

Auto Repair Invoice

Shop Name & Logo | Address | Phone | Email | Website

INVOICE

Invoice No.	Date	RO / Work Order No.	Terms: Due on receipt / Net ____
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CUSTOMER

Customer Name	Phone	Email
Address	City / State / ZIP	PO No. (fleet / business)

VEHICLE

Year	Make	Model	Color
VIN	License Plate / State	Mileage In	Mileage Out

LABOR

Description of work performed	Hrs	Rate	Amount

PARTS

Part / description	Part No.	Qty	Unit	Amount

Parts	
Labor	
Sublet / other (towing, disposal)	
Shop supplies / fees	
Subtotal	
Sales tax	
Total	
Amount paid	
Balance Due	

PAYMENT

Method: cash / card / check / other	Reference / last 4	Date paid	Received by
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WARRANTY

Parts: ____ months / ____ miles	Labor: ____ months / ____ miles	Exclusions / notes
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ACKNOWLEDGMENT

I received the vehicle and the work described above, and I agree to the total shown. Parts and labor are warranted as noted on this invoice.

Customer Signature	Date
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