SERVICE INVOICE

Call Taken by _____

Schedule for _____

❑ Morning
❑ Afternoon
❑ Evening
❑ Home Call

completion Promised _____

❑Carry In

Customer	Phone	Date
Street	City	
Bill To ❑ Above	Type of Unit	

Make	Model #	Serial #
Dealer	Date Purchased	Parts ❑ warranty ❑ COD / Service ❑ warranty ❑ COD

Service Requested

Quan.	Part and Material	Amount		Summary of Charges		
				Material		
				Tax		
				Service call or Pick-up-Delivery		
				Labor or Flate Rate		
				Mileage		
				Carrying Charge		
				Total		
				Service Performed		
				Date	On / Off	Shop Serviceman
				UNIT PERFORMING SATISFACTORY		

_____
CUSTOMER'S SIGNATURE

THIS REPAIR GUARANTEED ONLY AS FOLLOWS:Workmanship performed and material replaced on this repair are warrented for ninety days after date of delivery. If trouble developes in work performed, replacement of defective parts will be made free of charge. Parts not replaced are not subject to guarantee.

SERVICE INVOICE

		Date of Order
Customer's Order No.	Phone	Helper Date
Bill To		Order Taken By
Address		❑ Day Work ❑ Contract ❑ Extra
City		
Job Name and Location		
Work Ordered By		

DESCRIPTION OF WORK

		Total Materials
		Total Labor
		Tax
❑ No One Home	Date Completed	Total Amount $

Signature _____

I hearby acknowledge the satisfactory completion of the above described work

❑ Total amount due fo above work: or

❑ Total amount due fo above work: or