INVOICE

Sample Auto Body Workshop

address
city, state ZIP
phone, fax, web address etc.

DATE IN:
TIME IN:
INVOICE #:

INSURANCE INFORMATION:

Name
Address
City, ST ZIP
Cell Phone
Phone

Company
Claim #

R.O. #	YEAR	MAKE	MODEL	COLOR

#	Description	Quantity	Unit Price	Line Total
			SUBTOTAL	-
			TAX 5.00%	-
			SUBLET	-
			TOTAL	-
			PAID	-
			TOTAL DUE	-

CUSTOMER OWES:

THANK YOU FOR YOUR BUSINESS!