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COMPUTER REPAIR INVOICE

DATE OF SERVICE	REPAIRED BY	SERVICE SUMMARY	INVOICE DATE	WORK ORDER NO.	INVOICE NO.

TECHNICIAN

COMPANY NAME	
CONTACT NAME	
ADDRESS	
ADDRESS	
ADDRESS	
TELEPHONE	
EMAIL	

LABOR	HOURS	RATE	TOTAL
		TOTAL	

CLIENT

COMPANY NAME	
CONTACT NAME	
ADDRESS	
ADDRESS	
ADDRESS	
TELEPHONE	
EMAIL	

MATERIALS	QTY	UNIT COST	TOTAL
		TOTAL	

CONFIRMATION

CLIENT (SIGNATURE)	
DATE	

TERMS + REMARKS

	SUBTOTAL	
enter percentage	TAX RATE	
	TOTAL TAX	
	OTHER	
	GRAND TOTAL	
enter initial payment amount	LESS PAYMENT	
	TOTAL DUE	

Please make check payable to

For questions concerning this invoice, please contact

THANK YOU

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