

Electrical Repair Invoice

Technician / Company

Name or Company

Address

Phone

Email

Client

Client Name

Address

Phone

Email

Invoice Details

Invoice #

Date

Due Date

Repair Service Details

Description of Service / Part	Qty	Unit Price	Line Total
Service/Part			
Service/Part			
Service/Part			

Subtotal _____

Tax _____

Total _____

Additional Notes

Technician Signature

Client Signature