

Business Name

INVOICE

Street Address, City, ST ZIP

Phone: (000) 000-0000 Fax: (000) 000-0000

INVOICE # 00-000000

DATE 24/06/2013

**Customer
INFO**

Name
Street Address
City, ST ZIP
Phone: (000) 000-0000

**Vehicle
INFO**

Year:
Make:
Model:
Color:
Mileage:

SERVICES PERFORMED

AMOUNT

Labor	150.00
Labor: 5 hours at \$75/hr	375.00

SUBTOTAL \$ 525.00
TAX RATE 0.000%

PART NAME

PART #

QTY

UNIT PRICE

AMOUNT

Parts	2445689	5	75.00	375.00
				-
				-
				-
				-
				-

SUBTOTAL \$ 375.00
TAX RATE 7.500%

OTHER COMMENTS

1. Total payment due in 30 days
2. Please include the invoice number on your check
3. Please mail your check to the address listed above

TOTAL SERVI \$ 525.00
TOTAL PARTS \$ 375.00
TOTAL TAX \$ 28.13
TOTAL \$ 928.13

Thank You For Your Business!

Make all checks payable to:

Your Company Name

[42]

Business Name

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INVOICE #:

DATE:

Customer INFO	Name	Vehicle INFO	Year
	Street Address		Make
	City, ST ZIP		Model
	Phone: (000) 000-0000		Color
			Mileage

SERVICES PERFORMED

AMOUNT

TOTAL SERVICES

TAX RATE

PART NAME

PART #

QTY

UNIT PRICE

AMOUNT

TOTAL PARTS

TAX RATE

OTHER COMMENTS

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TOTAL SERVICES

TOTAL PARTS

TOTAL TAX

TOTAL

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Auto Repair Invoice Template

By Vertex42.com

<http://www.vertex42.com/ExcelTemplates/auto-repair-invoice.html>

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