:

Name:

Address:

Phone:

JOB DESCRIPTION

MATERIALS & SUPPLIES

Description	Quantity	Price	Total

LABOR & SERVICES

Service Provided	Hours	Rate	Total

Material Total: \$_____

Labor Total: \$ _____

Tax / Fees: \$ _____

GRAND TOTAL: \$ _____

Customer Acceptance:

Signature & Date

Payment Status:

☐ Cash ☐ Check ☐ Credit Card

☐ Paid in Full ☐ Due on Receipt

Thank you for your business. Please make all checks payable to the provider listed above.