

INVOICE

Invoice #: _____
Date: _____
Due Date: _____
PO #: _____

CUSTOMER INFO

Name: _____

Phone: _____

Email: _____

SERVICE LOCATION (IF DIFFERENT)

Name: _____

Phone: _____

APPLIANCE DETAILS

APPLIANCE TYPE

BRAND / MANUFACTURER

MODEL NUMBER

SERIAL NUMBER

DESCRIPTION OF SERVICES / MATERIALS	QTY	RATE	AMOUNT

NOTES / INSTRUCTIONS

Subtotal:

Tax:

Labor:

Total Due:
