

ABC Auto Repair

123 Main Street, Hometown, State ZIP
Phone: (123) 456-7890 | Email: info@abcautorepair.com

Work Order Invoice

Invoice No.:

Date:

Customer Name:

Phone:

Vehicle Make/Model:

License Plate No.:

Description of Service/Parts	Quantity	Unit Price	Total
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Subtotal: \$

Tax (%):

Total: \$

Mechanic Signature: _____ Date:

Customer Signature: _____